ORIGINAL ARTICLE

Communication Skills and Professionalism: The Self-Assessment of Golestan University of Medical Sciences' Students

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Background: Communication is a human skill that can develop through learning and teaching, Although, this is an integral component of clinical activities of physicians, still the dominant attitude in medical education is biological. There is a little attention to communication skills in formal medical education program. The aim of this study was to determine communication skills and professionalism of medical students of Golestan University of Medical Sciences by self-assessment.

Methods: In this cross-sectional study in 2009, eighty medical students through non-random sampling were studied. The data collected by a valid and reliable questionnaire contained demographic, communication skills, and professional behaviors questions.

Results: Eighty% of the students were female and the mean age of them was 22.3 years. 2.5% of the students evaluated their communication skills at average level, 25% good, 56.2% very good, and 16.2% excellent. None of students were assessed as weak in communication skills. 48.8% of the students evaluated their professionalism as "good". The relationships among communication skills, professional behavior, and demographic date were not statistically significant (p>0.05).

Conclusions: Some of the evidences indicate that in spite of positive attitudes of physicians to having good behavior with patients, failure is common. Although the students evaluated their communication skills and professional behaviors at good level, however they were not in touch with real professional situations as the same independent physician.

Keywords: Professionalism, Communication Skill, Self-Assessment, Medical Student

مهارات الاتصال والعلاقات المهنية مع المرضى:التقييم الذاتي لطلاب العلوم الطبية في كلستان

الخلفية والهدف: مازالت نظرت اغلب مخططي المنهج التعليمي الطبي نظرة طبية حيوية حيث انه لم يتضمن على تدريب وتنمية المهارات للعلاقات البشرية في مجال التعليم الطبي.الرغم من هذه الدراسة هو دراسة مهارات التواصل والعلاقات المهنية مع المريض من خلال التقييم الذاتي لطلاب الطب في جامعة كلستان للعلوم الطبية.

الاسلوب: في هذه الدراسة التوصيفية المستعرضة التي جرت في عام ١٣٨٨ تم اخذ عينات من ٨٠ طالب طب حيث تمت دراستها.لجمع البيانات تم استخدام استمارات تشمل معلومات ديموغرافية ومهارات التواصل والسلوك المهني.كما ان الاسئلة بحد ذاتها كان نوعا من التقييم.وقد تم تحليل البيانات بالاحصاء الوصفي والاستدلالي.

النتائج: ٨٠ بالمئة من الطلاب هم من الاناث ومتوسط العمر كان ٢٢ سنة.تم تقييم٢.٥ بالمئة من الطلاب من حيث مهاراتهم التواصلية بمستوى متوسط.٢٥ بالمئة جيد.٦٥.٢ بالمئة جيد جدا.١٦.٢ بالمئة ممتاز.كما انه لم يقيم أي طالب نفسه من حيث مهارات التواصل بالضعيف.و٤٨.٨ من الطلاب قيموا انفسهم من حيث المنحنى الوظيفي بمستوى ((جيد)) لم تكن العلاقات بين المتغيرات ومهارات الاتصال والسلوك المهني للطلاب ذات دلالة احصائية(p بزرگتر از ٠.٠٥)

الاستنتاج: تشير نتائج الابحاث الا ان الاطباء بالرغم من نظرتهم الايجابية للتعامل الجيد مع المرضى الا انهم في تجربتهم الطبية لم يفلحوا باقامةعلاقة جيدة مع مرضاهم. مع ان الطلاب قد قيموا من حيث مهارات التواصل والعلاقات المهنية مع المرضى بمستوى((جيد)). فالطلاب الذين في حين الدراسة وبدليل قلة المسئولية التي على عائقهم تجاه مرضاهم لم نرى منهم مهنية ذات مستوى عال.

الكلمات الرئيسية: العلاقات المهنية، مهارات التواصل، التقييم الذاتي، طالب الطب.

مهارت های ارتباطی و حرفه گرایی در ارتباط با بیمار : خودارزیابی دانشجویان علوم پزشکی گلستان

زمینه و هدف: هنوز نگرش غالب برنامه ریزان آموزش پزشکی رویکرد زیستی پزشکی است و آموزش مهارت های ارتباط انسانی در برنامه رسمی آموزش پزشکی گنجانده نشده است. هدف از این مطالعه، بررسی مهارت های ارتباطی و حرفه گرایی در ارتباط با بیمار در دانشجویان پزشکی دانشگاه علوم پزشکی گلستان از طریق خودارزیابی بوده است.

روش: در این مطالعه توصیفی مقطعی در سال ۱۳۸۸، ۸۰ دانشجوی پزشکی از طریق نمونه گیری آسان مورد بررسی قرار گرفتند. برای جمع آوری داده ها از پرسشنامه حاوی اطلاعات دموگرافیک و مهارت های ارتباطی و رفتارهای حرفه ای استفاده شد. سوالات از نوع خود ارزیابی بوده است. اطلاعات با استفاده از آمار توصیفی و استنباطی مورد تجزیه و تحلیل قرار گرفت.

یافته ها: ۸۰ درصد دانشجوها مونث و میانگین سنی ۲۳ سال بوده است. ۲/۵ درصد دانشجویان از نظر مهارت های ارتباطی خود را در حد متوسط، ۲۵ درصد خوب، ۶۵/۲ درصد خیلی خوب و ۱۶/۲ درصد عالی ارزیابی نمودند. هیچ دانشجویی خود را از نظر مهارت های ارتباطی ضعیف ارزیابی نکرد. ۴۸/۸ درصد دانشجویان از نظر حرفه گرایی خود را خوب ارزیابی نمودند. ارتباط بین متغیرها و مهارت های ارتباطی و رفتارهای حرفه ای دانشجویان از نظر آماری معنی دار نبود (p>۰/۰۵).

نتیجه گیری: مطالعات نشان می دهد دانشجویان علی رغم نگرش مثبت نسبت به برقراری رفتار مناسب با بیمار، در تجربه پزشکی خود قادر به برقراری ارتباط موثر با بیماران نمی باشند. اگرچه دانشجویان در خود ارزیابی مهارت های ارتباطی و رفتارهای حرفه ای در ارتباط با بیماران خود را خوب ارزیابی نمودند اما در دوران دانشجویی به دلیل کمتر بودن مسئولیت دانشجو در قبال بیمار، رفتار حرفه ای واقعی شروع نشده است.

واژه های کلیدی: حرفه گرایی، مهارت ارتباطی، خود ارزیابی، دانشجوی پزشکی

کمیونیکیشن مہارتوں اور مریض سے رابط برقرار کرنے کی صلاحیتیں۔ گلستان یونیورسٹی آف میڈیکل سائنس کے طلباء کا از خود جائزہ۔

بیک گراونڈ: آج بھی میڈیکل سائنس کی منصوبہ بندی کرنے والوں کی نظر میں بایولوجیکل اپروچ ہی بنیادی حیثیت رکھتی ہے اور انسان رابطوں کی مہارتوں کی تعلیم کے موضوع کو رسمی نصاب میں شامل نہیں کیا گیا ہے۔ ہماری اس تحقیق کا ہدف، طب میں پیشہ ورانہ سطح پر مریض سے رابط قائم کرنے کے مسائل کا جائزہ لینا ہے۔ اس تحقیق میں گلستان یونیورسٹی آف میڈیکل سائنس کے طلباء شریک ہیں۔

روش: اس توصیفی تحقیق میں جو دوہزار نو میں انجام دی گئی تھی اسی ۸۰طلباء نے شرکت کی تھی اور انہیں ڈیموگرافیک نیز ان کے پیشے سے متعلق رابطہ اور رفتاری مہارتوں پرمشتمل سوالنامہ دیا گیا تھا جو ایک طرح سے سلف اسسمنٹ کا پرچہ تھا۔

نتائج: اسی ۸۰ فیصد طلباء نے جن کی اوسط عمر تئیس برس تھی ان میں دواعشاریہ پانچ فیصد طلباء نے مریض کے ساتھ رابطہ برقرار کرنے کی توانائیوں کو متوسط قرار دیا جبکہ پینسٹھ اعشاریہ دو فیصد طلباء نے بہت اچھا قراردیا اور سولہ فیصد طلباء نے بہت ہی اچھا قراردیا۔ کسی بھی طالب علم نے خود کو کمیونیکیشن لحاظ سے کمزور نہیں بتایا۔ ازٹالیس فیصد طلباء نے خود کو پیشہ ورانہ لحاظ سے اچھا قرادیا۔

سفارشات: اس تحقیق سے ظاہرہوتا ہے کہ گرچہ طلباء اور ڈاکٹر بیمار کے ساتھ اپنے رابطے کو اچھا سمجھتے ہیں لیکن عملا ایسا نہیں ہوتا ہے اور طلباء کے بارے میں یہ کہنا چاہیے کہ وہ گرچہ پیشہ ورانہ طور پر خود کو اچھی پوزیشن میں سمجھتےہیں لیکن چونکہ مریضوں سے ان کا رابطہ کم ہوتا ہے لہذا یہاں پیشہ ورانہ توانائیوں کا سوال ہی نہیں اٹھتا کیونکہ ان کا پیشہ ورانہ کام شروع نہیں ہوتا ہے۔

کلیدی الفاظ: پیشہ ورانہ توانائیاں، رابطہ کرنا۔

INTRODUCTION

Communication is a human skill which can be developed by training and learning, this development appears as communicative skill (1). These skills are inseparable parts of physician's clinical activities. Studies have shown that 60 to 80 percent of disease diagnoses and treatment decisions are done and made based on the physician's interview (2). An interview in which human communications play a basic role. Unsatisfied patients do not follow medical prescriptions very much, care their treatment process less, and are more likely to change their physician (3). Based on these studies it seems that physicians are not trained enough in the case of general communication skills and on the other hand communication skills are mostly acquisitive and educatable and clinical experience plays a lesser role in its development (4). Also the relationship and interaction of the physician with the patient play a more effective role in patient's satisfaction, treatment results, medical expenses, physician's clinical qualification, and complaints from physicians. The reflection of day by day increasing emphasis on communication skills in medicine and medical education can be observed in international communities statements, medical faculty tips, and educational and professional standards of physicians (6, 5).

A review of the courses of different degrees of medicine shows that these skills are not included in the formal curriculum of medical education in Iran and physicians' education are mostly based on indirect and experimental patterning from professors with a majorly bio-medical viewpoint (7, 8). Followers of socio-psycho-biological model believe that a comprehensive understanding of the patient and treatment success depend on not only physicians' enough information of the patients' medical status, but also psychological, social, and cultural data must be included as well (6). A lot of studies have shown that failure of the treatment team specially physicians and other staff in making the appropriate relationship with patients not only costs a lot but also makes patients unsatisfied. Also studies have expressed that examinations less than 10 minutes prevent making an appropriate relationship and doing a through and passionate examination and decrease patients' satisfaction. Of course a lot of physicians have a positive point of view toward the principle of making a relationship with patients but lack communications skills (7, 9).

In today's world professionalism in medicine has become very meaningful and important and is a vast concept (10). Professionalism is considered as the collection of behaviors which cause trust and certainty in interactions among physician, patient, and society. The main dimensions of professionalism can be considered as humanism, being responsible, honor, reliability, respecting others, job promotion, and justice (11). Content, process, and comprehension skills are different kinds of communication skills. Content and process skills are mostly interpersonal.

As professionalism and communication are humanistic skills and inseparable parts of clinical skills of physicians, therefore we determined to study communication skills and professionalism among medical students.

METHODS

This study was a descriptive, cross sectional one and sampling was done among fourth year and higher medicine students in Golestan University of Medical Sciences in 1388. The including criteria were at least one term of internship in hospital and relationship with the patients.

Data collection tool was a questionnaire including two parts which were 18 questions on demographic information, age, gender, ethnicity, marital status, and educational status including degree. The second part of the self-assessment questionnaire which assessed communication skills and professionalism of medical students included 11 questions which were derived from Simon et al.'s study (12). The questionnaire was translated and its content validity was determined with faculty members' comments and its reliability was achieved through Alpha Cronbach coefficient which was 0.86. The questionnaire was distributed among 100 students and 80 of them were filled completely and turned back. Data was analyzed through T-test, qui-square, and Regression Logistic.

RESULTS

The average age of participants was 22.28 (19-36 years old). 80% Torkman and from the point of marital status 91.3% were single. 2.5% of the students assessed themselves as about average from the point of communication skills, 25% good, 56.2% very good, and 16.2% excellent. None of the students assessed himself as weak. 48.8% of students assessed themselves good at professionalism. There was not a statistically significant relationship among variables, communication skills, and students' professional behavior (P>0.05).

Table 1. The frequency of Communication Skills and Professionalism among Medical Students in Golestan University	
Communication Skills and Professionalism	**N (%)**
Excellent	13 (16.2)
Very good	45 (56.2)
Good	20 (25.0)
Moderate	2 (2.5)
Poor	0 (0.0)
Sum	80 (100)

As table number one shows, the largest percent of medical sciences students assessed themselves as very good in communication and professional skills in making a relationship with the patient.

As table number two shows starred statements got the highest scores by the students in self-assessment. They included talking to the patient in simple words, greeting and behaving politely, not ignoring patients while talking to them, and alerting them while doing examination. On the other hand unstarred statements had the lowest average. They included helping in making decisions for the disease, explaining hows, and whys of the illness, telling the patient the necessary things they should know.

Table 2. The Mean & Standard deviation of Communication Skills and Professionalism itmes among Medical Students in Golestan University	
The items of professionalism behavior of the students	**Mean (SD)**
1. Telling them everything; being truthful, upfront and frank; not keeping things from them that they should know	3.11 (0.96)
2. Greeting them warmly; calling them by the name they prefer; being friendly, never crabby or rude	3.78* (1.06)
3. Treating them like they're on the same level; never "talking down" to them or treating them like a child	3.61* (1.06)
4. Encouraging them to ask questions; answering them clearly; never avoiding their questions or lecturing them	3.71* (0.93)
5. Showing interest in them as a person; not acting bored or ignoring what they have to say	3.75* (0.92)
6. Warning them during the physical exam about what you are going to do and why; telling them what you find	3.52* (1.04)
7. Discussing options with them; asking their opinion; offering choices and letting them help decide what to do; asking what they think before telling them what to do	2.9 (0.85)
8. Letting them tell their story; listening carefully; asking thoughtful questions; not interrupting them while they're talking	3.18 (0.98)
9. Explaining what they need to know about their problems, how and why they occurred, and what to expect next	2.98 (0.98)
10. Using words they can understand when explaining their problems and treatment; explaining any technical medical terms in plain language	3.8* (1.01)
11. How would you rate your level of professionalism?	3.3 (0.92)

* The highest scores of the students

DISCUSSION

The results showed that generally 56.2% of the students assessed themselves as very good in communication skills, and there was not a significant relationship among variables, communication skills, and professional behaviors of the students. In a study comparing the patients' and clinical faculty members of medical faculty viewpoints toward patient-centeredness, there was a significant difference in physician and patient relationship. Thus, according to different viewpoints of clinical faculty members and patients, they suggested holding patient and physician communication skills workshops, therefore with appropriate training of physicians the social need of changing the type of relationship of patient and physician would be fulfilled (13). As most of the students especially in medical sciences try to make a relationship with the patient while getting trained, therefore they try to communicate well with the patient. In the present study the largest percent of students assessed having this skill as very good but they considered themselves more successful in social and informal relations such as greeting and respecting the patient than job professional skills. In a way that statement number 2" I say hi warmly, I call them with a name the like….." And statement number 7 "I discuss their illness with them, ask their opinion, and help them in decision making " got the highest and lowest means respectively, this can be because of their being a student; as they haven't' become skillful enough and depend on their clinical professors for making decisions and planning for the

patients. These skills are achieved after graduation and getting more experiences. However, there is this question that if Medical Sciences University graduates are prepared to work? Are the educational expectations of universities reaching students to 100% professional skills? And if the answer of this question is no, are there any programs such as getting familiar or mentory available in treatment and health system of the country? Or can a graduate act independently in making decisions for the patients and planning at the start of his/her job? In a study, residents had achieved 43.3% of the communication skills, 63.3% of socio-psycho skills, 20% of diagnostic skills and 26.7% consultancy and training skills and with the improvement of residents' skills, the average of satisfaction score had increased as well (14). Communication and social skills of residents had been mostly in consultancy and diagnostic fields which match the results of the present study. Although students didn't assess themselves as weak in communication but as it can be get from assessed statements, social and psychological communication got the highest score and professional statement got the lowest, communication skills are inseparable parts of physicians' clinical skills. They can increase the effectiveness of medical interview and patients' satisfaction by using appropriate verbal and communication skills, such as respecting patients, caring and sympathizing with them, asking open-ended questions, active listening, and using comprehensible terms for the patients. It is clear that people in charge of medical education must hold the necessary training courses for improving students' and

staff's communication skills. Medical sciences students must be aware that one of the treatments tools is a good relationship with the patients. Patients who make a good relationship with their physician are more satisfied with their treatment (15). Treatment process can predict variables of following medication instructions (16). Communication is always mutual and the treatment team play an important role in its appearance. One of the concepts which are continuously discussed in treatment communication is achieving trust and achieving patients and treating team's trust becomes possible with professional communications. Studying the learning of communication skills in medicine showed that if the training of communication skills is not a short-term process it can change physicians' skills (17). Also it has been represented that this education can be effective for specialists as much as general physicians (18). Patients' satisfaction, following physicians' instructions, decreasing the necessary time of explain the matter to the patient, reduction of complaints from physicians, positive assessment of the physician's function are all cases which are related to the quality of the relationship of the physician with patient (19), therefore

learning professional communication skills by medical students is undoubtedly of prime importance.

Although students assessed themselves good in communication skills and professional behaviors with patient's self-assessment but real professionalism does not start during studentship because of students' little responsibilities against patients. Studied show that although physicians have a positive viewpoint toward behaving patients appropriate buy they cannot communicate with patients effectively In practice. According to the results, planning and performing professional and communication skills training program and including it in students' curriculum are necessary.

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