



The Application of Peplau's Theory Approach to Improve Interpersonal Relationship and Communication Skills between the Nursing Students' and the Patients' (Concept Paper)

Salida Johari¹, Abd Razak Zakaria², Umi Kalsum Mohd Salleh³

¹School of Nursing, KPJ Healthcare University, Nilai, Negeri Sembilan Malaysia.

^{2,3}Faculty of Education, University of Malaya, Malaysia

(Received: 01 March 2024

Revised: 13 April

Accepted: 08 May)

KEYWORDS

Interpersonal relationship, communication skills, nursing students and patient.

ABSTRACT:

The Peplau interpersonal relationship theory, is essential in nurse-patient interactions. In the four phases of communication process; this research studies the level of interpersonal relationship and communication skills among nursing students. This theory approach can be seen through the application of Peplau's theory in building interpersonal relationship and improving communication of nursing student and patient, starting from admission until discharge. This research also examines nursing students' ability to understand patient's behaviour and promote toward patient's health and wellbeing. Finally, a conceptual framework is introduced in building effective nurse-patient interpersonal relationship and communication.

1. Introduction

Patient-centred communication is an essential component in delivering quality health services, Treiman et al. (2017). Epstein and Street (2017), state that establishing nurse-patient relationship is essential for fulfilment of care and social needs. In addition, according to Wiechula et al. (2016), communication is fundamental to foster trust in nurse-patient relationship. However, many studies too have proven that the failure to develop nurse-patient relationship is due to barriers of communication skills. This research examines the level of communication skills through the application of Peplau's theory in improving interpersonal relationship and communication skills in promoting patient's health and wellbeing.

Focus of the Study

To determine the level of interpersonal relationships and communication skills between students and patients through Peplau's theory approach.

The Communication Barriers between Nurse-Patient

According to Cowan and Norman (2006); Andriyanto (2019); Fleischer et al. (2009); Keating et al. (2008), despite the significant benefits of patient centred communication; there have been communication barriers identified across several different practice

settings worldwide. The communication barriers between nurse-patient are:

I. Ineffective Communication Skills

These may pose risks for errors and may jeopardise patients' safety. Many reported problems are related to the decreased sense of altruism among hospital staff, including nurses as cited in Bridges et al. (2013). Study reveals that patient's complaints on the healthcare system is resulted from ineffective communication, including inadequate provision, lack of empathy, failure to value patients, concerns, exclusion of patients in care decision, Coad et al. (2018)

II. Poor Communication Skills

Several studies indicates that poor nurse-patient communication leads to poor patient management, low patient satisfaction, and more adverse outcomes. Patients are anxious and frustrated due to lack of information obtained from nurses, Amal et al. (2011). These then led to history of defaulted treatment, unhealthy lifestyle, inadequate knowledge of the illness, poor health outcomes, dissatisfaction with nurses, longer hospital stays, misunderstanding, and anxiety as pointed by Shafipour et al. (2014). Britto et al. (2004), seconded that default medical treatment and dissatisfied with nursing service are results of poor patient-nurse communication.



iii. Lack of Communication

According to (Landry, 2016), nurses believe that they have very limited time to explain to patients' families about the health of their loved, what more to do so more than once. Lack of communication often creates problems in the healthcare system and imposes extra expenses on patients, Jahromi & Ramezanli (2014).

iv. Miscommunication

According to Sladed et al. (2015), miscommunications in hospital, including errors, are high risk. Research attests that such miscommunication has caused unavoidable re-admission, adverse medication error or damaging drug interactions, and misdiagnoses; all could lead to critical consequences including death Galatzan & Carrington (2018).

The Importance of Interpersonal Relationships and Communication Skills between Nurses' and Patients'

The effectiveness of interpersonal relationship and communication skills between nurses and patients are the fundamentals in professional nursing practice. Understanding patients' viewpoint of health and illness and being able to empathize are important components of patient-centered communication. Communication is the key to every nurse -patient relationship. The Institute of Medicine (2001) identified three goals for patient-centered care: gaining the patient's perspective on illness, understanding the patient's psychosocial context, and reaching shared treatment goals based on the patient's values. To provide patient-centered communication, the nurse must explore the patient's feelings, ideas, concerns, and life experiences surrounding the impact of health and illness. The nurse must determine the patient's health expectations and agenda. Engaging in patient-centered communication requires learned skills by the nurse which include eliciting the patient's agenda: motivational interviewing, use of plain language, awareness of health literacy, specific education communication techniques of "ask-tell-ask" and "teach-back," being present with the patient or practicing mindfulness, as well as respect for the patient's wants, beliefs, and needs (Boykins, 2014). Therefore, interpersonal relationships and communication skills are very important in every stage of life but even worse when caring for the sick individual. To prove this evidence as mentioned in 'orientation phase' (refer to the first phase) , about the importance of interpersonal relationships and communication skills between nurses' and patients', the researcher used Malaysia as an example. Malaysia is multi-racial country, which is comprised of Malays, Chinese, Indians and Others. These societies are made up of different races with diverse cultures, customs,

religion and beliefs. As one of healthcare team member, nurses need to understand about these differences and develop good interpersonal relationship and effective communication skills towards their patients. Moreover, the Code of Professional conduct for nurses registered with the Nursing Board Malaysia (1998) in their Professional Nursing Practice, emphasized 'respect' for patient is very important to start the relationship. The nurse renders their care to patient regardless of ethnic's origin, nature of health problems, religious beliefs and health status. By building interpersonal relationships and communication skills between nurses' and patients', it ensures that patients understand their medical conditions, treatment options and potential risks. When patients are well informed, they can actively participate in their care.

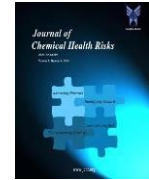
All these need essential and special skills (i.e: interpersonal relationship and communication skills). These skills are essential for every member of the healthcare team including nurses and it should always be used in each encounter with the patient (Bowlers, Mackintosh, and Tom, 2001). Effectiveness of interpersonal relationship and communication skills of the nurses can have a positive effect on the patient who is experiencing uncertainty and anxiety because his/her condition (Chant, Jenkinson, Randle, & Russell, 2002; Gorman & Sultan, 2008; Tutuk, Al & Dogan, 2002). Nurses are always the first to noticed changes in patient status, they need to have a strong focus on communication and continue flow of information (Deacon & Fairhurst 2008, Chang et al. 2011 cited in Kanerva et al., 2014). The role of nurse in relation to patients is to ensure that interpersonal relationships and communication skills is appropriate to the patient's understanding and values, and enables patients to empower themselves 29 (Blegen & Severinsson, (cited in Kanerva et al., 2015).

Applying Peplau's Theory of Interpersonal Relationship

Peplau visualized nursing as a healing art is a need for therapeutic relationship between the nurse and the patient, Belcher & Fish (1995). This means, through conversation, the skilled and trained nurse assists patient to solve his problems. Applying Peplau's theory is one of the best methods to build interpersonal relationship and to improve communication skills between them.

Introduction to Peplau's Theory and its Stages

Peplau defines nursing as an interpersonal process consisting of actions requiring participation between two or more people (Finch, 2006). Peplau's Nurse-Patient Relationship theory focuses on the relationship



between nurse and patient. This was a middle-range nursing theory and specific to the nursing practice, intervention, and proposed outcome, Parker & Smith (2010). This theory enhances the understanding of

nurse-patient communication which is influenced by complex factors including illness, environment, beliefs, attitudes, and practices within the organisation (Antai-Otong, 2007).

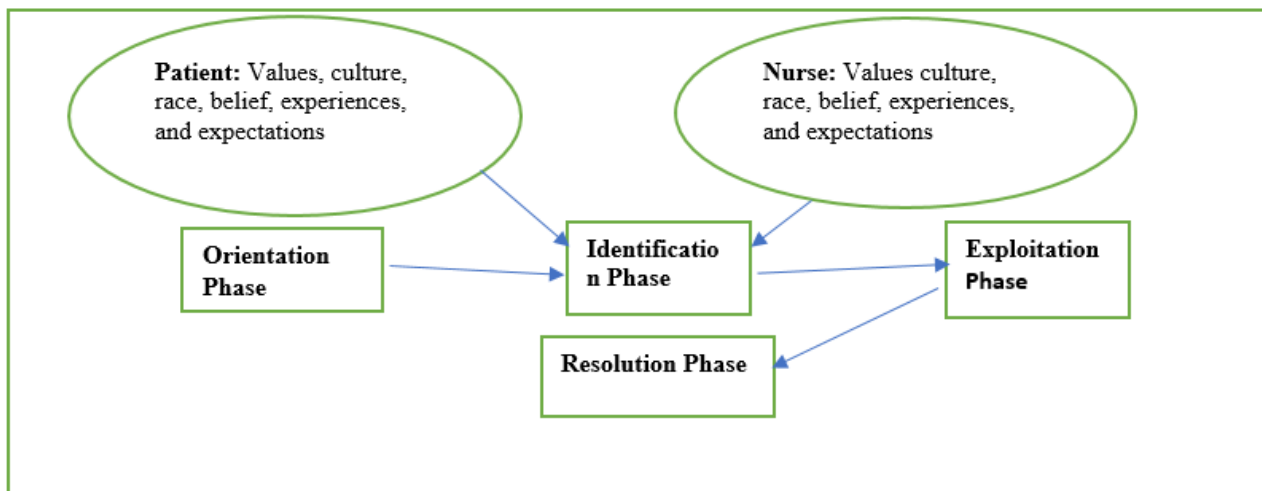


Figure 1: Diagram about the Phases of the Patient-Nurse Interpersonal Relationship

In figure 1, Peplau's theory illustrates that she values therapeutic communication as a key component of nurse-patient interaction. This process must pass through four phases to be successful in their relationship, there are 1) orientation, 2) identification, 3) exploitation; and 4) resolution, Dithole et al. (2017). Peplau's theory specifies that these phases are easily experienced by patient, from admission to discharge, while promoting patients' health, treatment, and well-being.

Orientation phase

The first phase is the initial encounter of nurse and patient. They come to know each other as a person and understand their roles and expectations. Peplau describes that the essence of nursing is the Nurse – Patient relationship, Pearson et al. (2005).

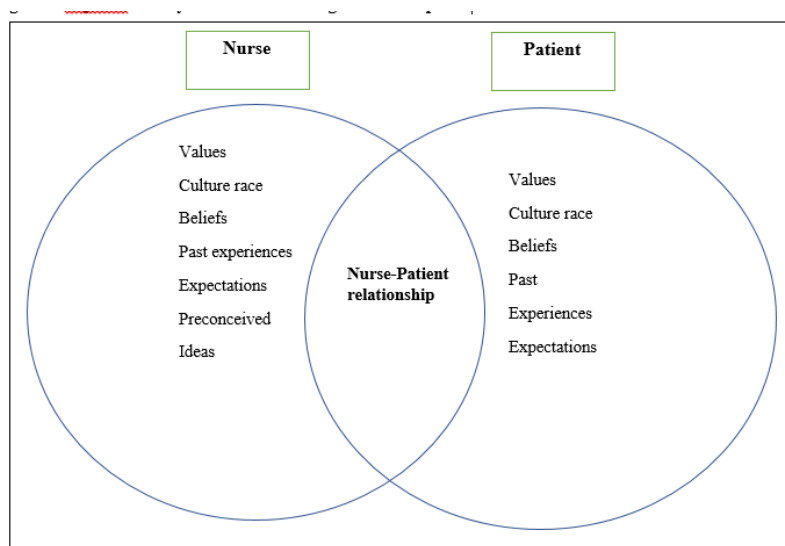


Figure 2: Peplau's Theory: Factors influencing orientation phase.



Figure 2 displays that there are various factors influencing the communication between nurses and patients. In this phase, it is revealed that communication is a complex phenomenon in nursing, and it is influenced by multiple factors, such as relationship, mood, time, space, culture, facial expression, gestures, personal understanding, and perception McCarthy et al. (2013), Kourkouta and Papathanasiou (2014). When Nurses face challenges such as interrupted conversation or hostile body language; they may become defensive, or argumentative. According to Barraclough (2000), 'poor communication and unhelpful attitudes from healthcare professionals, particularly at the time of diagnosis, can have a lasting and deleterious effect on patients. This may occur at any time and place, between individuals or groups, when there is a disagreement or difference in their values, attitudes, needs, or expectation, Conerly & Tripathi (2004).

To overcome these challenging factors in orientation phase, nurses need to always demonstrate interest, concern and competency towards patients' and learn to control their own reactions Pearson et al. (2005). With effective communication skills, nurses /nursing students respond and explain her roles, identify problems, use available resources and services while rapport is established. Gough et al. (2009), state that communication skills affect people's experience towards hospitalisation, as well as the nurses' role in communicating clear plans. Pearson et al. (2005), reveal that the professional is required to ensure patient understands the need for appropriate care. This is obtained through ongoing education and revision of theory.

Nurses explore the patient's fear and anxiety, thereafter, set objectives for interaction, and help as support person. The nurse or nursing student clarify their roles in the process of communication. Reader, Gillespie and Roberts (2014) define communication as the use of speech or other means to exchange information, thoughts and feelings among people, O'Hagan, Manias & Elder et al. (2013) discover that nurses' perspective of effective communication revolves around time, task rapport, and patients' agreement on what has been communicated.

Identification Phase

In the second phase, communication stands as an essential element of building trust and comfort in nursing, hence; it is the basis of the nurse-patient relationship Dithole et al. (2017). Belcher and Fish (1995) emphasize the need for mutual respect between the nurse and patient as important part of the therapeutic communication process. Well-developed interpersonal

and communication skills are considered essential for all nurses, regardless of where they work Sharples (2013).

In this phase, (Egan, 2014) growth facilitating process is to achieve three basic goals:

- i) Help patient manage their problem in living more effectively and develop unused or under-used opportunities more fully.
- ii) Help patient become better at helping themselves in their everyday lives.
- iii) Help patient develop an action -oriented prevention mentality in their lives.

(Schuster, 2000) reveals that communication is an important part of the nursing practice and it is defined as the use of words and behaviours to construct, send, and interpret messages. In this phase, nurses are to provide information that is clear, concise, and tailored in meeting the individual's needs (Hemming, 2017). Effective communication has been linked to improved quality of care and patient satisfaction while adherence to care, leads to positive health outcomes (Burley, 2011), Kelton and Davis (2013), (Ali, 2017) and Skär & Söderberg (2018). Practicing effective patient-nurse communication contributes to high quality nursing care (Peplau, 1991). At the end of this phase, patients develop trust in nurses, view nurses as competent professional help, honest, open, respect who understand their culture, value, and beliefs.

Exploitation Phase

The third phase, (Boyd, 2012) states that empathy is the ability to experience in the present, of a situation another did some time in the past', indeed is the ability to put oneself in another person's circumstances and feelings, Kneisl and Trigoboff (2013) describe genuineness as the ability to be real or honest with others. The nurse must assist the patient to be concrete and specific rather than to speak in generalities. Effective communication has been linked to improved quality of care, patient satisfaction, and adherence to care, leading to positive health outcomes (Burley, 2011), Kelton and Davis (2013), (Ali, 2017), Skär and Söderberg (2018). Nurses meet patients and obtained essential information with unique need and priorities (Peplau, 1997). This is supported by Ito and Lambert (2002), that it is necessary for nurses to be effective communicators so that they can deliver safe and appropriate nursing care.

Resolution Phase

The final phase, patients begin to feel that his situation has improved, and start planning and pursuing goals. Many experienced nurses identify that quality of their interpersonal relationships is the most significant



element in effectively resolving the patients' state of well-being and their satisfaction, Fleischer et al. (2009)

2. Conclusion

Many studies show, practice empathy at all times in a workplace setting and effective communication will help to improve in building relationship. Interpersonal relationship and Communication skills are significant skills for nurses. These are the process human meet the survival needs, build the relationships, and experience emotions. In nursing, the interpersonal relationships and communication skills are dynamic process used to gather assessment data, to teach and persuade, and to express caring and comfort of the patients. The theory of Hildegard Peplau described from her perspective that the nurse and patient can identify problems and propose solutions together. This theory has great influence and contributions to nursing profession. Peplau assumed that every nurse-patient relationships is an interpersonal relation in which recurring difficulties of everyday living arise. Hence, she made clear how nurses /nursing students can encounter existential issues emanating from health-related problems, by deepening their understanding of interpersonal relations and effective communication skills. In a holistic viewpoint, nurses and nursing students along with their patients work together where the main objectives of the nurses are to assist patients, to cope with their situation.

In the process of developing nursing intervention, with high values as care, trust, respect, genuineness, honesty, and effective communication (McKlinton and Barnsteiner, 1999(cited in Lecharrois, 2011); nurses and nursing students demonstrate consistency and active listening (Forchuk et al., 1998 (cited in Lecharrois, 2011)). These are essential in fostering an effective therapeutic relationship. Peplau believed that theories of interpersonal relationships and communication skills are particularly relevant for healthcare workers, especially nurses/nursing students and her patient. She found that interaction phenomena that occurred between a nurse and a patient had a qualitative impact on outcomes for patients. The relationship develops through interlocking and overlapping phases. Therefore, by applying the Peplau's theory, it will help to develop and strengthening the nursing students' relationships and communication skills with patients' as well as in preparation for their future role as a nurse. Finally, this framework will be able to develop a professional, clear, and effective communication skills and interpersonal relationships are essential to the professional nursing skills set.

In conclusion, by applying Hildegard Peplau's nursing theory of interpersonal relationships to the nursing practice, the nursing students can communicate and work with the patient more efficiently toward the common goal of wellness. As the foundation for effective, supportive work environments and excellent patient care, professional communication skills and interpersonal relationships must be one goal every nurse and nursing student strives to achieve. Peplau's theory teaches the nurse and nursing student how to interact with his or her patient so that the patient feels more in control of his treatment. These can also give him the sense that the treatment can be done without the assistance of the nurse once the patient is discharge from her care.

References

1. Abbaszadeh A, Ehsani SR, Begjani J, et al. Nurses' perspectives on breaking bad news to patients and their families: a qualitative content analysis. *Journal Med Ethics Hist Med*. 2014; 718:1-7.
2. Andriyanto A. Communication barrier between nurse and patient at the hospital: a systematic review. *J Health Policy Manag*. 2019;4(2):105–10. 14.
3. Blanch-Hartigan D, Chawla N, Beckjord EI, Forsythe LP, de Moor JS, Hesse BW, Arora NK. Cancer survivors' receipt of treatment summaries and implications for patient-centered communication and quality of care. *Patient Educ Couns*. 2015;98(10):1274–9.
4. Belcher, J.R., & Fish, L.J. (1995). Hildegard E. Peplau. In *Nursing theories: The base for professional nursing practice*. Norwalk, CT: J.B. George, Appleton & Lang.
5. Bridges, J., Nicholson, C., Maben, J., Pope, C., Flatley, M., Wilkinson, C., Tziggili, M. (2013). Capacity for care: Meta-ethnography of acute care nurses' experiences of the nurse-patient relationship. *Journal of Advanced Nursing*, 69(4), 760-772. <http://dx.doi.org/10.1111/jan.12050>.
6. Burley D. Better communication in the emergency department. *Emerg Nurse*. 2011; 19(2):32–36. <https://doi.org/10.7748/en2011.05.19.2.32.c8509>.
7. Coad J, Smith J, Pontin D, Gibson F. Consult, negotiate, and involve: evaluation of an advanced communication skills program for health 630 | KIRCA AND BADEMLIcare professionals. *J Pediatr Oncol Nurs*. 2018; 35:296-307. <https://doi.org/10.1177/1043454218765136>.
8. Conerly K, Tripathi A. What is your conflict style? Understanding and dealing with your conflict style. *Journal for Quality and Participation* 2004; 27(2): 16–20.



9. Cowan DT, Norman I. Cultural competence in nursing: new meanings. *J Transcult Nurs.* 2006;17(1):82–8.
10. Daly L. Effective communication with older adults. *Nurs Stand.* 2017; 31(41):55–62. <https://doi.org/10.7748/ns.2017.e10832>.
11. Dithole KS, Thupayagale-Tshweneagae G, Akpor AO, Moleki MM. Communication skills intervention: promoting effective communication between nurses and mechanically ventilated patients. *BMC Nurs.* 2017; 16(74):1–6. <https://doi.org/10.1186/s12912-017-0268-5>.
12. Epstein R, Street RL. Patient-centered communication in cancer care: promoting healing and reducing suffering. Bethesda: National Cancer Institute, US Department of Health and Human Services, National Institutes of Health; 2007.
13. Fakhr-Movahedi A, Salsali M, Negharandeh R, Rahnavard Z. Exploring contextual factors of the nurse-patient relationship: a qualitative study. *Koomesh.* 2011; 13(1):23–25.
14. 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. <http://dx.doi.org/10.1007/s10389-008-0238-1>
15. Fisher, M. J., Broome, M. E., Friesth, B. M., Magee, T., & Frankel, R. M. (2014). The effectiveness of a brief intervention for emotion-focused nurse-parent communication. *Patient Education and Counseling,* 96(1), 72–78.
16. Galatzan, B.J., & Carrington, J.M. (2018). Exploring the state of the science of the nursing handoff communication. *CIN: Computers, Informatics, Nursing* 36(10), 484-493. <https://doi.org/10.1097/CIN.0000000000000461>.
17. Hemming L. Breaking bad news: a case study on communication in health care. *Gastrointestinal Nursing* 2017; 15(1): 43–50. <https://doi.org/10.12968/gasn.2017.15.1.43>.
18. Jones A. The foundation of good nursing practice: effective communication. *J Renal Nurs.* 2012; 4(1):37–41. <https://doi.org/10.12968/jorn.2012.4.1.37>.
19. Keatinge D, Bellchambers H, Bujack E, Cholowski K, Conway J, Neal P. Communication: principal barrier to nurse–consumer partnerships. *Int J Nurs Pract.* 2002;8(1):16–22.
20. Kourkouta L, Papathanasiou IV. Communication in nursing practice. *Mater Sociomed.*2014;26:65-67. <https://doi.org/10.5455/msm.2014.26.65-67>.
21. McCormack LA, Treiman K, Rupert D, Williams-Piehot P, Nadler E, Arora NK, Lawrence W, Street RL Jr. Measuring patient-centered communication in cancer care: a literature review and the development of a systematic approach. *Soc Sci Med.* 2011;72(7):1085–95.
22. O'Hagan S, Manias E, Elder C et al. What counts as effective communication in nursing? Evidence from nurse educators' and clinicians' feedback on nurse interactions with simulated patients. *J Adv Nurs.* 2013; 70(6):1344–1355. <https://doi.org/10.1111/jan.12296>.
23. Peplau, H.E. (1997). Peplau's theory of interpersonal relations. *Nursing Science Quarterly,* 10(4), 162-167.
24. Peplau H. *Interpersonal Relations in Nursing.* 1991/1952, Macmillan Education, London.
25. Reader TW, Gillespie A, Roberts J. Patient complaints in healthcare systems: a systematic review and coding taxonomy. *BMJ Qual Saf.* 2014; 23(8):678–689. <https://doi.org/10.1136/bmjqs-2013-002437>.
26. Royal College of Nursing. Communication methods. RCN 2015. Available at: <http://rcnhca.org.uk/top-page-001/communication-methods/>
27. Treiman K, McCormack L, Wagner L, Roach N, Moultrie R, Sanoff H, Bann C, Street RL Jr, Ashok M, Reeve BB. Factors affecting the communication experiences of newly diagnosed colorectal cancer patients. *Patient education and counseling;* 2018.
28. Treiman K, McCormack L, Wagner L, Roach N, Moultrie R, Sanoff H, Bann C, Street RL Jr, Ashok M, Reeve BB. Factors affecting the communication experiences of newly diagnosed colorectal cancer patients. *Patient education and counseling;* 2018.
29. Wiechula, Conroy, Kitson, Marshall, Whitaker, Rasmussen, 2016.
30. Wilkinson S. (1991) Factors which influence how nurses communicate with cancer patients. *Journal of Advanced Nursing* 16, 677 -688.
31. Xie, J., Ding, S., Wang, C., Liu, A. (2013). An evaluation of nursing students' communication ability during practical clinical training. *Nurse Education Today,* 33, 823–827.