

THE EFFECT OF NURSING ROLE IN THERAPEUTIC COMMUNICATION ON ADMITTED IN PATIENT SATISFACTION IN BANADIR HOSPITAL OF MOGADISHU

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Abstract

The purpose of this study was to determine the effect of nursing role in therapeutic communication on admitted in patient satisfaction Banadir Hospital. This was guided by three research objectives meant to; determining the level of patient satisfaction, and identifying the best strategies for patient satisfaction and factors which negatively effects on patient outcomes..The theoretical and empirical literature was reviewed to ascertain and identify the research gaps which this sought to fill. The study was mainly underpinned by a mixed To assess the cause of acute watery diarrhea under five children among care giver in Benadir hospital.

*To decrease the complications related in acute watery diarrhea under five children among care giver in Benadir hospital. To develop recommendation in decreasing of acute watery diarrhea under five children among care giver in Benadir hospital***theoretical framework of the appreciation therapeutic communication on patient.** *The study adopted the descriptive research design based on an integrated approach of the quantitative and qualitative methodologies. The sample population of study was 51 specifically included Doctors, \nurses, and patients. Data was collected by use of the questionnaire. It was analysed using the descriptive based on the SPSS programme and the interpretive method. The statistical methods were used for quantitative data while the interpretive technique was used for the qualitative data.*

Keywords group: *nursing role in therapeutic communication, and patient satisfaction in Banadir hospital muqdisho.*

1.0 Background

The concept of "therapeutic communication" refers to the process in which the nurse consciously influences a client or helps the client to a better understanding through verbal or nonverbal communication.

According to the study, under this section, the researchers found that there are some key indicators which influence patient satisfaction, enormously; Active listening, Silence reduces patient anger treats, Sharing empathy, Providing information, There is a relationship between therapeutic communication and patient satisfaction, Do you agree that therapeutic communication results in patient satisfaction, Patient self management, Adhered treatment, and Quick recovery. With regard of it, majority of the respondents from the area of study have agreed that the above mentioned list is key factors for patient satisfaction.

Phillip, (2012) stressed that Therapeutic Communication requires much Skills including; foremost, building relationships: listening, attending, responding, warmth, respect, empathy, genuiness. Secondly, self-awareness: self-disclosure, gender perception, personal and professional boundaries, confrontation, assertiveness, conflict, psychological and social factors. And lastly, understanding others: culture, defence mechanisms, end of life, electronic communication.

According to the responsiveness of the respondents, internal factors which influence the level of patient satisfaction. The results showed the confidence to the fact that the level of patient satisfaction.

2.0 Methodology

2.1 Study design

The study adapted descriptive design using quantitative approaches.

2.2 Data collection Instrument

During this study, the data was collected from 51 respondents from two different medical centers in wadajir district in Mogadishu - Somalia 2016.

The data was collected by hand and the researchers are responsible for data collection. Then, the researchers were tried to cooperate with the respondents to fill the questionnaires and also the researcher was translated the questionnaire to help the respondents understand the aim of the questionnaire and ease the completion of their task appropriately.

After the administration of the questionnaire the data collected was organized, summarized, statistically treated and drafted in Statistical Package for Social Sciences (SPSS 16.0).

2.3 Data Processing and Analysis

Data was analyzed by using statistical package of social science (SPSS.Version 16. 0) that was measured the relationship between therapeutic communication and interpersonal skills among patients aged 15-49 in warta nabadda district and the levels of therapeutic communication among patients aged

2.4 Ethical Consideration and Approval

The research was valid after when the researchers receive the permission letter from Jamhuriya University of science and technology and then the researchers were used individual and institutional data. Thus, the data collected was kept confidential and exclusively used for the purpose of Bachelor degree requirements in nursing.

A guarantee was given to the respondents that their names were not be revealed in the research report.

In addition, the team was request from the academic department, a certificate of confidentiality so as to get confidentiality and the researchers were provide

3.0 Analysis

4.3.1 The best therapeutic communication for patient satisfaction

Active listening	Frequency	Percent(%)
strongly Agree	34	67
Agree	6	12
neutral	6	12
Disagree	5	10
Total	51	100

Table4.3.1

According the table 4.3.1 above, the responds were asked to express their views about “active listening”. And 67% of the respondents denoted strongly agree, 12% of the respondents denoted agreement, while 12% of the respondents remained in neutral, although only 10% responded disagreement However, the presentation shows that almost more than half of the respondents agreed the idea of ‘solving active listening’. Whereas some few percentages (10%) of them disagreed.

4.4.2 Ineffective communication between the health care personnel

	Frequency	Percent(%)
Yes	28	55
No	23	45
Total	51	100

According to table 4.4.2 above, the respondents were asked to express their views about “Ineffective communication between the health care personnel”. And 55% of the respondents denoted ‘Yes’, 45% of the respondents denoted ‘No’. However, the presentation shows that almost more than half of the respondents agreed the idea of ‘Ineffective communication between the health care personnel’.

4.0 DISCUSSION

The findings show that the profile variables of the respondents covered in the study include their gender, age, marital status, level of education, experience and current position as summarised in Concerning age, all the respondents were between 20-50+ years and thus mature enough to be in a position to contribute information about the effect of therapeutic communication on patient satisfaction. With regard to the technology, the researcher has considered gender balance so as to collect information from both male and female equally, to give consideration for each.

In case of level of education, almost, the respondents were formally educated enough and fairly competently respond to questions about the effect of therapeutic communication on patient satisfaction. Although majority of them had enough experience and were also currently in the field of business, that made them to give much information about the area of study.

Determination about the level of patient satisfaction

According to the responsiveness of the respondents, internal factors which influence the level of patient satisfaction. The results showed the confidence to the fact that the level of patient satisfaction.

Finally, researchers found out that the level of patient satisfaction has been determined and influenced by many factors include educational level, health education, and family education. The implication of this finding is that health workers should meet the requirements of the patient satisfaction such as suitability of the place, better treatments, and active caring and so on.

Generally, the findings imply that there is some consistency in therapeutic communication and patient satisfaction but not reliably effective among some others that participated in this study. So, while this study was carried out in Mogadishu health agencies, it is not the case in equally many other hospitals.

In addition, there is evidence that some nurses stereotype patient groups Timmins,(2007). There are criticisms of teaching CIPS in nursing education that point to a lack of systematic evaluation of teaching and a difficulty in resolving the difference between the school way and the ward way Chant et al., (2002). There is a need to consider learning these skills in the clinical environment with greater involvement of clinical staff.

5.0 Conclusion

The study investigated the effect of nursing role in therapeutic communication on patient satisfaction from Al-Birri hospital in Mogadishu-Somalia. This section elaborated on the

conclusion of the research. Suitable communication, health talk, and supportive words today are highly recommended, while there are many factors which result in patient satisfaction including active listening, sharing empathy, adhered treatment, communicating with understandable language, encouraging patients that s/he will be recover as soon as possible, silence when patients treats with unhealthy words and acts badly, and so on. The findings suggested that therapeutic communication aids in continually satisfying with patients and lead to recovery. For this reason, the results suggest that such factors act as a driver of patient satisfaction, which at the end of day make them to win controlling them. Thus, when patients are satisfied with the communications offered by the doctors and nurses, they are likely to be releasing the anger, pain, and seemly being satisfied.

REFERENCES

- Aldana et al., (2001), Transcultural nursing: appropriateness for Britain. *Journal of Advances in Health and Nursing Care*, 12(4): 67–77.
- Aldana, Piechulek and Al-Sabir (2001), *Motivation, Emotion and Cognition*. Mahwah, NJ: Lawrence Erlbaum.
- Arnold & Boggs (2003), “Professional Nurture: Preceptorships for Undergraduate Nursing Students.” *American Journal of Nursing*
- Arnold & Boggs (2003), *Cognitive Therapy of Depression*. New York: Guilford.
- Bendall, E Barre, (1970), Community-based approaches to strengthen cultural competency in nursing education. *Journal of Transcultural Nursing*
- Beck, a. t., & Rush, a. J. (1995). *Cognitive therapy*. Charlton et al. (2008), 30th Anniversary commentary on Bendall E. 1976 ‘Learning for reality’. *Journal of Advanced Nursing*, 30th Anniversary Issue.
- Knapp and Hall (2002), Antiracist practice: achieving competency and maintaining professional standards, in Thompson, T and Mathias, P (eds) *Lyttle’s Mental Health and Disorder*.
- Koehler (1994), Ordinary chat and therapeutic conversation: phatic communication and mental health nursing. *Journal of Psychiatric and Mental Health Nursing*, 10(6): 678–82.
- Learning for reality. *Journal of Advanced Nursing*, 1: 3–9.
- Mascarenhas, (2001), *Evidence-based Health Communication*. Maidenhead: Open University Press and McGraw-Hill Education.
- Miller and Keane (1972). *Scope and Standards of Psychiatric-Mental Health Nursing Practice*
- Miller and Keane (1972); *Textbook of psychiatry*, tiranë