

*Full Length Research Paper*

# Effect of nurse-patient relationship on patients recovery at NKST hospital Mkar, Gboko, Benue State

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The research is a cross-sectional descriptive survey conducted at NKST Hospital Mkar, Gboko, Benue State to study the nurse-patient relationship as it affects recovery of patient at the Hospital. Target population for the study was 150. Convenience sampling technique was used to select the participants after stratified sample technique was used to group the participants into different strata of nurses and patients. Data was collected through the use of self-constructed questionnaire which was administered by the researchers and trained assistants. Data collected were presented in frequency and percentage. Mean scores were used to analyze the data. 2.50 were chosen as the bench mark ( $\geq 2.5$  as criteria of acceptance). Inferential statistics (chi-square) [X<sup>2</sup>] was used to test the hypothesis at 0.05 level of significance. The findings showed that there was relative cordial nurse-patient relationship and this has impacted positively on the care of patient as most patients agreed to have been cared for psychologically- a very important aspect of patient recovery from ill-health. However, some barriers such as shortage of nurses, lack of incentives from the management to the nurses were identified as impeding on the adequate expected nurse-patient relationship. It was recommended that the nurses should work hard to deepen helping relationship between the patients and nurses even as they improve on their communication skills, verbally and non-verbally to ensure a more thrusting relationship among them.

**Keywords:** Nurse, patient, relationship, recovery, hospital.

## INTRODUCTION

Relationship is a common and complex word that has varieties of meaning. It exists between two or more parties. The manner an individual relates to people determines their level of relationship. Nurse-patient relationship is very vital for patient's recovery both physically and emotionally (Palesa et al., 2011). A good and compassionate nurse works for the well-being and improvement of his or her patient. According to Hildegard E. Peplau's interpersonal relationship model theory, nurse-client interaction is geared

towards enhancing the client's well-being, and the client may be an individual, a family, a group or a community (Doss, Depascal and Hadley, 2011). Irrespective of the competent medical care given to patient, he or she will not get satisfied if it fails to meet his psychological and emotional needs. The nurse-patient relationship depends on interaction of thoughts, feelings and action of each other. Patient will experience better health when all their needs are fully considered in the relationship (Arungwa, 2014).

According to Happ et al., (2006), everyone has personal needs such as feeling accepted, love, care, understanding, respects, identity, privacy, power, control and affection.

Nurses should use their professional skills to detect patients problems be it religious, cultural, parental, emotional or otherwise and this can only be done through a good nurse-patient relationship. Helping relationships are created through the nurse's application of scientific knowledge, understanding of human behaviours and communication and also commitment to the caring. In such relationship, the nurse assumes the role of professional help and comes to know the client as an individual who has unique health needs, human responses and a pattern of living. In good nurse-patient relationship, clients are helped to clarify needs and goals, solve problems, cope with situational or maturational cases that arise, clarify and strengthen values, reduce stress and anxiety and gain insight and self-understanding (Foster and Hawkins, 2005). Nurses occupy a very significant or strategic position. She stays with the patient more than any other professionals (i.e 24 hours). They form the highest population of hospital workers (Campbell and Davis, 2011). Patients see nurse's interaction with others and draw conclusions about the hospital based on their observation. Nurse's attitude towards their work, co-workers and the organization affects patient and family judgment of all the things they do not see behind the scenes. (Barlett et al, 2008). Without a positive nurse-patient relationship, there cannot be patient and family satisfaction and there cannot be an environment that supports anxiety-reduction and healing.

The nurse patient-relationship still remain a problem worldwide and especially at NKST Hospital Mkar. Patients' complain on nurse-patient relationship emphasized more on lack of communication with them the patient, unfriendly nurses and always wearing serious faces.

### Objectives of the study

1. Determine the nature of nurse-patient relationship at N.K.S.T hospital Mkar.
2. Find out the impact of the present relationship of nurses on the patient care.
3. Identify barriers against effective nurse-patients relationship in N.K.S.T hospital Mkar.

### Study Hypotheses

1. There is no cordial relationship between nurses and patients at NKST hospital Mkar
2. There are no impacts on the relationship of nurses on the patients care
3. There are no barriers against effective nurse-patient relationship

## METHODOLOGY

### Study design

This is a cross-sectional descriptive survey design to study the nurse-patient relationship as it affects recovery of patients at NKST Hospital Mkar Gboko, Benue State.

### Study setting

The study was conducted at NKST Hospital Mkar, Gboko L.G.A of Benue State. The hospital is private (missionary) owned hospital located along Gboko-Mkar-Katsina/Alaroad. It is one of the best secondary health care institutions in the state. The hospital is made up of many units/wards such as; Paediatric unit, maternity unit, medical and surgical units, Laboratory/diagnostic units, Ophthalmic unit, and Pharmaceutical unit. The hospital is 170 bedded hospitals with about 120 members of health staff. It serves as teaching institution to many students from; School of Nursing and Midwifery Mkar, School of health technology Mkar, School of Medical laboratory Mkar etc.

### Target population

The target population consisted of all the staff nurses of NKST hospital Mkar, patients/clients admitted in the hospital and those in out-patient department who attends health care services at NKST hospital Mkar, Gboko L.G.A of Benue State.

### Sample/sampling technique

The sample size for the population under study was 150 subjects. This is determined according to Nwana (2006) who stated that if a population is several hundred, 20% of it would be enough. A stratified sampling technique was used for this study. This is because of the heterogeneous nature of the subjects which consists of nurses and patients. Their proportion in the patient's population is shown in table 1 below in their respective strata.

Disproportionate stratified sampling was adopted and 50% of the subjects in each stratum were taken as its proportion to the parent population.

### Instrument for data collection

A self-designed, structured questionnaire was used for

**Table 1.** Respondents Strata

<b>Strata</b>	<b>Population</b>	<b>Percentage</b>
Nurse	75	50%
Patients	75	50%
<b>Total</b>	<b>150</b>	<b>100%</b>

the data collection to achieve the objectives of this study. The questionnaire has introductory part which provided detailed information about researcher, expected outcomes in the participation and instruction on how to answer the research instrument. It has sections, with each section eliciting information on the research question. Section A of the questionnaire has to do with the socio demographic data of the respondents while section B, C,D,E were designed to answer the research questions. The questionnaire comprised about 26 items that comprised of both open and close ended questions. Some part of the questionnaire consisted of 4-point Likert scale (Strongly Agree (SA) =4, Agree (A) =3, Disagree (D) =2, and Strongly Disagree (SD) =1).

#### **Method of data collection**

150 questionnaires were distributed by the researchers to all the nurses and patients/clients who were selected from the population using simple random sampling method. The questionnaires were given to the respondents at the nurses' station and respondents who could not fill theirs immediately took it home and were given opportunity to return it to a predetermined office where the researcher went to retrieve them on the second day.

#### **Method of data analysis**

The demographic data obtained from the distributed questionnaires were analyzed and presented using frequency distribution table while mean scores were used to analyze the remaining data and interpreted as from which >2.50 as positive and <2.50 as negative. Chi-square (X<sup>2</sup>) was used to test the hypotheses at 0.05 level of significance.

## **RESULT**

### **Age Status**

The age respondents shows that 10% fall within the age range of 9-14 years, 20% of them fall within the range of

15-20 years, 30% fall within the age range of 21-20 years, 20% fall within the age range of 27-32 years, 20% fall within the age range of 32 – Above. This showed that both the young adult and aged are represented in this research study.

### **Sex status**

Sex status of respondent show that 40% are male and 60% are female. This showed that both men and women were used for this study.

### **Marital status**

The marital status of the respondent show that 30% are single, 40% are married, 20% are widow and 10% are divorced. This is to say that, all were considered during the research study.

### **Educational qualification**

The educational qualification of the respondents shows that 30% attended only primary school, 40% stopped at secondary school, 20% attended tertiary institution and 10% had no formal education. This indicates that both literates and illiterates were represented in the research study.

### **Religious status**

Religious status show that 20% of the respondents were Muslims, 60% were Christians and the remaining 20% do not belong to any religious practice. This indicates that there was no discrimination based on religion on the course of carrying out this research.

From table 4 below, most of the items in the table have mean scores above 2.50. The cluster mean of 2.88 showed that that nurse-patient relationship in the hospital is fairly good.

From table 5 below, most of the items in the table have mean scores above 2.50. The cluster mean of 2.78 showed that there was good effect of nurse-patient relationship on the patients' care. The psychological care

**Table 2.** Socio-Demographic Data

<b>Age</b>	<b>Response</b>	<b>Percentage (%)</b>
9-14 years	15	10
15-20 years	30	20
21-26 years	45	30
72-32 years	30	20
33- Above	30	20
<b>Total</b>	<b>150</b>	<b>100</b>
<b>Sex</b>		
Male	60	40
Female	90	60
Total	150	100
<b>Marital Status</b>		
Single	45	3
Married	60	40
Widow	30	20
Divorced	15	10
<b>Total</b>	<b>150</b>	<b>100</b>
<b>Educational Qualification</b>		
Primary School	45	30
Secondary School	60	40
Tertiary Institution	30	20
No Formal Education	15	10
<b>Total</b>	<b>150</b>	<b>100</b>
<b>Religious Status</b>		
Islamic	30	20
Christianity	90	60
Others	30	20
<b>Total</b>	<b>150</b>	<b>100</b>

**Table 3.** Nature of Nurse-Patient Relationship in NKST Hospital Mkar

						<b>MEAN</b>
1.	Patient feel satisfied with nurses on duty in the hospital	53	68	21	8	3.11
2.	Nurses come around patient's bed frequently	51	67	24	8	3.37
3.	Patient in the hospital complaining about a misconduct of nurses in the hospital	14	29	71	36	2.14
4.	Patient in the hospital interact with nurses freely and cordially	66	57	20	7	3.21
<b>CLUSTER MEAN</b>						<b>2.88</b>

Note :< 2.50 means negative, >2.50 means positive

received by the patients-very important aspect of patient care, is a good indicator of this.

From table 6 below, some of the items in the table have mean scores above 2.50 and others below 2.50.

**Table 4.** Impact of Nurse-Patient Relationship on the Patient's Care

1.	Patient feel speedy recovery into the hands of nurses in the hospital	38	65	30	17	2.3
2.	Patient have assurance of the treatment of their cases	43	68	29	10	2.97
3.	Patient receives psychological encouragement from the nurses	41	69	37	3	2.99
4.	Patient are encouraged by the nurses to contribute to their well beings	40	68	35	7	2.94
5.	Patient feel discouraged when handled by the nurses in the hospital	11	26	98	15	2.22
<b>CLUSTER MEAN</b>						<b>2.78</b>

Note :< 2.50 means negative, >2.50 means positive

**Table 5.** Barrier Against Effective Nurse - Patient Relationship in NKST Hospital Mkar

1.	Patient like nurses who sit and discuss in their station	2	7	58	83	1.52
2.	Patient likes nurses that shout at them	1	4	63	82	1.91
3.	Patient like nurses who do not give hope of treatment of their cases	2	3	69	76	1.54
4.	Nurses likes patients that like complain/report them	3	2	71	74	1.56
5.	Incentive to nurses can promote nurse-patient relationship	63	78	6	3	3.34
6.	Good ratio of nurse to patient encourage nurses to work better and patiently	73	52	21	4	3.29
7.	Overload nurses do not have enough time with patient	84	56	60	2	3.45
8.	patient like nurses who listen to them and treat them as it may please them (patient)	89	56	5	0	3.48
<b>CLUSTER MEAN</b>						<b>2.51</b>

Note :< 2.50 means negative, >2.50 means positive

The cluster mean of 2.51 shows that if nurses are given some incentives and more of them are employed to ensure good ratio of nurse to patient (1:4) as recommended by WHO, this will ensure enhanced nurse-patient relationship.

### Testing of hypotheses

**Hypothesis 1:** There is no cordial relationship between nurses and patients at the hospital

**Hypothesis 2:** There are no impacts on the relationship of nurses on the patients care

**Hypothesis 3:** There are no barriers against effective nurse-patient relationship.

### DISCUSSION

#### The nature of nurse-patient relationship in the hospital

From table 3 above, most of the items in the table have mean scores above 2.50. The cluster mean of 2.88 showed that that nurse-patient relationship in the hospital is fairly good. However, there were still more room for improvement as some patients still feel dissatisfied with

**Table 6.** Chi-Square ( $X^2$ ) Test on the Nature of Nurse-Patient Relationship

53	46.0	7.0	49	1.07
68	55.3	12.7	151.29	2.92
21	34.0	-13.0	169.00	4.97
8	14.8	-3.8	46.24	3.12
51	46.0	5.0	25.00	0.54
67	55.3	11.3	136.89	2.48
24	36.0	-10.0	100.00	2.94
8	14.8	-6.8	46.24	3.12
14	46.0	-32.0	1024.00	22.26
29	55.3	-26.3	631.69	12.50
71	34.0	37.0	1369.00	40.26
36	14.8	21.2	449.44	30.16
66	46.0	20.0	400.00	8.70
57	55.3	1.7	2.89	0.05
20	34.0	-14.0	196.00	5.75
7	14.8	-7.8	60.84	4.11
				<b>144.96</b>

The calculated  $X^2=144.96$

The tabulated  $X^2 = 16.92$

Since the Chi-square ( $X^2$ ) test (calculated) =144.96 is greater than the tabulated value =16.92 There is therefore no statistical evidence to accept the null hypothesis (Ho). This means that there is a cordial relationship between the nurses and patients in the hospital.

**Table 7.** Chi-Square ( $X^2$ ) Test on the Impact of Nurse-Patient Relationship on the Patient Care

38	34.6	3.4	11.56	12.33
65	59.2	5.8	33.64	0.57
30	45.3	-15.3	234.09	5.17
17	10.4	6.6	43.56	4.19
43	34.6	8.4	70.56	2.04
68	59.2	8.8	77.44	1.31
29	45.3	-16.3	265.69	5.86
10	10.4	-0.4	0.16	0.02
41	34.6	6.4	40.96	1.18
69	59.2	9.8	96.04	1.62
37	45.3	-8.3	68.89	1.52
3	10.4	-7.4	54.76	5.27
40	34.6	5.4	29.16	0.84
68	59.2	8.8	77.44	1.31
35	45.3	-10.3	106.09	2.34
7	10.4	-3.4	11.56	1.11
11	34.6	-23.6	556.96	16.10
26	59.2	-33.2	1102.24	18.62
98	45.3	52.7	2777.29	61.31
15	10.4	4.6	21.16	2.03
				<b>262.43</b>

The calculated  $X^2=262.43$

The tabulated  $X^2 = 21.01$

Since the Chi-square ( $X^2$ ) test (calculated) =262.43 is greater than the tabulated value =21.01 There is therefore no statistical evidence to accept the null hypothesis (Ho). This means that nurse-patient relationship has a great impact on the care of patient.

the care given to them especially in the area of communication with the patients.

According to Nilsen, Sereika and Happ (2013) the nurse-patient relationship is the foundation for caring

**Table 8.** Chi-Square ( $X^2$ ) Test on t Barrier Against Effective Nurse –Patient Relationship.

2	39.6	-37.6	1413.76	35.70
7	32.5	-25.5	650.25	20.01
58	37.4	20.6	424.36	11.35
83	40.5	42.5	1806.25	44.60
1	39.6	-38.6	1489.96	37.63
4	32.5	-28.5	812.25	24.99
63	37.4	25.6	655.36	17.52
82	40.5	41.5	1722.25	42.52
2	39.6	37.6	141.76	35.70
3	32.5	-29.5	870.25	26.77
69	37.4	31.6	998.56	26.70
76	40.5	35.5	1260.25	31.12
3	39.6	-36.6	1339.56	33.83
2	32.5	30.5	930.25	28.62
71	37.4	33.6	1128.96	30.19
74	40.5	33.5	1122.25	27.71
63	39.6	23.4	547.56	13.83
78	32.5	45.5	2070.25	63.70
6	37.4	-31.4	985.96	26.36
3	40.5	-37.5	1406.25	34.72
73	39.6	33.4	115.56	28.17
52	32.5	19.5	380.25	11.70
21	37.4	-16.4	268.96	7.19
4	40.5	-36.5	1332.25	32.90
84	39.6	44.4	1971.36	49.78
58	32.5	25.5	650.25	20.01
6	37.4	-31.4	935.96	26.36
2	40.5	-38.5	1432.25	36.60
89	39.6	49.4	2440.36	61.63
56	32.5	23.5	552.25	16.99
5	37.4	-32.4	1049.76	28.07
0	40.5	-40.5	1640.25	40.50
				<b>973.44</b>

The calculated  $X^2=973.44$

The tabulated  $X^2 = 32.67$

Since the Chi-square ( $X^2$ ) test (calculated) =973.44 is greater than the tabulated value =32.67 There is therefore no statistical evidence to accept the null hypothesis ( $H_0$ ). This means that there are barriers affecting effective nurse-patient relationship in the hospital.

practice. Caring is a force for protecting and enhancing patient dignity. The nurse affirms patients as person rather than objectives and assists them in making choice and finding meaning to their illness experiences. Caring is morally responsible action that takes place within the

nurse-patient relationship. Caring action has its basis in the nurse responsibility to give safe and competent care when the patient is unable to care for self.

According to Baker (2011) nurse-patients relationship is a care or experience that has a powerful impact

between the nurse and the patient. It is a therapeutic and helping relationship that is based on mutual trust and respect. Studies by Lindberg and Engstrom (2011); Belcher and Jones (2009); Happ, Sereika, Garrett and Tate (2008); Mitchell (2007) lend their support to the findings of this study. The studies emphasized the need for cordial nurse-patient relationship.

### **Impacts of nurse-patient relationship on the patients' care**

From table 4 above, most of the items in the table have mean scores above 2.50. The cluster mean of 2.78 showed that there was good effect of nurse-patient relationship on the patients' care. The psychological care received by the patients-very important aspect of patient care, is a good indication of this. The findings of this study is supported by Anderson, Burman and Skar (2011) who states that a positive nurse-patient relationship strongly empowers the patients and makes great difference for patients perceived well-being and health. A patient's perception of well-being and health has shown to have a positive effect on healing. The findings is also supported by Marci et al (2014); Pope, Gallun and Kampel (2013); Hayward and Tuckey (2011); Poochikian-Sarkissian, Sidani, Ferguson-Pare, Doran (2010); Foster and Hawkins (2005) whose studies found that good inter-person relationship between the nurse and patients made the patients to realize that they have their right in the hospital and not only outside the hospital.

### **Barriers against effective nurse-patient relationship in the hospital**

From table 5 above, some of the items in the table have mean scores above 2.50 and others below 2.50. The cluster mean of 2.51 shows that if nurses are given some incentives and more of them are employed to ensure good ratio of nurse to patient (1:4) as recommended by WHO, this will ensure enhanced nurse-patient relationship. This indicates that shortage of personnel forms a barrier against effective nurse-patients relationship. Health workers especially nurse should be employed and placed accordingly to reduce the barrier against effective nurse-patient relationship. According to Aylott (2011) Nursing is a profession of immense responsibility. A nurse through her undivided attention at work and care can heal a patient and make him feel good about himself. Problems arise when the nurse is not able to perform her duties effectively due to various barriers to effective communication in nursing that we observe these days.

The shortage of personnel in the nursing profession

can create many communication barriers which hinders effective nurse-patient relationship. According to Cappabianca, Julliard, Raso, Ruggiero (2009) patients language also contributes to this barrier, if the nurse does not understand the language of the patient, she or he might not be able to meet the needs of the patients as effectively as one who understands the language. The use of medical term by nurse to interact with the patient also forms a barrier. The patient finds it difficult to understand the nurse despites his communication with nurse. This makes patients to feel reluctant on verbalizing his problem to the nurse.

### **CONCLUSION**

Based on the finding from the study and statistical analysis, the following conclusions were reached, the nature of nurse-patient relationship in NKST hospital Mkar is good and encouraging. Most of the people who attended the hospital were satisfied with the nursing care they receive. Nurses should endeavor to change their bad attitude towards patient and improve the good ones that promote the health and well-being of a patient. The relationship of nurses to patient should be monitored and encouraged when good. Nurses should also note that quarreling at patient, playing music can also account for poor nurse-patient relationship.

Nurses should be rewarded and encouraged when they do well to patient as this will urge them to do more.

### **Implications for nursing**

Nurse-patient relationship has been seen to be an important part of nursing and is central to every nursing activity. This study therefore will help nurses to know that nurse-patient relationship has an important role to play in the health of the patient and also has a psychological effect on them and their recovery. Nurses are encouraged to develop cordial relationship with patient and make them feel at ease in the hospital. Nurses are to understand that these attitude and behaviours exhibited by patients are as a result of ill health, such patient should be followed slowly and gently. Nurses are also encouraged to maintain a good relationship with the patient and also learn to be calm because nursing is a response to the human need and a nurse is a public servant.

### **RECOMMENDATION**

The researcher recommended the following;

1. The nurse and patient must also improve on their

communication skills, verbally and non-verbally.

2. The nurses should always have enough time with her patients to know more about their conditions.

3. The nurses must develop practices that will support optimum self care and well-being of the patients. They should always work towards satisfying their patients' needs.

4. The hospital management should make provisions for training and retraining of nurses in higher education and expanding their practice dimension including interpersonal skills holistic care and human relations.

5. In caring for the patients, nurses should be culturally sensitive to maintain confidentiality and should know their limitations.

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