



COMMUNICATION BARRIERS ON CLINICAL COMMUNICATION SKILLS OF STUDENT NURSES IN THE HOSPITAL SETTING

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Abstract: This study investigated the impact of communication barriers on the clinical communication skills of nursing students in hospital settings in Tagum City, Philippines. Utilizing a correlational descriptive design, data were gathered from 269 third and fourth-year nursing students via a structured questionnaire. Findings revealed that students moderately experienced personal barriers (WM=3.10), such as stress and low confidence, while environmental barriers like interruptions and overcrowding were rated high (WM=3.53). Students demonstrated strong communication skills overall (OAWM=3.79-4.16), though weaknesses were noted in patient handovers. Correlation analysis showed significant positive relationships between all types of barriers and communication skills ($p < 0.05$). Regression analysis identified empathy/understanding ($\beta = 0.899$, $p = 0.007$) and clarity of expression ($\beta = 1.445$, $p = 0.003$) as significant predictors of communication barriers. The study concludes that communication barriers significantly influence students' clinical communication effectiveness. Recommendations include integrating targeted communication training, simulation-based learning, and fostering supportive clinical environments to enhance nursing education and patient care outcomes.

IndexTerms - Communication barriers, clinical communication, nursing students, hospital setting, Philippines.

Introduction

Effective communication is a cornerstone of nursing practice, essential for ensuring safe, accurate, and patient-centered care. For student nurses, developing proficient clinical communication skills is a critical component of their education and training. However, this development is often hindered by various communication barriers prevalent in fast-paced and high-stress hospital environments.

These barriers are multifaceted, encompassing personal factors such as anxiety, lack of confidence, and limited clinical experience [1], [2]. Environmental factors, including noise, frequent interruptions, and overcrowded workspaces, further disrupt effective information exchange [3]. In the Philippine context, cultural and hierarchical dynamics, such as the concept of *hiya* (shame) and respect for authority, can also inhibit students from speaking up or clarifying instructions [4]. The cumulative effect of these barriers can compromise patient safety, reduce the quality of care, and negatively impact the student's learning experience and professional growth [5].

While the importance of communication is emphasized in nursing curricula, there is a pressing need to empirically investigate the specific barriers faced by students in local clinical settings and their direct impact on developing competencies. This study aims to bridge this gap by examining the relationship between communication barriers and the clinical communication skills of nursing students in selected hospitals in Tagum City, Philippines.

Research Methodology

This study employed a correlational descriptive research design to examine the relationships between variables while describing their characteristics.

Population and Sampling. The study population consisted of third and fourth-year Bachelor of Science in Nursing (BSN) students deployed in clinical rotations at selected hospitals in Tagum City, Davao del Norte. Purposive sampling was used to select 269 participants, a sample size determined using the Raosoft formula with a 95% confidence level and a 5% margin of error.

Data Collection. Data were collected using a structured questionnaire adapted from the Department of Health (DOH) Manual on Nursing Competencies and Clinical Communication Guidelines. The instrument demonstrated good content validity through expert review and acceptable reliability (Cronbach's alpha > 0.70). The questionnaire assessed two main variables:

1. **Communication Barriers:** Measured through three domains: Personal, Environmental, and Interpersonal.
2. **Clinical Communication Skills:** Measured through three domains: Information Exchange, Use of Verbal/Non-Verbal Cues, and Empathy/Clarity/Responsiveness.

A 5-point Likert scale was used for responses. Data collection was conducted online via Google Forms after securing ethical approvals and participant consent.

Data Analysis. Data were analyzed using descriptive statistics (weighted mean) to determine the levels of barriers and skills. Pearson correlation analysis was used to determine the significant relationships between the barriers and skills. Multiple regression analysis was employed to identify which domains of communication skills significantly predicted the impact of communication barriers.

Results and Discussion

Level of Communication Barriers. The study found that nursing students experienced communication barriers at varying levels (Table 1). Personal barriers, such as forgetting details due to stress (WM=3.36) and anxiety (WM=3.19), were experienced at a moderate level (OAWM=3.10). Environmental barriers, particularly frequent interruptions (WM=3.80) and overcrowding (WM=3.73), were rated high (OAWM=3.53). Interpersonal barriers, including hierarchical differences and team conflicts, were also present at a moderate level (OAWM=3.42). These findings align with global studies highlighting stress and environmental noise as major impediments to clinical communication [2], [3].

Table 1: Impact of Communication Barriers

Barrier Category	Overall Weighted Mean	Descriptive Rating
Personal Barriers	3.10	Moderate
Environmental Barriers	3.53	High
Interpersonal Barriers	3.42	Moderate

Level of Clinical Communication Skills. Students reported a high level of competence across all communication skill domains (Table 2). They were strongest in adjusting speech to the environment (WM=4.96), listening without interrupting (WM=4.09), and acknowledging feelings (WM=4.18). A notable area for improvement was providing complete information during patient handovers (WM=3.24), which is consistent with literature identifying handoffs as a critical point for potential error [5].

Table 2: Level of Communication Skills

Skill Domain	Overall Weighted Mean	Descriptive Rating
Information Exchange	3.79	High
Use of Verbal/Non-Verbal Cues	4.16	High
Empathy, Clarity, Responsiveness	4.11	High

Relationship and Predictive Capacity. Correlation analysis revealed significant positive relationships between all types of communication barriers and communication skills ($p < 0.05$), indicating that as barriers increase, they directly affect communication effectiveness. Regression analysis further showed that two skill domains were significant predictors of communication barriers: **Empathy/Understanding** ($\beta = 0.899$, $p = 0.007$) and **Clarity of Expression** ($\beta = 1.445$, $p = 0.003$). This suggests that deficiencies in expressing empathy and communicating clearly are strongly linked to the experience of communication barriers. Listening skills and non-verbal communication were not significant predictors.

Conclusion

This study concludes that nursing students in Tagum City face significant communication barriers, primarily from their environment and personal anxieties, which directly impact their clinical communication skills. While students are generally competent, challenges remain in structured communication scenarios like handovers. The ability to communicate with empathy and clarity is paramount in overcoming these barriers.

Recommendations

Based on the findings, the following recommendations are proposed:

- For Nursing Education:** Integrate simulation-based training modules focused on stress management, assertive communication, and structured handover techniques like SBAR into the curriculum.
- For Hospital Administrators:** Create a more supportive clinical environment by minimizing interruptions, providing private spaces for conversations, and establishing clear mentorship programs.
- For Future Research:** Conduct longitudinal studies to observe the evolution of communication barriers and skills throughout the nursing program and explore interventions to mitigate these barriers.

Acknowledgment

The researcher extends sincere gratitude to the thesis advisers, panel of examiners, and the student nurses who participated in this study.

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