

ASSESSMENT OF NURSES' KNOWLEDGE, ATTITUDES, AND APPLICATION OF THERAPEUTIC COMMUNICATION SKILLS IN PATIENT CARE AT A TERTIARY CARE HOSPITAL

Shabana Pervaiz

Post RN, Superior university Department of Nursing Lahore-usmanbashir7684@gmail.com

Tasneem Saleem

Post RN, superior university Department of Nursing Lahore-nayabheer22@gmail.com

Zunira Amir

Department of Nursing Superior University, Lahore- ZuniraAmir@gmail.com

Syeda Tasneem Kauser

Nursing Director, Superior university Department of nursing Lahore-Sindy070766@gmail.com

Author Details

Received on 20 March, 2026

Accepted on 28 April, 2026

Published on 02 May, 2026

Corresponding E-mails & Authors*:

Shabana Pervaiz

usmanbashir7684@gmail.com

Abstract

Background: Therapeutic communication is a fundamental component of nursing care that enhances nurse–patient relationships, improves patient satisfaction, and supports quality healthcare delivery. It enables effective exchange of information and emotional support, contributing to better clinical outcomes. **Aim:** The study aimed to assess the knowledge, attitude, and practice of nurses regarding therapeutic communication at tertiary care hospitals in Lahore. **Methods:** A descriptive cross-sectional design was used. A sample of 154 nurses was selected through simple random sampling. Data were collected using an adopted structured questionnaire covering demographic data, knowledge, attitude, and practice. Analysis was performed using SPSS version 21. Descriptive statistics, frequency distributions, reliability, validity tests, and normality checks were applied.

Results: Findings showed that 39.0% of nurses had moderate knowledge, 33.1% low knowledge, and 27.9% high knowledge. A majority (57.1%) demonstrated a positive attitude toward therapeutic communication. Regarding practice, 61.7% of nurses reported good practice. Overall, nurses showed adequate understanding of key communication principles, although knowledge gaps were identified.

Conclusion: Nurses exhibited moderate knowledge, positive attitude, and good practice regarding therapeutic communication. Strengthening training programs and continuous professional development is recommended to improve communication competencies and enhance patient care quality.

Keywords: Therapeutic communication, nurses, knowledge, attitude, practice, cross-sectional study, tertiary care hospital.

Introduction

Effective communication is crucial in healthcare and has been defined as the exchange of information between the sender and the receiver to facilitate understanding and coordination of care (Nisa et al., 2017). Therapeutic communication is a purposeful relationship between nurses and patients that encourages empathy, trust and good communication (Kwame & Petrucka, 2020). It is a core nursing competency that affects patient satisfaction and quality of nursing care (Ferreira et al., 2016).

Research indicates that nurses' knowledge, attitude and practice of therapeutic communication has a profound influence on patient outcomes and quality of care (Dissanayake & Abeysundara, 2019). Nurse empathy and nurse-patient relationships contribute to better therapeutic communication, especially in psychiatric care (Moreno-Poyato et al., 2021). But factors like workload, time constraints and lack of training hinder effective communication (Amoah et al., 2018).

Evidence shows ineffective therapeutic communication can result in anxiety, non-adherence and poor treatment satisfaction (Fite et al., 2019). But good communication enhances trust, treatment compliance and nursing care satisfaction (Nisa et al., 2017). In sub-Saharan Africa, poor communication continues to be a concern in nursing practice, largely due to institutional barriers (Kwame & Petrucka, 2020).

The expertise of nursing students in communication skills is shaped by their clinical and academic experiences, which in turn affects their clinical practice (Ferreira et al., 2016). Research in Sri Lanka has shown nurses have moderate knowledge and practice levels of therapeutic communication, suggesting that more education is needed (Dissanayake & Abeyesundara, 2019). This is consistent with studies conducted in different hospitals with variable communication practice (Fite et al., 2019).

Factors that hinder therapeutic communication include staffing and workload issues, emotional distress and lack of organisational support (Amoah et al., 2018). These factors lead to a decline in the time nurses spend with patients, impacting quality of care. In a mental health unit, greater empathetic involvement has been linked to enhanced therapeutic relationships and recovery (Moreno-Poyato et al., 2021).

In general, therapeutic communication is an important aspect of nursing care which affects patient satisfaction and health outcomes. However, knowledge, attitude and practice gaps persist in various health care settings. Programme enhancement and clinical communication skills among nurses are crucial to improving health care and patient centeredness (Kwame & Petrucka, 2020; Nisa et al., 2017).

Method

A cross-sectional study design was used to assess nurses' knowledge, attitude, and practice regarding therapeutic communication in a tertiary care hospital. The study population included registered nurses working in Jinnah Hospital with at least five years of clinical experience in direct patient care areas such as inpatient and outpatient departments. The sample size was 154 nurses, calculated using Slovin's formula from a total population of 250 with a 0.05 margin of error. Simple random sampling technique was applied to select participants. Nurses working in administrative roles, nursing students, interns, and those on leave or refusing consent were excluded. Data were collected using an adopted structured questionnaire consisting of four sections: demographic characteristics, knowledge, attitude, and practice of therapeutic communication. Ethical approval was obtained from the institutional ethics committee of Superior University, and informed consent was ensured.

Data Collection Procedure

After obtaining institutional permission, eligible participants were approached and informed about the study objectives. Nurses who agreed to participate provided written informed consent. The questionnaire was distributed personally to selected respondents in clinical areas. Participants completed the tool independently and returned it to the researcher. Confidentiality and anonymity were strictly maintained during the entire process. Data collection was conducted over a nine-month period, ensuring adequate time for recruitment and response collection across different hospital departments.

Data Analysis Procedure

Collected data were entered and analyzed using SPSS version 21. Descriptive statistics were applied to summarize demographic variables and study responses. Frequency distributions and percentages were computed to present nurses' knowledge, attitude,

and practice regarding therapeutic communication. Results were organized in tables for clear interpretation. Data were checked for completeness before analysis, and findings were interpreted in relation to study objectives.

Results

Demographic Analysis

The demographic profile shows that the majority of participants were aged 20–25 years (41.6%), followed by 26–30 years (31.2%), 31–35 years (20.1%), and above 35 years (7.1%). Females dominated the sample (85.1%), while males represented only 14.9%. In terms of marital status, more than half of the nurses were married (57.1%) compared to single participants (42.9%). Regarding qualification, Post RN nurses were slightly higher (36.4%), followed by BSN (33.1%) and Diploma in General Nursing (30.5%). Most participants had 5–10 years of experience (73.4%), and the majority were working in medical units (47.4%), followed by gynae (19.5%), other units (18.2%), and surgical units (14.9%). These findings indicate a young, experienced, and predominantly female nursing workforce.

Table 1: Demographic Characteristics of Nurses (N = 154)

Variable	Category	Frequency (%)
Age	20–25 years	64 (41.6%)
	26–30 years	48 (31.2%)
	31–35 years	31 (20.1%)
	>35 years	11 (7.1%)
Gender	Male	23 (14.9%)
	Female	131 (85.1%)

Marital Status	Single	66 (42.9%)
	Married	88 (57.1%)
Qualification	Diploma	47 (30.5%)
	Post RN	56 (36.4%)
	BSN	51 (33.1%)
Experience	5–10 years	113 (73.4%)
	11–15 years	32 (20.8%)
	16–20 years	9 (5.8%)
Unit	Medical	73 (47.4%)
	Surgical	23 (14.9%)
	Gynae	30 (19.5%)
	Others	28 (18.2%)

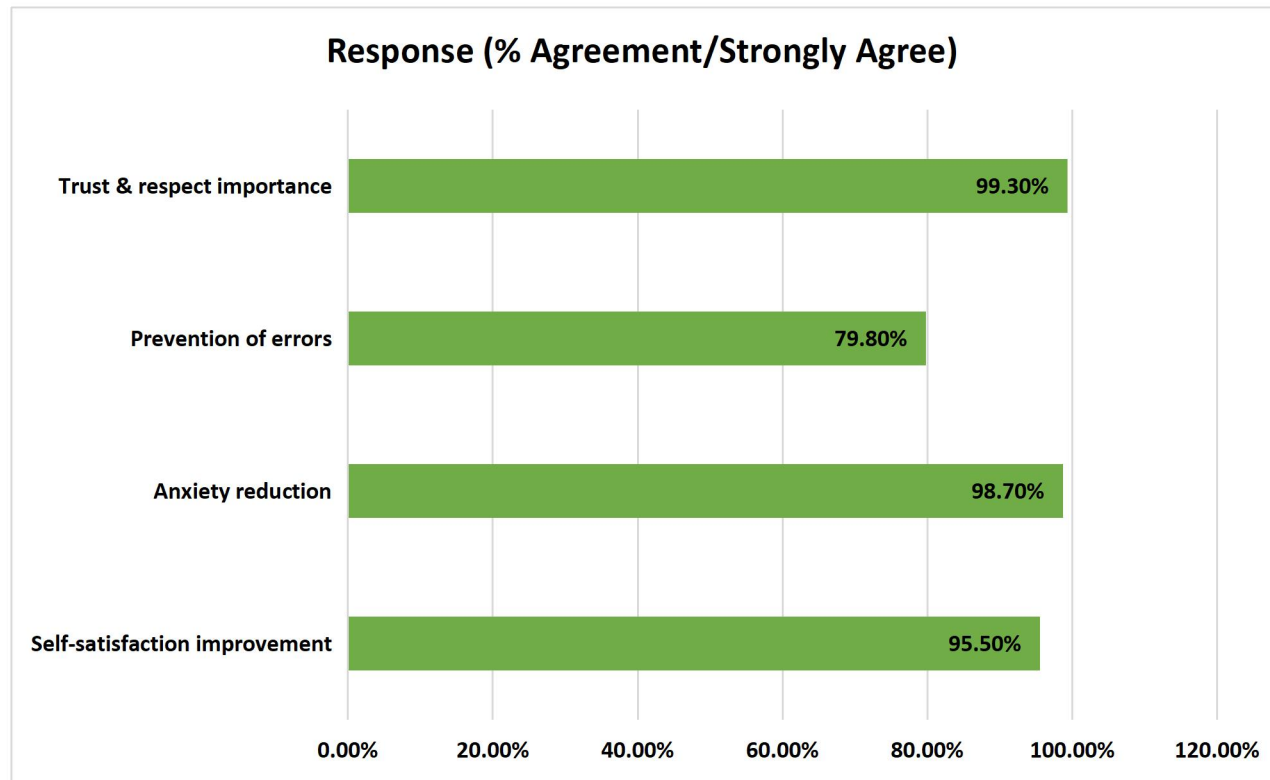
The results demonstrate that nurses possessed generally moderate to good knowledge regarding therapeutic communication concepts. A considerable proportion of participants demonstrated correct understanding of key concepts such as therapeutic communication encouraging expression of feelings (51.9% strongly agree), active listening as an essential component (57.1% strongly agree), and empathy as understanding patient reality (51.9% agree). Most nurses also recognized the importance of privacy (63.6% strongly agree) and communication exchange (47.4% strongly agree). However, overall knowledge categorization revealed 39.0% moderate knowledge, 33.1% low knowledge, and only 27.9% high knowledge, indicating variation in knowledge levels among nurses.

Table 2: Nurses' Knowledge Regarding Therapeutic Communication

Knowledge Domain	Key Item	Correct Response (%)
Expression of feelings	Strongly agree	51.9%
Active listening	Strongly agree	57.1%
Empathy	Agree	51.9%
Privacy importance	Strongly agree	63.6%
Overall knowledge level	Moderate	39.0%
	Low	33.1%
	High	27.9%

The findings indicate a generally positive attitude among nurses towards therapeutic communication. A large proportion agreed that it improves self-satisfaction (52.6% agree, 42.9% strongly agree), reduces patient anxiety (47.4% agree, 51.3% strongly agree), and prevents medical errors (50.6% agree). Nurses also strongly supported the importance of trust and respect (59.7% strongly agree). However, overall attitude classification shows 57.1% positive attitude and 42.9% negative attitude, suggesting that although most nurses hold favorable perceptions, a considerable proportion still demonstrates gaps in attitude development.

Figure 1: Nurses' Attitude Towards Therapeutic Communication



The study revealed that nurses demonstrated good practical application of therapeutic communication in clinical settings. Most nurses reported always applying communication in health education (70.8%), pre- and post-operative care (73.4%), and patient admission (54.5%). Communication with hearing-impaired patients was also frequently practiced (61.7%). Interaction with family members was reported as always practiced by 57.8%. Overall, 61.7% of nurses demonstrated good practice, while 38.3% showed poor practice, indicating that while clinical application is generally strong, a notable proportion still requires improvement.

Table 3: Nurses’ Practice of Therapeutic Communication

Practice Area	“Always” Response (%)
---------------	-----------------------

Health education	70.8%
Pre/post-operative care	73.4%
Patient admission	54.5%
Hearing-impaired patients	61.7%
Family communication	57.8%
Overall practice	Good: 61.7%
	Poor: 38.3%

Discussion

This study investigated nurses' knowledge, attitude and practice of therapeutic communication in tertiary care hospitals of Lahore. The results showed moderate knowledge, positive attitude and good practice of the respondents. Overall, the findings show that nurses are aware of the main elements of therapeutic communication and there is a difference in level of knowledge in some areas. The findings demonstrate the role of communication skills in quality of nursing care, as well as patient outcomes as previously reported.

The distribution of demographic data revealed a higher proportion of young nurses, females, married and nursing experience of 5-10 years. This is also evident in other nursing workforce studies where women predominate because of the global gender ratio of women in nursing (Nisa et al., 2017). The presence of more nurses from medical units is consistent with hospital workforce distribution where medical units have greater staffing needs. Similar patterns were reported in studies by Fite et al. (2019), suggesting that experience and clinical practice impacts on communication.

Knowledge results showed a large number of nurses had average knowledge about therapeutic communication. Similar results were found in Baghdad City where nurses showed average knowledge (Yas & Mohammed, 2016). Dissanayake and Abeysundara (2019) in Sri Lanka also reported moderate knowledge, implying universal applicability. Another study by Ferreira et al. (2016) found that nursing students have varying knowledge based on practical experience, confirming the current study's findings that knowledge develops with experience, but has gaps in some areas.

The knowledge items in particular demonstrated adequate knowledge of fundamental concepts such as active listening, empathy, verbal and non-verbal communication skills, and patient confidentiality. This was also found in Kwame and Petrucka (2020) where nurses acknowledged communication techniques were crucial in interacting with patients. Responses that reflect physiological parameters of communication concepts related to ABG reflect sufficient theoretical knowledge. Results differ from a study by Amoah et al. (2018) where factors such as workload and training limited knowledge of communication in practice.

Surveys on attitude revealed positive views about therapeutic communication. It was linked with alleviating patient anxiety, enhancing patient satisfaction and avoiding medical errors. Similarly, Moreno-Poyato and colleagues (2021) found significant relationship between empathy and therapeutic relationship in psychological care, consistent with present findings. Positive attitude proportion is similar to reports from Ethiopia by Fite et al. (2019), where nurses recognised it an important aspect of nursing practice. The proportion of negative attitudes is significant, implying lack of motivation and support.

Practice outcomes indicated most nurses use therapeutic communication often in clinical practice (patient admission, health education and family-building discussions). This finding is consistent with Sri Lanka where nurses scored good practice levels (Dissanayake & Abeysundara, 2019). Nisa et al. (2017) found communication contributes to positive patient satisfaction and better care outcomes, reinforcing high practice levels. Kwame and Petrucka (2020) noted that practice level depended on workload and environmental factors, which might account for variations in consistent use.

Generally, the results show harmony between knowledge, attitude and practice, but there is a need for improvement in knowledge, with relatively better attitude and practice scores. The results of Ferreira et al. (2016) and Amoah et al. (2018) indicate that education, workload and experience affect communication skills. Our findings highlight need for ongoing professional development to improve theoretical knowledge and its uniform practice in therapeutic communication.

Conclusion

The current study found that therapeutic communication knowledge, attitude and practice among nurses in tertiary care hospitals in Lahore was average, positive and satisfactory, respectively. The majority of participants demonstrated satisfactory knowledge of basic concepts of active listening, empathy, privacy and verbal and non-verbal communication, but there were still knowledge gaps among a significant number of participants. Nurses' attitude towards therapeutic communication was generally positive, with a majority of respondents recognizing the benefit of therapeutic communication in relieving patient anxiety, increasing patient satisfaction, improving quality of care and nurse-patient rapport. However, a minority of nurses had negative attitudes, suggesting a degree of variability among nurses and potential impact of

workload or workplace support. Practice results showed most nurses routinely used therapeutic communication in practice when admitting patients, teaching, after surgery, and communicating with patients and their families. However, some nurses were not consistent in their practice, which suggests further reinforcement of regular practice. In conclusion, the study found that therapeutic communication is well understood and practiced by nurses but it needs to be strengthened to attain higher competency in all aspects. Improving nursing education and training, in-service education and clinical supervision will help nurses further develop their communication skills and provide better patient care

Recommendation

Based on the findings of the study, it is recommended that healthcare institutions prioritize continuous in-service training programs focused on therapeutic communication skills for nurses. Structured workshops, seminars, and simulation-based learning sessions should be introduced to strengthen theoretical understanding and practical application of communication techniques in different clinical settings.

Nursing education programs should further emphasize therapeutic communication as a core component of the curriculum. Practical exposure during clinical rotations should be enhanced to bridge the gap between classroom knowledge and real-world application. Competency-based assessments should be incorporated to ensure effective skill development.

Hospital administrations should establish supportive work environments that encourage effective nurse–patient interaction. Adequate staffing levels should be ensured to reduce workload pressure, as excessive workload negatively affects communication quality and

consistency in practice. Supervisory systems should be strengthened to monitor and guide communication practices in clinical wards.

Regular evaluation of nurses' knowledge, attitude, and practice regarding therapeutic communication should be conducted using standardized tools. Feedback mechanisms should be implemented to identify gaps and provide targeted improvement strategies. Patient satisfaction surveys may also be used to assess the effectiveness of communication in care delivery.

References

- Arnold, E. C., & Boggs, K. U. (2020). *Interpersonal relationships: Professional communication skills for nurses* (8th ed.). Elsevier.
- Alshammari, M., Duff, J., & Guilhermino, M. (2019). Barriers to nurse–patient communication in Saudi Arabia: an integrative review. *BMC nursing*, 18(1), 1-10.
- Amoah, V. M. K., Anokye, R., Boakye, D. S., Acheampong, E., Budu-Ainooson, A., Okyere, E., . . . Afriyie, J. O. (2019). A qualitative assessment of perceived barriers to effective therapeutic communication among nurses and patients. *BMC nursing*, 18, 1-8.
- Dissanayake, D., & Abeyesundara, S. (2019). Knowledge, attitude and practice regarding therapeutic communication among nurses in Kandy District, Sri Lanka.
- Ferreira, M., Silva, D., Pires, A., Sousa, M., Nascimento, M., & Calheiros, N. (2016). Clinical skills and communication in nursing students. *European Proceedings of Social and Behavioural Sciences*.
- Fite, R. O., Assefa, M., Demissie, A., & Belachew, T. (2019). Predictors of therapeutic communication between nurses and hospitalized patients. *Heliyon*, 5(10).
- Kwame, A., & Petrucka, 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, 100198.
- Maame Kissiwaa Amoah, V., Anokye, R., Boakye, D. S., & Gyamfi, N. (2018). Perceived barriers to effective therapeutic communication among nurses and patients at Kumasi South Hospital. *Cogent Medicine*, 5(1), 1459341.
- Moreno-Poyato, A. R., Rodríguez-Nogueira, Ó., & Group, M. C. W. (2021). The association between empathy and the nurse–patient therapeutic relationship in mental health units: a cross-sectional study. *Journal of Psychiatric and Mental Health Nursing*, 28(3), 335-343.

- Nisa, S., Hussain, M., Afzal, M., & Gilani, S. A. (2017). Quality of nurse patient therapeutic communication and overall patient satisfaction during their hospitalization stay. *Int J Med Sci Public Health*, 6, 675-680.
- Ritonga, S., Riadi, S., & Siregar, Z. (2020). Islamic Communication Model in Therapeutic Communication Practices at Adam Malik Hospital. *Siasat*, 5(2), 84-93.
- Rossini, P. (2021). Exploring Therapeutic Nurse-Patient Communication: Techniques and Barriers.
- Shafakhah, M., Zarshenas, L., Sharif, F., & Sarvestani, R. S. (2015). Evaluation of nursing students' communication abilities in clinical courses in hospitals. *Global journal of health science*, 7(4), 323.
- Thanasekaran, P., Yadecha, B., Upashe, S. P., & Chala, D. (2017). Knowledge, attitude and practice regarding therapeutic communication among nurses in selected Government Hospitals in Oromia, Western Ethiopia, 2016. *Am J Nurs Sci*, 6, 159-164.
- Yas, M. I. W., & Mohammed, S. H. (2016). Assessment of Nurses Knowledge about Therapeutic Communication in Psychiatric Teaching Hospitals at Baghdad City ^{مدينة} كوفة. *Kufa journal for nursing sciences*, 6(2).
- Arnold, E. C., & Boggs, K. U. (2020). *Interpersonal relationships: Professional communication skills for nurses* (8th ed.). Elsevier.
- Kourkouta, L., & Papathanasiou, I. V. (2014). Communication in nursing practice. *Materia Socio Medica*, 26(1), 65-67.
- Sheldon, L. K., Barrett, R., & Ellington, L. (2019). Difficult communication in nursing. *Journal of Nursing Scholarship*, 51(3), 282-289.
- World Health Organization. (2021). Patient safety and quality of care.