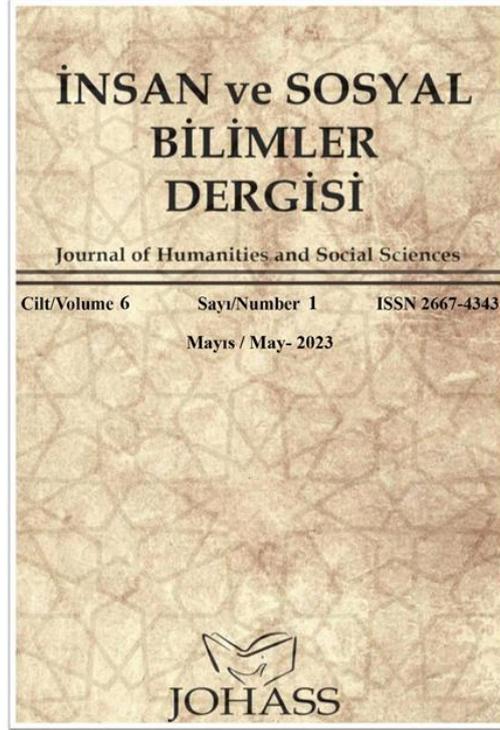


JOURNAL OF HUMAN AND SOCIAL SCIENCES (JOHASS)



<https://dergipark.org.tr/tr/pub/johass>

Investigation of Factors Affecting Nurses' Communication Levels

Fedayi YAĞAR¹

*Kahramanmaraş Sütçü İmam University, Faculty of
Economics and Administrative Sciences, Health
Management Department*

fedaiyagar@hotmail.com

Orcid ID: 0000-0002-3436-6583

Artichle Type: Research Artichle

Received: 4.10.2022

Revision received: 2.05.2023

Accepted: 26.05. 2023

Published online: 27.05. 2023

Citation: Yağar, F. (2023).
Investigation of factors affecting
nurses' communication levels. *Journal
of Human and Social Sciences*, 6(1),
86-98.

Investigation of Factors Affecting Nurses' Communication Levels

Fedayi Yağar¹

*Kahramanmaraş Sütçü İmam University, Faculty of Economics and Administrative Sciences,
Health Management Department*

Abstract

With this study, it was aimed to determine the factors affecting the communication levels of nurses who interact with the patients the most and to reveal the antecedent variables that can strengthen the communication between the nurse and the patient. In this study, which takes into account the studies conducted in Turkey, 12 research articles involving 2709 nurses were evaluated. Certain criteria were taken into account in the selection of the studies and document analysis was used in the analysis. As a result of the evaluation, it was determined that there were 18 different factors affecting the communication levels of nurses. In addition, among these factors, the most emphasized ones were the increase in the level of education, working longer in the profession, lack of employees, empathy ability, age and work intensity. Likewise, it was determined that all the factors obtained were classified under three headings as nurse-related factors (75.0%), patient-related factors (25.0%) and managerial factors (50.0%). It is believed that these findings, obtained in this age where improving the effectiveness of communication in health services has become a global priority, will make an important contribution to the literature.

Keywords: Patient, nurse, communication, educational status, professional experience.

Research Article

Received: 4.10.2022

Revision received:
2.05.2023

Accepted: 26.05.2023

Published online:
27.05.2023

¹ Corresponding author:

Assistant Prof.

fedayiyagar@hotmail.com

Orcid ID: 0000-0002-3436-6583

Introduction

In recent years, the increasingly complex needs of patients, the explosion of medical information and seismic changes in health systems have inevitably revealed the need for more effective communication (Gordon et al., 2015). With this need, an approach in which the patient is in the center has begun to be adopted today. This approach has helped patients strengthen their communication with healthcare professionals, cope with their emotions, understand important information about their disease, cope with uncertainty, and participate more in decisions about their health (Alshammari et al., 2019).

The level of communication they establish with healthcare professionals can be an important factor for patients to participate more in their own care process and to take an active role (Yağar, 2021). In this direction, when the roles of healthcare professionals and patients in the communication process are evaluated, greater responsibilities fall on healthcare professionals due to the information asymmetry factor between the parties. Otherwise, when there is no healthy communication between healthcare professionals and patients, it may be difficult for patients to clearly understand the information conveyed, and the quality of service may be compromised, the level of satisfaction may decrease and costs may increase (Ratna, 2019). At this point, health care provider behaviors such as avoiding rudeness, establishing a positive relationship, encouraging two-way dialogue, giving patients plenty of time to tell their illness stories, displaying positive attitudes when talking to patients, and using both verbal and non-verbal communication effectively - can strengthen patient communication (Büyükaslan, 2018; Madula et al., 2018). For example, a systematic review by Moslehpour et al. (2022) revealed that satisfaction can increase when good communication is established with the patient. A comprehensive study conducted in China by Wu et al. (2022) concluded that patient trust can increase with the strengthening of communication between patient and physician. Likewise, in another study conducted in Turkey, it was stated that having a good communication level with the physician could increase the quality of life of patients (Yağar, 2022).

The strong communication environment between healthcare professionals and patients is an essential clinical skill that facilitates the establishment of a true therapeutic alliance (Chichirez & Purcărea, 2018). Ineffective communication, especially in health services, can cause delayed treatment, misdiagnosis and medication errors (Foronda et al., 2016). For example, a study conducted on low-income cancer patients in the USA revealed that the probability of an accurate diagnosis decreases and the risk increases as the level of patient-physician communication decreases (Maly et al., 2015). Apart from these, organizations providing health services, health personnel (physicians and nurses), and assistants (such as administrative staff and security guards) are the distinguishing elements of the marketing mix. These organizations and individuals add value to health services with the way they interact with patients (Chichirez & Purcărea, 2018). For example, a study conducted in the USA revealed that individuals with a low level of communication with a physician are less likely to recommend their physician to another friend (Thornton et al., 2011). Likewise, another study conducted in the USA emphasized that patient-physician communication positively affects trust in physicians. The same study concluded that the H1N1 vaccination behavior improved with the increase in confidence (Borah & Hwang, 2022).

Another group that spends a lot of time with patients is nurses. These people, who are generally seen as helpful, virtuous and admirable people by the society, have been of critical importance in the healthcare team to meet the communication needs of the patients (Shattell, 2004). The period in which communication between the nurse and the patient gained importance dates back to Florence Nightingale's period in the 19th century. Since this period,

communication has been a process that has been frequently mentioned by nurses and scientists working in this field and continues until today (Fleischer et al., 2009).

One of the key elements in the integrated practice of nursing care is effective and professional communication (Lotfi et al., 2019). Nurses, who play an important role in the process of improving and improving the health of patients, greatly benefit from communication in fulfilling their duties such as providing physical care, providing emotional support and exchanging information with patients (Fakhr-Movahedi et al., 2011). In this process, nurses are expected to pay attention to many basic communication elements such as avoiding jargon, being a careful listener, being able to empathize, and using nonverbal communication clues suitable for care conditions (Kwame & Petrucka, 2020). In particular, empathy is one of the effective communication techniques with the patient. Empathy is one of the communication tools we use to understand others and share our feelings, thoughts and experiences. It plays a crucial role in effective nurse-patient communication (Babaii et al., 2021). For example, a systematic study revealed that empathy has an important role in treating and understanding patients (Winter et al., 2022). Likewise, in a study conducted in England, consultation processes of both nurses and physicians were evaluated and its effect on patient satisfaction was examined. Although there was no difference between the time spent by nurses and physicians for consultation, it was determined that nurses communicated more with patients and conveyed more information to the patient in this process, and it was stated that patient satisfaction was positively affected (Sandhu et al., 2009).

Nurse-patient communication plays an important role not only in improving the patient's relationship with the nurse, but also in improving the patient's own perception of the treatment process and outcome. Also, having effective communication skills is crucial for the practice of healthcare providers and their ability to understand the clinical symptoms and psychological and emotional needs of their patients (Alshammari et al., 2019). As with physicians, the strengthening of communication between patients and nurses can contribute to the positive development of health outcomes (Anoosheh et al., 2009; Parlayan & Dökme, 2016). In previous studies, evidence is presented that patient satisfaction increases (Lotfi et al., 2019; Uitterhoeve et al., 2009) and medication errors decrease (Manojlovich & DeCicco, 2007) with the improvement of the communication level between nurse and patient. Likewise, nonverbal communication between nurse and patient, such as eye contact or tone of voice, can provide comfort and make patients feel less anxious. This can also increase the patient's self-efficacy by positively affecting self-management activities (Mulder et al., 2015). For example, in a study conducted in the USA, it was found that individuals who experienced more positive patient-centered communication by healthcare professionals reported higher levels of self-efficacy. It was also stated that this relationship was stronger among those who reported a higher burden of chronic disease (Finney Rutten et al., 2016).

Considering all the above observations, although the subject of communication between nurses and patients in health institutions is included in the literature, as far as we know, there is no study that systematically reveals the factors affecting the communication levels of nurses in Turkey. With this study, researches on the communication levels of nurses in Turkey were examined and the answer to the following question, which forms the basis of the study, was sought:

- What are the factors affecting the communication levels of nurses?

Method

Screening Strategy and Inclusion Criteria

Document analysis method was used. With this method, both electronic and printed materials can be systematically examined and evaluated. It is tried to ensure the objectivity,

effectiveness and compatibility of ideas, especially by using articles published in scientific journals (Bowen, 2009). With a similar approach, in this study, research articles about the communication levels of nurses were evaluated by document analysis method.

PubMed and Google Scholar databases were used in the study. A total of 43 articles (PubMed=4; Google Scholar=39) were reached in the search between August 8 and August 28, 2022, in which the titles and abstracts were taken into account. Some criteria were taken into account while scanning. These criteria are; it is a research article, it reflects the views of nurses, it is written in Turkish or English, and the researches are accessible. As a result of these criteria, a significant part of the studies were eliminated and the remaining 12 research articles formed the scope of the study.

Analysis of Data

Statistical methods (frequency and percentage) were used to clearly reveal the descriptive features of the studies examined (SPSS v.26).

Limitations

Exclusion of research that takes into account the views of patients or other stakeholders (colleagues or managers) other than nurses; evaluation of research articles only; excluding postgraduate theses and congress presentations and not evaluating research written in Turkish or English language constitute the limitations of the study.

Findings

The descriptive features of the studies examined are given in Table 1. It was determined that most of the studies were written in Turkish (83.3%), quantitative techniques were used in almost all of them (91.7%), and more than half of them (58.3%) were published in the last five years. In addition, it was observed that the studies were conducted in seven different cities (Ankara, Antalya, Diyarbakir, Erzurum, Izmir, Samsun and Kars).

Table 1. Descriptive Statistics of Studies

Descriptive Features	n	%	Descriptive Features	n	%
Language					
Turkish	10	83.3			
English	2	16.7	Place of Research		
Method			Ankara	3	25.0
Quantitative	11	91.7	Antalya	1	8.3
Qualitative	1	8.3	Diyarbakir	1	8.3
Study Published Date			Erzurum	1	8.3
2007	1	8.3	İzmir	1	8.3
2011	1	8.3	Samsun	1	8.3
2015	2	16.7	Kars	1	8.3
2016	1	8.3	Unspecified	2	16.7
2017	2	16.7	General (Ankara, Eskişehir, İzmir, Erzurum)	1	8.3
2019	3	25.0			
2021	1	8.3			
2022	1	8.3			
Total	12	100.0	Total	12	100.0

The data on the sample numbers and main findings of the studies (n=12) conducted in Turkey on the communication levels of nurses are presented in Table 2. Factors related to communication levels were taken into consideration while creating the main findings. The classifications of these factors are given in Table 3 in detail.

Table 2. Studies Examined Within the Scope of the Study

Publication Number	Author(s)	Number of Sample	Key Result(s)
1	Akgün Şahin and Özdemir (2015)	578 nurse	Significant differences were found between the nurses' age, education level, weekly working hours, and empathy levels and communication levels.
2	Aktas et al. (2017)	52 nurse	Most of the nurses reported that they had communication problems with the patients. Likewise, it was stated that the factors that created the most barriers in communication with patients were language differences, lack of staff and hard work on weekdays.
3	Arda et al. (2007)	138 nurse	It has been stated that more managerial-based factors are effective. These factors were stated as fatigue, lack of personnel and excessive seizures. Likewise, it was emphasized that the education level of the patients was an important variable.
4	Aydoğan and Özkan (2020)	144 nurse	It was determined that the communication levels of the nurses were negatively affected by the anger and expression styles of the patients.
5	Bayraktar (2017)	203 nurse	It has been observed that those who work longer in the profession, those between the ages of 40-58 and graduates have better communication / interaction with patients.
6	Gökçe et al. (2021)	5 nurse	It was emphasized that factors such as increasing the number of employees, gaining therapeutic communication skills, creating an atmosphere of empathy and trust, increasing the level of education, avoiding the use of medical terms, and considering the relatives of the patients affect the communication with the patient.
7	Karadağ et al. (2015)	171 nurse	It has been stated that the duration of work in the profession, age and education level affect communication with the patient.
8	Karaman et al. (2016)	160 nurse	A positive and significant relationship was found between empathic tendency and communication levels. Likewise, a statistically significant difference was obtained between communication levels and educational status.
9	Kirca and Bademli (2019)	262 nurse	It was found that those who have children, those who are married, those who love their profession and those who receive training in communication have higher educational skills.
10	Kumcağız et al. (2011)	741 nurse	It has been determined that the communication levels of those who have a bachelor's degree or higher, have at least 20 years of work experience, and those who work as polyclinic nurses are higher.
11	Sarı and Özkan (2019)	100 nurse	It has been determined that the communication levels of those who are employed in the units they do not want (intensive care), who are exposed to difficult patient behaviors and who are constantly asked by the patients, are at a lower level.
12	Sertgöz and Demir (2022)	155 nurse	It has been determined that those with a high total working time and those with postgraduate education have better communication/interaction with patients.

It was determined that the most effective factor in improving communication levels was education (58.3%). These factors were followed by occupation for a long time (33.2%), lack of employees (25.0%), ability to empathize (25.0%), age (25.0%) and work intensity (25.0%). Apart from that, the obtained factors were reclassified under three structures as nurse, patient and managerial. Half of the factors obtained were related to the nurse's personal characteristics (n=9; 75.0%). In addition, it was determined that managerial (n=6; 50.0%) and patient-related (n=3; 25.0%) factors besides nurses' personal characteristics also played an important role on nurses' communication levels.

Table 3. Factors Affecting Nurses' Communication Levels

Number	Factors	Structure	Studies	N (%)
1	Having a high level of education (postgraduate education)	Nurse	Akgün Şahin ve Karadağ Özdemir, 2015; Bayraktar ve Eşer, 2017; Gökçe vd., 2021; Karadağ vd., 2015; Karaman Özlü vd., 2016; Kumcağız vd., 2011; Sertgöz ve Demir, 2022	7 (58.3)
2	Working longer in the profession	Nurse	Bayraktar ve Eşer, 2017; Karadağ vd., 2015; Kumcağız vd., 2011; Sertgöz ve Demir, 2022	4 (33.3)
3	Employee shortage	Managerial	Arda vd., 2007; Gökçe vd., 2021; Aktaş vd., 2017	3 (25.0)
4	Empathy ability	Nurse	Akgün Şahin ve Karadağ Özdemir, 2015; Gökçe vd., 2021; Karaman Özlü vd., 2016	3 (25.0)
5	Age	Nurse	Akgün Şahin ve Karadağ Özdemir, 2015; Bayraktar ve Eşer, 2017; Karadağ vd., 2015	3 (25.0)
6	Work intensity (excess of seizures, fatigue)	Managerial	Arda vd., 2007; Aktaş vd., 2017; Akgün Şahin ve Karadağ Özdemir, 2015	3 (25.0)
7	In-house trainings	Managerial	Gökçe vd., 2021; Kırca ve Bademli, 2019	2 (16.7)
8	Loving the job/job	Nurse	Karadağ vd., 2015; Kırca ve Bademli, 2019	2 (16.7)
9	Difficult patient behaviors (patients getting angry, shouting, refusing treatment)	Patient	Sarı ve Özkan, 2019; Aktaş vd., 2017	2 (16.7)
10	Education level of patients	Patient	Arda vd., 2007	1 (8.3)
11	Marital status (being married)	Nurse	Kırca ve Bademli, 2019	1 (8.3)
12	Having children	Nurse	Kırca ve Bademli, 2019	1 (8.3)
13	Ability to control anger	Nurse	Aydoğan ve Özkan, 2019	1 (8.3)
14	Patients' relatives	Patient	Gökçe vd., 2021	1 (8.3)
15	Environment of trust	Managerial	Gökçe vd., 2021	1 (8.3)
16	Use of medical terms	Nurse	Gökçe vd., 2021	1 (8.3)
17	Working in unwanted department	Managerial	Sarı ve Özkan, 2019	1 (8.3)
18	Language difference	Managerial	Aktaş vd., 2017	1 (8.3)

Discussion and Result

Studies on the communication levels of nurses were examined and antecedent variables that could strengthen communication with the patient were tried to be revealed. In this study conducted specifically in Turkey, 12 research articles involving 2709 nurses were evaluated and 18 different factors affecting the communication levels of nurses were identified. Likewise, it was determined that all the factors obtained were classified under three headings as nurse-related factors (n=9), patient-related factors (n=3), and administrative factors (n=6).

As a result of the examination, it was determined that the factor affecting the communication levels of nurses the most was education and as the education increased, their communication levels also improved. In addition, factors such as being older, liking their job and being more experienced were also found to be associated with communication levels. When compared with studies conducted in different countries, it was determined that the findings were compatible. For example, a study conducted on nurses in Greece suggested that educational status, continuing education and job satisfaction are important factors affecting the integration of nurses' communication skills (Kounenou et al., 2011). Likewise, a study conducted in South Korea revealed that nurses who are older, have a higher education level,

and have longer general clinical and intensive care unit experience have higher communication levels (Song et al., 2017).

A systematic review study examining the level of communication between nurses and patients (n=20) revealed that facilitating behaviors such as empathy, touching, comforting and supporting have an important place in the care of patients (Kruijver et al., 2000). Similarly, in our study, it was found that there is evidence that nurses with higher empathy levels have better communication levels. In addition, although it is known that empathy has a very important place in communication, it can also make important contributions to many other fields. For example, a study conducted in the USA reported that the level of empathy affects nurses' performance (Riggio & Taylor, 2000). At this point, it can be said that the implementation of practices and trainings that will improve the empathy levels of nurses can provide benefits both individually and institutionally.

Trainings in institutions for healthcare professionals can play an important role in the development of communication levels. In a study conducted in the USA, a short three-month training was given to the assistant physicians and nurses who had the most contact with the patients. Compared with the pre-training data, it was found that the communication levels of the participants improved significantly after the training (Allenbaugh et al., 2019). Likewise, a study conducted in Egypt revealed that the communication levels of nurses improved and their knowledge levels increased with the training given on treatment-oriented communication (Younis et al., 2015). A similar result was found in our study, and it was seen that there were studies indicating that nurses who received in-house training had better communication levels.

In terms of managerial factors, it has been determined that the factors affecting the communication levels of nurses are employee inadequacy, language differences and workload. Studies conducted in different countries have been found to support these findings. For example, in a study conducted on nurses in Iran, nurses cited heavy workload as one of the biggest barriers to communication (Anoosheh et al., 2009). Likewise, a study conducted in Saudi Arabia revealed that nurses had difficulties in communicating due to language differences (Alshammari et al., 2019).

As a result, in this study, studies conducted in Turkey on the communication levels of nurses who interact with patients the most were evaluated. It has been determined that there are 18 different factors related to the communication levels of nurses. Among these factors, the most emphasized ones were the increase in the level of education, working longer in the profession, insufficient number of employees, empathy ability, age and work intensity. Apart from this, it was determined that half of the factors related to the level of communication in the classification were factors for nurses.

It is believed that these findings obtained at the point of developing policies to improve the communication levels of nurses will guide policy makers. Apart from this, only studies reflecting the views of nurses were taken into account in this study. In future studies, a more holistic perspective can be provided by including studies on patients. In addition, only PubMed and Google Scholar databases were used in this study. In future studies, the scope of the studies can be expanded by considering databases such as CINAHL and Scopus.

Reference

Akgün Şahin, Z., & Özdemir, F. (2015). Hemşirelerin iletişim ve empati beceri düzeylerinin belirlenmesi. *Jaren, 1*(1), 1-7. <https://doi.org/10.5222/jaren.2015.001>

- Aktas, Y., Nagórska, M., & Karabulut, N. (2017). Problems in critical care nurse-patient communication: examples of Poland and Turkey. *Acta Clinica Croatica, 56*(3), 437-445. <https://doi.org/10.20471/acc.2017.56.03.10>
- Allenbaugh, J., Corbelli, J., Rack, L., Rubio, D., & Spagnoletti, C. (2019). A brief communication curriculum improves resident and nurse communication skills and patient satisfaction. *Journal of General Internal Medicine, 34*(7), 1167-1173. <https://doi.org/10.1007/s11606-019-04951-6>
- Alshammari, M., Duff, J., & Guilhermino, M. (2019). Barriers to nurse-patient communication in Saudi Arabia: an integrative review. *BMC Nursing, 18*(1), 1-10. <https://doi.org/10.1186/s12912-019-0385-4>
- Anoosheh, M., Zarkhah, S., Faghihzadeh, S., & Vaismoradi, M. (2009). Nurse-patient communication barriers in Iranian nursing. *International Nursing Review, 56*(2), 243-249. <https://doi.org/10.1111/j.1466-7657.2008.00697.x>
- Arda, H., Ertem, M., Baran, G., & Durgun, Y. (2007). Dicle Üniversitesi Araştırma Hastanesinde çalışan hekim ve hemşirelerin hasta İletişimi konusundaki görüşleri. *Florence Nightingale Hemşirelik Dergisi, 15*(59), 68-74. <https://dergipark.org.tr/tr/pub/fnjn/issue/9022/112473>
- Aydoğan, A., & Özkan, B. (2020). Hemşirelerin iletişim becerileri ve öfke yönetimlerinin belirlenmesi. *Acıbadem Üniversitesi Sağlık Bilimleri Dergisi, 1*(3), 458-463. <https://doi.org/10.31067/0.2020.295>
- Babaii, A., Mohammadi, E., & Sadooghiasl, A. (2021). The meaning of the empathetic nurse-patient communication: A qualitative study. *Journal of Patient Experience, 8*, 23743735211056432.
- Bayraktar, D. (2017). Hemşirelerin bakım odaklı hemşire-hasta etkileşimine yönelik tutum ve davranışları. *Anadolu Hemşirelik ve Sağlık Bilimleri Dergisi, 20*(3), 188-194. <https://dergipark.org.tr/en/pub/ataunihem/issue/31360/336373>
- Borah, P., & Hwang, J. (2022). Trust in doctors, positive attitudes, and vaccination behavior: the role of doctor-patient communication in H1N1 vaccination. *Health Communication, 37*(11), 1423-1431. <https://doi.org/10.1080/10410236.2021.1895426>
- Bowen, G. A. (2009). Document analysis as a qualitative research method. *Qualitative Research Journal, 9*(2), 27-40. <https://doi.org/10.3316/QRJ0902027>
- Büyükaslan, A. (2018). Sağlık iletişimde sektörel tespitler. *Erciyes İletişim Dergisi, 5*(3), 2-10. <https://doi.org/10.17680/erciyesakademia.313921>

- Chichirez, C., & Purcărea, V. (2018). Interpersonal communication in healthcare. *Journal of Medicine and Life*, 11(2), 119-126. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6101690/>
- Fakhr-Movahedi, A., Salsali, M., Negharandeh, R., & Rahnavard, Z. (2011). A qualitative content analysis of nurse–patient communication in Iranian nursing. *International Nursing Review*, 58(2), 171-180. <https://doi.org/10.1111/j.1466-7657.2010.0861.x>
- Finney Rutten, L. J., Hesse, B. W., St Sauver, J. L., Wilson, P., Chawla, N., Hartigan, D. B., . . . Arora, N. K. (2016). Health self-efficacy among populations with multiple chronic conditions: the value of patient-centered communication. *Advances in Therapy*, 33(8), 1440-1451. <https://doi.org/10.1007/s12325-016-0369-7>
- Fleischer, S., Berg, A., Zimmermann, M., Wüste, K., & Behrens, J. (2009). Nurse-patient interaction and communication: A systematic literature review. *Journal of Public Health*, 17(5), 339-353. <https://doi.org/10.1007/s10389-008-0238-1>
- Foronda, C., MacWilliams, B., & McArthur, E. (2016). Interprofessional communication in healthcare: An integrative review. *Nurse Education in Practice*, 19(1), 36-40. <https://doi.org/10.1016/j.nepr.2016.04.005>
- Gordon, J., Deland, E., & Kelly, R. (2015). Let's talk about improving communication in healthcare. *Columbia Medical Review*, 1(1), 23-27. <https://doi.org/10.7916/D8959GTH>
- Gökçe, E., Atıcı, M., & Arslan, S. (2021). Hemşireler ile hastalar arasındaki iletişim sorunları ve beklentiler: Nitel bir araştırma. *Sağlık ve Hemşirelik Yönetimi Dergisi*, 8(2), 171-180. <https://doi.org/10.5222/SHYD.2021.79206>
- Karadağ, M., Oğuz, I., Cankul, İ. H., & Abuhanoğlu, H. (2015). Hekim ve hemşirelerin iletişim becerilerinin değerlendirilmesi. *Gazi Üniversitesi İktisadi ve İdari Bilimler Fakültesi Dergisi*, 17(1), 160-179. <https://dergipark.org.tr/en/pub/gaziuiibfd/issue/28308/300823>
- Karaman, Z., Eskici, V., Gümüş, K., Yayla, A., Özlü, İ., Aksoy, D., & Yeşilay, Y. (2016). Acil birimlerde çalışan hemşirelerin iletişim becerileri ve empati düzeylerinin değerlendirilmesi *Uluslararası Hakemli Hemşirelik Araştırmaları Dergisi*, 8(1), 52-62. <https://doi.org/10.17371/UHD.2016823278>
- Kirca, N., & Bademli, K. (2019). Relationship between communication skills and care behaviors of nurses. *Perspectives in Psychiatric Care*, 55(4), 624-631. <https://doi.org/10.1111/ppc.12381>

- Kounenou, K., Aikaterini, K., & Georgia, K. (2011). Nurses' communication skills: Exploring their relationship with demographic variables and job satisfaction in a Greek sample. *Procedia-Social and Behavioral Sciences*, 30(1), 2230-2234. <https://doi.org/10.1016/j.sbspro.2011.10.435>
- Kruijver, I. P., Kerkstra, A., Bensing, J. M., & van de Wiel, H. B. (2000). Nurse-patient communication in cancer care: a review of the literature. *Cancer Nursing*, 23(1), 20-31. <https://journals.lww.com/cancernursingonline/Fulltext/2000/02000>
- Kumcağız, H., Yılmaz, M., Çelik, S. B., & Avcı, İ. A. (2011). Hemşirelerin iletişim becerileri: Samsun ili örneği. *Dicle Tıp Dergisi*, 38(1), 49-56. <https://doi.org/10.5798/diclemedj.0921.2012.04.0184>
- Kwame, A., & Petručka, P. M. (2020). Communication in nurse-patient interaction in healthcare settings in sub-Saharan Africa: A scoping review. *International Journal of Africa Nursing Sciences*, 12(1), 1-12. <https://doi.org/10.1016/j.ijans.2020.100198>
- Lotfi, M., Zamanzadeh, V., Valizadeh, L., & Khajehgoodari, M. (2019). Assessment of nurse-patient communication and patient satisfaction from nursing care. *Nursing Open*, 6(3), 1189-1196. <https://doi.org/10.1002/nop2.316>
- Madula, P., Kalembo, F. W., Yu, H., & Kaminga, A. C. (2018). Healthcare provider-patient communication: a qualitative study of women's perceptions during childbirth. *Reproductive Health*, 15(1), 1-10. <https://doi.org/10.1186/s12978-018-0580-x>
- Maly, R. C., Liu, Y., Liang, L. J., & Ganz, P. A. (2015). Quality of life over 5 years after a breast cancer diagnosis among low-income women: effects of race/ethnicity and patient-physician communication. *Cancer*, 121(6), 916-926. <https://doi.org/10.1002/cncr.29150>
- Manojlovich, M., & DeCicco, B. (2007). Healthy work environments, nurse-physician communication, and patients' outcomes. *American Journal of Critical Care*, 16(6), 536-543. <https://doi.org/10.4037/ajcc2007.16.6.536>
- Moslehpour, M., Shalehah, A., Rahman, F. F., & Lin, K.-H. (2022). The effect of physician communication on inpatient satisfaction. *Healthcare*, 10(3), 463-470. <https://doi.org/10.3390/healthcare10030463>
- Mulder, B. C., Lokhorst, A. M., Rutten, G. E., & van Woerkum, C. M. (2015). Effective nurse communication with type 2 diabetes patients: a review. *Western Journal of Nursing Research*, 37(8), 1100-1131. <https://doi.org/10.1177/0193945914531077>

- Parlayan, M. A., & Dökme, S. (2016). Özel hastanelerdeki hemşire ve hastaların iletişim seviyelerinin değerlendirilmesi: Bir hastane örneği. *Kahramanmaraş Sütçü İmam Üniversitesi Sosyal Bilimler Dergisi*, 13(2), 265-284. <https://dergipark.org.tr/en/download/article-file/222183>
- Ratna, H. (2019). The importance of effective communication in healthcare practice. *Harvard Public Health Review*, 23(1), 1-6. <https://www.jstor.org/stable/48546767>
- Riggio, R. E., & Taylor, S. J. (2000). Personality and communication skills as predictors of hospice nurse performance. *Journal of Business and Psychology*, 15(2), 351-359. <https://doi.org/10.1023/A:1007832320795>
- Sandhu, H., Dale, J., Stallard, N., Crouch, R., & Glucksman, E. (2009). Emergency nurse practitioners and doctors consulting with patients in an emergency department: a comparison of communication skills and satisfaction. *Emergency Medicine Journal*, 26(6), 400-404. <https://doi.org/10.1136/emj.2008.058917>
- Sarı, T., & Özkan, B. (2019). Yoğun bakımda çalışan hemşirelerin iletişim becerileri ile hasta bakımı konusunda zorluk yaşadıkları durumlara ilişkin yaklaşımların belirlenmesi. *Yoğun Bakım Hemşireliği Dergisi*, 23(2), 64-72. <https://dergipark.org.tr/en/pub/ybhd/issue/48447/550264>
- Sertgöz, B., & Demir, S. (2022). Psikiyatri kliniklerinde çalışan hemşirelerin bakım odaklı hemşire-hasta etkileşimine yönelik tutum ve davranışları. *Dokuz Eylül Üniversitesi Hemşirelik Fakültesi Elektronik Dergisi*, 15(1), 3-12. <https://doi.org/10.46483/deuhfed.834855>
- Shattell, M. (2004). Nurse–patient interaction: a review of the literature. *Journal of Clinical Nursing*, 13(6), 714-722. <https://doi.org/10.1111/j.1365-2702.2004.00965.x>
- Song, H. S., Choi, J., & Son, Y. J. (2017). The relationship between professional communication competences and nursing performance of critical care nurses in South Korea. *International Journal of Nursing Practice*, 23(5), 1-5. <https://doi.org/10.1111/ijn.12576>
- Thornton, R. L. J., Powe, N. R., Roter, D., & Cooper, L. A. (2011). Patient–physician social concordance, medical visit communication and patients’ perceptions of health care quality. *Patient Education and Counseling*, 85(3), 201-208. <https://doi.org/10.1016/j.pec.2011.07.015>
- Uitterhoeve, R., Bensing, J., Dilven, E., Donders, R., demulder, P., & van Achterberg, T. (2009). Nurse–patient communication in cancer care: does responding to patient's cues

- predict patient satisfaction with communication. *Journal of the Psychological, Social and Behavioral Dimensions of Cancer*, 18(10), 1060-1068. <https://doi.org/10.1002/pon.1434>
- Winter, R., Leanage, N., Roberts, N., Norman, R. I., & Howick, J. (2022). Experiences of empathy training in healthcare: A systematic review of qualitative studies. *Patient Education and Counseling*, 105(10), 3017-3037. <https://doi.org/10.1016/j.pec.2022.06.015>
- Wu, Q., Jin, Z., & Wang, P. (2022). The relationship between the physician-patient relationship, physician empathy, and patient trust. *Journal of General Internal Medicine*, 37(6), 1388-1393. <https://doi.org/10.1007/s11606-021-07008-9>
- Yağar, F. (2021). Why does patient–physician communication matter? more active patients, decreased healthcare use and costs. *Journal of Patient Experience*, 8(1), 1-6. <https://doi.org/10.1177/23743735211036524>
- Yağar, F. (2022). The effect of communication with physician and sociodemographic factors on quality of life: A survey after coronavirus disease (COVID-19) lockdown in Turkey. *Journal of Human Behavior in the Social Environment*, 32(3), 375-382. <https://doi.org/10.1080/10911359.2021.1900977>
- Younis, J. R., Mabrouk, S. M., & Kamal, F. F. (2015). Effect of the planned therapeutic communication program on therapeutic communication skills of pediatric nurses. *Journal of Nursing Education and Practice*, 5(8), 109-114. <https://doi.org/10.5430/jnep.v5n8p109>