

Attitudes of medical & Dental students toward communication skills learning in early years of Medical Education

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Background: Physicians have considered good communication skills extremely important for decades. Our country is now recognizing its significance, the aim of this study is to explore medical students' attitudes toward communication skills learning.

Methods: In this cross-sectional study, a sample of final-year medical and dental students was recruited from CMH Lahore Medical College and Institute of dentistry from November to December 2021 with 106 Participants. The study utilizes the Communication Skills Attitude Scale (CSAS) to measure students' attitudes toward communication skills learning. The response rate was 46.08%.

Results: The study showed that at CMH Lahore Medical College and Institute of dentistry students hold highly positive attitudes toward learning communication skills. The positive attitude score (PAS) was significantly higher and the Negative attitude score (NAS) was significantly low in both MBBS & BDS final year students, in all age groups.

Conclusion: Significant positive attitude toward learning communication skills was clearly observed in the target group. Students with more positive attitudes toward communication skills learning tended to be higher level.

Key Words: Communication Skills, CSAS, Medical Students, curricula, Learning.

I. Introduction:

Communication involves exchanging information, ideas, thoughts, emotions, and feelings through speech, signals, writing, or behavior. Many studies have shown that experiential learning is the most effective and valuable method of improving young doctors' communication skills (CS). Physicians need strong communication skills to develop a doctor-patient relationship. In the early years of medical training, students are taught communication skills (CS) through role-playing, simulated patient interaction, or supervised practical work(1,2). As a result, students can reflect on their behavior and that of others. In general, the educational orientation of these programs focuses on the impact these programs have on the students' psychomotor skills (what they do) and cognitive skills(1). Some authors believe there are Three types of communication that are necessary for physicians' communication skills. These include attentive listening, empathetic responses, and open-ended questions to gain a deeper understanding of the patient's background(3). Fig 1 explains two types of communication i.e verbal and non-verbal. As a result, patients are more likely to participate in the treatment process.

Give patients the information they want or need about their condition, its likely progression, and the treatment options available to them in a manner that they can understand. Inform patients about the progress of their

care and answer their questions honestly and softly. To communicate effectively, you must convey a clear and ambiguous message(4).

Physicians have considered good communication skills extremely important for decades. Our country is now recognizing its significance, and some authors argue that training medical professionals in this critical yet overlooked area of clinical medicine are "the need of the hour." (5)There is a dire need to teach communication skills to our doctors. People from all walks of life are taught how to speak and solve problems in Western countries. In our country, doctors are made half as well. The teaching of ethics is also seriously lacking. (6) Recently, the conflict between doctors and patients or their attendants has increased in the patient health care system(1). Communication between physicians and their patients correlates with their importance on specific aspects of health care, such as patient-centered care and the application of biopsychosocial principles.

Definition:

Communicating is a process of establishing "commonness" with another person, which comes from the Latin word "communis," meaning "common." (7,8)We are sharing information, ideas, or attitudes. Further definitions offer the following: "Communication is the mechanism through which humans interact and communicate with each other". (5,9).

In this study, we explored the attitudes of MBBS and BDS final year students at our medical institute towards CS training and usage.

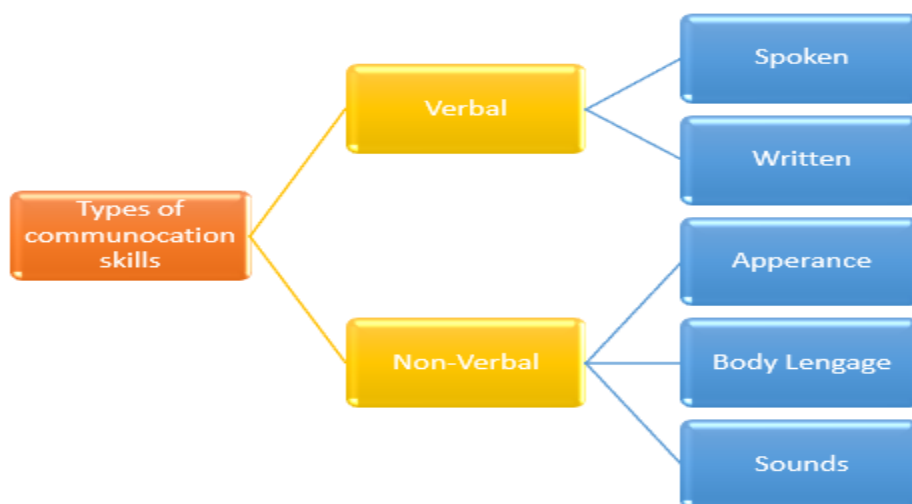


Table 1: Types of communication skills based on the communication channels used

II. Materials and Methods:

Design: This is a quantitative, descriptive cross-sectional study

Setting: This study was conducted to check the need of communication skills in undergraduate medical students in private medical colleges in Lahore Pakistan.

Duration: This study was carried out from November to December 2021

Population: A total of 106 participants were enrolled through a non-random convenience sampling technique, with a 95% confidence level and 5% confidence interval.

Subjects: Convenient sample included all head participants of the MBBS & BDS final year class, who are available at the time of the study.

Tools of data collection: A pre-designed, pre-tested, semi-structured questionnaire was used, consisting of the following two parts:

Part 1: Sociodemographic characteristics like the academic year, gender, course status, etc.

Part 2: **Communication skills attitude scale (CSAS)**, a self-report instrument designed to measure student motivational beliefs and strategy use.

Inclusion criteria: All final year MBBS & BDS Students who fill out the questionnaire.

Exclusion criteria: Absent students who fill out an incomplete questionnaire.

Ethical consideration: The ethical approval/permission was obtained from CMH LMC & IOD Research and Ethics Board. Participation in this study was voluntary.

Communication skills attitude scale (CSAS) questionnaire:

The study involved a 2-part questionnaire: part one requested sociodemographic data, such as age, gender, and education level; part 2 utilized a validated 26-item scale developed by Rees and Sheard (10) to measure students' attitudes. The most widely used method for measuring communication skills is the communication skills attitude scale (CSAS) for communication skills learning, which is also the most common and widely used method. The data for the present study consisted of quantitative data gathered from the questions. Quantitative data in the second part were analyzed by calculating frequencies, means, standard deviation, and percentages by SPSS version 18.0. Statistical significance was considered at a p-value <0.05 while, a p-value of <0.001 indicates a highly significant result.

The scale consists of 2 subscales: the positive attitude scale (PAS) and the negative attitude scale (NAS). Each has 13 items, accompanied by a 5-point Likert scale ranging from 'strongly agree' to 'strongly disagree.' The score for each scale ranges from 13-65, with higher scores indicating stronger positive or negative attitudes toward communication skills learning. The α -values for PAS were 0.873, and for NAS, 0.805.13. The study population was divided into two groups based on positive and negative communication skills, the mean of PAS and NAS scores (high and low)(6).

III. Data Analysis:

Participants:

A Google (Survey) form was created from the CSAS questionnaire. Informed consent was taken from all participants before participating in the study. Only those who were willing to proceed proceeded. There were 106 responses from 230 students in the first to final year of MBBS, so the response rate was 46.08 percent. One hundred six students filled out the form, with 50.9% males and 49.1% females.

Results:

Medical students' communication training may be organized as a separate communication course or integrated into medical studies (communication skills are the discipline) (11). A total of 106 students participated in the study, with a response rate of 46.13%. Age ranged from 17-23 years. About half of the participants were male, 50.9%, and half were females, 49.1%.

	Strongly Disagree	Disagree	Somewhat agree	Agree	Strongly Agree	Mean	SD
In order to be a good doctor, I must have good communication skills	10 (9.4%)	3 (2.83%)	9 (8.49%)	21 (19.81%)	72 (67.92%)	4.34	1.136
Developing my CS is just as important as developing my knowledge of medicine.	4 (3.77%)	1 (0.94%)	12 (11.32%)	40 (37.73%)	50 (47.16%)	4.22	0.958
Learning CS has helped me or will help me respect patients.	5 (4.71%)	4 (3.77%)	10 (9.4%)	36 (33.96%)	51 (48.11%)	4.16	1.059
Learning communication skills is interesting.	6 (5.66%)	5 (4.71%)	18 (16.98%)	33 (31.13%)	46 (43.39%)	3.99	1.136

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Learning CS has helped or will facilitate my team working skills.	5 (4.71%)	3 (2.83%)	9 (8.49%)	32 (30.18%)	57 (53.77%)	4.25	1.046
Learning communication skills has or will improve my ability to communicate with patients.	5 (4.71%)	2 (1.88%)	11(10.37%)	29 (27.35%)	60 (56.60%)	4.31	0.998
Learning CS is fun.	6 (5.66%)	7 (6.60%)	27 (25.47%)	31 (29.24%)	35 (33.01%)	3.77	1.143
Learning CS has helped or will help me respect my colleagues.	5 (4.71%)	8 (7.54%)	12 (11.32%)	38 (35.84%)	44 (41.50%)	4.00	1.120
Learning CS has helped or will help me recognize patients' rights regarding confidentiality and informed consent.	4 (3.77%)	4 (3.77%)	14 (13.20%)	47 (44.33%)	49 (46.22%)	4.16	1.004
CS teaching would have a better image if it sounded more like a science subject.	9 (8.49%)	22 (20.75%)	20 (18.86%)	29 (27.35%)	29 (27.35%)	3.48	1.275
When applying for medicine, I thought it was a really good idea to learn communication skills.	6 (5.66%)	9 (8.49%)	25 (23.58%)	38 (35.84%)	32 (30.18%)	3.73	1.143
I think it's really useful learning communication skills for medical degree	5 (4.71%)	2 (1.88%)	13 (12.26%)	41 (38.67%)	48 (45.28%)	4.16	1.013
Learning CS is applicable to learning medicine	6 (5.66%)	4 (3.77%)	17 (16.03%)	41 (38.67%)	40 (37.73%)	3.99	1.085
Learning CS is important because my ability to communicate is a lifelong skill.	5 (4.71%)	2 (1.88%)	7 (6.60%)	40 (37.73%)	53 (50%)	4.24	0.998

Table 1: Responses towards Positive Communication Skills Learning (PAS)

	Strongly Disagree	Disagree	Somewhat agree	Agree	Strongly Agree	Mean	SD
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I can't see the point in learning CS.	47 (44.33%)	49 (46.22%)	7 (6.60%)	13 (12.26%)	0 (0.00%)	1.67	0.720
Nobody is going to fall their medical degree for having poor communication skills.	10 (0.94%)	48 (45.28%)	28 (26.41%)	12 (11.32%)	4 (3.77%)	2.41	0.998
I haven't got time to learn CS.	22 (20.75%)	40 (37.73%)	35 (33.01%)	8 (7.54%)	3 (2.83%)	2.34	0.983
I can't be bothered to turn up to sessions on CS	25 (23.58%)	48 (45.28%)	23 (21.69%)	8 (7.54%)	3 (2.83%)	2.21	0.980
CS teaches the obvious and then complicates it	24(22.64%)	50 (47.16%)	24 (22.64%)	6 (5.66%)	3 (2.83%)	2.19	0.945
Learning CS is too easy	21 (19.81%)	44 (41.50%)	30 (28.30%)	13 (12.26%)	0 (0.00%)	2.32	0.924
I find it difficult to trust information about CS given to me by non-clinical lecturers	24 (22.64%)	47 (44.33%)	20 (18.86%)	9 (8.49%)	2 (1.88%)	2.25	0.952
I don't need good CS to be a doctor.	45 (42.45%)	41(38.67 %)	15 (14.15%)	4 (3.77%)	1 (0.94%)	1.82	0.877
I find it hard to admit to having some problems with my communication skills.	25 (23.58%)	49 (46.22%)	26 (24.52%)	4 (3.77%)	5 (4.71%)	2.23	0.995
My ability to pass exams will get me through medical school rather than my ability to communicate	20 (18.86%)	34 (32.07%)	31 (29.24%)	17 (16.03%)	8 (7.54%)	2.62	1.158
I find it difficult to take CS learning seriously	19 (17.92%)	44 (41.50%)	31 (29.24%)	11 (10.37%)	3 (2.83%)	2.396	0.987
CS learning should be left to psychology students, not medical students	50 (47.16%)	43 (40.56%)	8 (7.54%)	5 (4.71%)	2 (1.88%)	1.75	0.919

Table 2: Responses towards Negative Communication Skills Scale (NAS)

The responses received from the students regarding their attitude toward learning communication skills are shown in Tables 2 & 3. To make the analyses easier, the reactions of "Strongly Agree and Agree" were combined, and similarly, the responses of "Strongly Disagree and Disagree" were also mixed.

IV. Discussion:

Good communication between a doctor and their patient serves two essential functions: to share clinical information and to establish a good doctor-patient relationship(12). Medical students' attitudes toward learning communication skills are necessary to design educational programs and experiences aimed at improving these skills. This study has emphasized checking the response and demand of students to improved formal training in communication skills will enhance patients' and their attendants' satisfaction(1).

This and other studies show that doctors' interpersonal communication skills significantly impact patient care and correlate with improved health outcomes and health care quality(7,13). Effective communication is needed for doctors to make an accurate diagnosis, facilitate compliance with treatment by creating a trusting relationship with chronically ill patients and their families, cope with breaking bad news and dealing with anger, and establish harmonious relationships with colleagues, support staff, and superiors.(3,4)

The current study showed that CMH, Lahore Medical College & Institute of Dentistry students hold highly positive overall attitudes towards learning communication skills. MBBS & BDS Final year students have higher PAS values. This result is consistent with the results conducted by Alotaibi,FS.inTaif medical(6)S Abbasi from Abbasi Shaheed Hospital (2)found the same results.This is may be explained by exposure to patients and clinical rotations in clinical years. Male students in this study were found to have higher PAS than female students,although females are highly social than males, and any other studies found female students high scores than males.(9,14)

The higher positive attitude of medical students at CMH Lahore Medical College & Institute of Dentistry towards learning communication skills could help to teach staff to design specific curricula based on the motivation and level of their students(14). One of the limitations of this study is that it evaluated a single medical college and only 2 batches, which may not represent the CMH medical and Dentistry students as a whole. Further studies should aim to determine medical students' attitudes all over Pakistan medical colleges to get higher generalizability. Another limitation of this study is its unequal sample size per discipline. Since the participation was voluntary, it can be assumed that students less interested in communication didn't participate at all.

In conclusion, this study demonstrated that a positive attitude toward learning communication skills is clearly observed in medical students. This study adds to the growing body of evidence supporting the investigating attitudes of medical students towards learning communication skills that may have a critical role in curriculum design. As far as we know, this study is the first study in Saudi Arabia to investigate communication skills attitudes among medical students. Our study may open the gate for more investigations in this area.

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Conflict of Interest

The authors declare no conflict of interest and the work was not supported or funded by any drug company

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