

Study of Communication Skills among Psychiatric Nurses in Psychiatric Care Units

Communication
Skills among
Psychiatric
Nurses

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ABSTRACT

Objective: Assessing the level of communication skills among nurses working in psychiatric care units and to determine their association with selected sociodemographic variables

Study Design: Descriptive cross-sectional study

Place and Duration of Study: This study was conducted at the Ibn Al-Rushd and Al-Rashaad Teaching Psychiatric Hospitals in Baghdad Governorate, Iraq, from 15th December 2025 to 30th April 2026.

Methods: A total of 134 nurses were selected and among them 12 nurses participated in the pilot study and 122 nurses were included in the main study sample.

Results: Majority of nurses demonstrated a low level of communication skills 57.4%, while 31.1% demonstrated a moderate level, and only 11.5% demonstrated a high level. Statistically significant ($p < 0.05$) relationships were also found between communication skills and age, educational level, years of experience and participation in training programs. No significant differences ($P > 0.05$) were observed in relation to gender, place of residence and marital status.

Conclusion: Most psychiatric nurses lack adequate communication skills, which can negatively impact patient care and therapeutic relationships. Improving these skills is essential to enhancing the quality of psychiatric nursing practice.

Key Words: Communication Skills, Psychiatric nurses, Psychiatric care units.

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INTRODUCTION

Communication skills are essential for effective nursing practice, especially in psychiatric settings where therapeutic interaction is essential to patient care. In order to evaluate patients' mental health, understand their needs, and build therapeutic relationships based on trust, psychiatric nurses mainly rely on communication. Nurses can provide safe, patient-centered care and enhance overall clinical outcomes by communicating effectively¹. Communication skills refer to an individual's ability to understand others effectively through verbal and nonverbal communication, and to express oneself clearly. These skills enable nurses address complex problems, analyze situations logically and effectively, and improve their problem-solving abilities and professional engagement². Psychiatric

settings present particular challenges that make Effective communication more difficult and crucial. Individuals suffering from mental illnesses may find it difficult to communicate their ideas, comprehend information, or engage in social interactions. To guarantee successful interaction and promote patient recovery, psychiatric nurses must employ specific communication strategies like empathy, active listening, and therapeutic communication³. Communication between nurses and patients is essential for strengthening the therapeutic relationship, improving patients understanding of their treatment, and enhancing their overall healthcare experience. Strong communication skills enable healthcare professionals to better interpret clinical symptoms and their patients' emotional and psychological needs⁴.

In mental health settings, accurate assessment of psychiatric symptoms and better patient outcomes depend on effective communication¹. Communication is regarded as a crucial therapeutic tool in psychiatric nursing that promotes patient recovery and increases treatment engagement. Strong communication skills enable nurses to effectively manage complex patient conditions and offer emotional support⁵. Additionally, it has been demonstrated that enhancing psychiatric nurses' communication skills through education and training greatly improves clinical performance and fortifies therapeutic relationships between nurses and patients⁶. Although communication skills are

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acknowledged as important in nursing practice, previous research has primarily examined nurses' perceptions of communication rather than directly assessing communication skills. Furthermore, not enough research has been done on how sociodemographic characteristics affect psychiatric nurses' communication abilities¹. This study is significant because it emphasizes how crucial communication skills are for psychiatric nurses to provide safe and efficient patient care.

METHODS

This descriptive cross-sectional study was conducted at Ibn Al-Rushd and Al-Rashaad Teaching Psychiatric Hospitals in Baghdad Governorate, Iraq from 15th December 2025 to 30th April 2026 letter No. 96 date 2nd December, 2025 nurses working in psychiatric hospitals including were enrolled. A total of 134 nurses were selected to participate and among them 12 nurses participated in the pilot study and 122 nurses were enrolled as main study sample. Inclusion criteria included nurses currently working in psychiatric care units with at least one year of experience and willingness to participate. The exclusion criteria included nurses working in departments other than psychiatric units, those with less than one year of experience in psychiatric units, and administrative nurses without direct patient contact.

Data were collected using a structured self-administered questionnaire consisting of two parts: socio-demographic characteristics and a communication skills questionnaire. Communication skills were assessed using a 23 items structured questionnaire assessing nurses' communication abilities with patients. Responses to the were rated on a three-point likert scale :(Frequently =3, Occasionally= 2, Never= 1), with higher scores indicating better communication skills. The questionnaire required approximately 20–25 minutes to complete. Reliability testing demonstrated good internal consistency with a Cronbach's alpha level (0.86). The normality of data distribution was assessed using Kolmogorov-Smirnov and Shapiro-Wilk tests.

RESULTS

The majority of the samples 41% were between 25 and 34 years, followed by 35 to 44 years 27.9%, less than 25 years 19.7%, and 45 years and above 11.5%, with a mean age of 31.6±7.2 years. There were 63.9% females and 36.1% males. More than half of the nurses 55.7% resided. Most of the nurses 55.7% were married, while 31.1% were single, 8.2% divorced, 3.3% widowed and 1.7% separated. 8.2% held a master's degree, 4.9% had preparatory education, and 1.6% had a PhD. There were 41.0% had 6-10 years, 36.1% had 1-5 years and 22.9% had >10 years' experience. Nearly half the nurses 47.5% had taken part in mental health training courses and 52.5% had not attended any training. Twenty eight

(22.9%) had completed one course, 18 (14.8%) had completed two courses and 12 (9.8%) had completed three or more courses (Table 1).

Table No. 1: Sociodemographic information of the nurses (n=122)

Variable	No.	%
Age (years)		
< 25	24	19.7
25 – 34	50	41.0
35 – 44	34	27.9
> 45	14	11.5
Gender		
Male	44	36.1
Female	78	63.9
Residence		
Urban	68	55.7
Rural	54	44.3
Marital status		
Single	38	31.1
Married	68	55.7
Divorced	10	8.2
Widowed	4	3.3
Separated	2	1.7
Educational level		
Preparatory	6	4.9
Diploma	28	23.0
Bachelor degree	76	62.3
Master degree	10	8.2
PhD	2	1.6
Years of experience in psychiatric hospitals		
1–5	44	36.1
6–10	50	41.0
> 10	28	22.9
Participation in mental health training courses		
Yes	58	47.5
No	64	52.5
Number of training courses attended		
One	28	22.9
Two	18	14.8
Three or more	12	9.8

The findings show that many nurses scored low on several items, especially those related to assertiveness and sharing information. More than 50 percent of the respondents reported low scores namely "I prefer not to tell or share bad information" (65.6%), The organisation lacked something in this aspect either because they were not confident enough or the other reason. In contrast, the other items associated with the patient's rights, along with attentiveness, and understanding emotions, achieved a moderate score category. Like "I respect my patient's freedom of expression" (21.3% agreed, mean score 1.77), or "I give information in understandable terms" (21.4% agreed, mean score 1.74). The overall mean scores for the items were around 1.47 and 1.77. Many of the items are found to be low (L) while few are at moderate (M) level. This means that the nurses do demonstrate some

ability to respect for the autonomy or prescriptive need of the patient but many do so with low confidence, clarity and consistency in their communication skills (Table 2).

Majority of nurses (57.4%) scored in the low communication skills category (mean score 28.77 ± 5.78), suggesting limited ability to communicate effectively with patients. About one-third of the sample (31.1%) demonstrated moderate communication skills, while a small proportion (11.5%) achieved high communication skills. These results reflect that most nurses face challenges in confidently conveying information, using supportive verbal expression, and maintaining clarity and structure in their interactions with patients (Table 3).

In Table 4 showed the statistical differences in overall communication skills scores among nurses according to their socio-demographic characteristics. The findings indicate that age, educational level, years of experience, and participation in mental health training course were significantly ($p < 0.05$) associated with communication skills. Specifically, older nurses, those with higher educational qualifications, and nurses with more years of experience tended to have higher communication skills, as reflected in increasing mean ranks. Similarly, nurses who had attended mental health training courses demonstrated significantly better communication skills than those who had not. In contrast, variables such as sex, residence and marital status did not show significant ($p > 0.05$) differences in communication skills.

Table No. 2: Distribution of nurses' communication skills in psychiatric care units (n = 122)

Communication skills items	Never		Occasionally		Frequently		Total		M.S	Ass.
	No.	%	No.	%	No.	%	No.	%		
It is difficult for me to be demanding or strict with patients	70	57.4	34	27.9	18	14.7	122	100.0	1.57	L
I am attentive to patients' needs, especially regarding their privacy	58	47.5	40	32.8	24	19.7	122	100.0	1.72	M
I respect my patient's right to express themselves freely	54	44.3	42	34.4	26	21.3	122	100.0	1.77	M
I support patients' right to know their health information	56	45.9	38	31.1	28	23.0	122	100.0	1.77	M
I respect the autonomy and freedom of the patient's decision-making	60	49.2	40	32.8	22	18.0	122	100.0	1.69	M
I make sure that my patients have understood the information provided	62	50.8	38	31.1	22	18.0	122	100.0	1.67	M
I provide information in a clear and calm way	64	52.5	36	29.5	22	18.0	122	100.0	1.65	L
I listen to patients fairly without judging	66	54.1	36	29.5	20	16.4	122	100.0	1.62	L
I use pauses when giving information	70	57.4	34	27.9	18	14.7	122	100.0	1.57	L
I give information in simple terms and with examples	68	55.7	36	29.5	18	14.8	122	100.0	1.59	L
I take time to listen to and understand patients' needs	60	49.2	40	32.8	22	18.0	122	100.0	1.69	M
I find it difficult to ask patients for information	72	59.0	32	26.2	18	14.8	122	100.0	1.56	L
I use open questions to obtain information	66	54.1	36	29.5	20	16.4	122	100.0	1.62	L
I speak with patients in a quiet place	64	52.5	38	31.1	20	16.4	122	100.0	1.64	L
I try to explore and understand my patient's emotional state	60	49.2	40	32.8	22	18.0	122	100.0	1.69	M
I get nervous when I speak with patients	74	60.7	30	24.6	18	14.7	122	100.0	1.54	L
I have conflicts with patients when opinions differ	78	63.9	28	23.0	16	13.1	122	100.0	1.49	L
I respect the independence and freedom of the patient	56	45.9	40	32.8	26	21.3	122	100.0	1.75	M
I prefer not to tell or share bad information	80	65.6	26	21.3	16	13.1	122	100.0	1.47	L
I give information in understandable terms	58	47.5	38	31.1	26	21.4	122	100.0	1.74	M
Sharing information reduces my time with others	76	62.3	30	24.6	16	13.1	122	100.0	1.51	L
I use supportive verbal expressions	60	49.2	38	31.1	24	19.7	122	100.0	1.70	M
I provide information within my professional competence	56	45.9	40	32.8	26	21.3	122	100.0	1.75	M

Level of Response: Low = 1-1.66 Moderate = 1.67-2.33 High = 2.34-3

Table No. 3: Overall distribution of nurses' communication skills in psychiatric care units (n = 122)

Parameter	Score	No.	%	Mean±SD
Communication Skills	Low	70	57.4	28.77±5.78
	Moderate	38	31.1	
	High	14	11.5	

Table No. 4: Overall communication skills scores by socio demographic variables (n = 122)

Variables	Classification	No.	Mean Rank	H / U	p-value
Age (years)	< 25	24	105.2	8.967 ^b	0.030*
	25 – 34	50	117.6		
	35 – 44	34	124.8		
	45 and above	14	131.9		
Gender	Male	44	111.0	3.524 ^m	0.061
	Female	78	121.8		
Residence	Urban	68	122.5	2.951 ^m	0.086
	Rural	54	116.0		
Marital status	Single	38	112.3	5.982 ^b	0.201
	Married	68	123.4		
	Divorced	10	118.6		
	Widowed	4	120.5		
	Separated	2	105.2		
Educational level	Preparatory	6	95.4	9.721 ^b	0.045*
	Diploma	28	109.6		
	Bachelor degree	76	122.4		
	Master degree	10	136.2		
	PhD	2	140.5		
Years of experience	1–5	44	112.7	7.006 ^b	0.030*
	6–10	50	123.8		
	More than 10	28	130.5		
Participation in mental health training	Yes	58	128.0	4.018 ^m	0.045*
	No	64	115.0		

b = Kruskal-Wallis test m = Mann-Whitney U test N = Numbersig, = p < 0.05

DISCUSSION

Regarding sociodemographic characteristics, this study showed that largest proportion of participants were aged 25-34 years (41.0%). The majority were females 63.9%, married 55.7%, and held a bachelor's degree in nursing (62.3%). Most participants had 6-10 years of experience in psychiatric hospitals (41.0%), while 47.5% had attended mental health training courses. These findings are consistent with previous studies that reported similar demographic characteristics among nurses⁷⁻⁹.

The results presented in table 2 indicated that nurses demonstrated the low levels of communication skills. This may be attributed to the complexity of psychiatric settings, insufficient training and workload pressures. These finding are consistent with the study conducted by Kindie et al¹⁰, while they are inconsistent with the findings of Demir & Dinç¹¹, who reported higher communication skills among nurses. The finding indicate that several items reflected a moderate level of communications skills among psychiatric nurses, suggesting a basic level of communication competence. However, the complexity of psychiatric care, workload,

and lack of specialized training may limit the consistent use of effective communication skills. These findings are consistent with studies conducted by Hasan et al¹² and Hadi & Mohammed¹³.

The results also showed low levels of assertiveness, reluctance to share unpleasant information, and nervousness during patient interactions. These findings may be attributed to the sensitive nature of psychiatric care, inadequate communication training, and work-related pressures. Similar findings were reported by Ndubuisi et al¹⁴, Yousuf et al¹⁵ and Colomer-Sánchez et al¹⁶. The results presented in Table 3 indicate that the majority of nurses demonstrated low levels of communication skills, while only a small proportion showed high communication competence. This may be attributed to the psychological nature of psychiatric settings and a lack of specialized communication training. These findings are consistent with the study conducted by El-Houssieny et al¹⁷. However, they are inconsistent with the findings of Ruslan & Abdullah¹⁸ and Zeynizadeh et al¹⁹, who reported good and moderate levels of communication skills among nurses. This study showed that significant differences in communication skills according to age, educational

level, years of experience, and participation in mental health training courses (Table 4). These finding may be attributed to the positive effects of experience, education, and training on communication competence and are consistent with previous studies^{20,21}. No statistically significant differences were found according to gender, place of residence, or marital status, suggesting that professional factors may have a greater influence on communication skills than personal characteristics. This finding is consistent with studies conducted by Alshammari et al²² and Chadayan et al²³.

CONCLUSION

Most psychiatric nurses demonstrated low communication skills, which may negatively affect patient care and therapeutic relationships. Therefore, improving communication skills is essential for enhancing the quality of psychiatric nursing practice.

Recommendation: The implementing continuous training programs in therapeutic communication and integrating communication skills education into nursing curricula. Further studies are recommended to identify effective strategies for improving communication skills among psychiatric nurses.

Author's Contribution:

Concept & Design or acquisition of analysis or interpretation of data:	Hawraa Haider Al-Zghaibi, Muna Abdulwahab Khaleel
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REFERENCES

- Xiang L, Li C, Gao Q, Li L, Shi Z. Nurses' perspectives on communication in acute psychiatric care: A qualitative descriptive study. *J Psychiatric Mental Health Nurs* 2025; 32(6): 1301-13.
- Algrmadi A. The impact of communication skills training on nurses' performance and patient outcomes. *Afr J Biomed Res* 2024; 55.
- Choi J. The role of communication competence in psychiatric nursing practice. *Arch Psychiatric Nurs* 2024; 47: 45-50.
- Yağar F. Investigation of factors affecting nurses' communication levels. *J Human Social Sci* 2023; 6(1): 86-98.
- Zhao Z. Work pressure, empathy, communication skills, and workplace violence among psychiatric nurses: a structural equation model. *BMC Nurs* 2026; 43.
- Khalil AI, Aldehani RF, Aijahdali SA, Almehemadi W. Simulation-based training for improving psychiatric nurses' communication competencies: a quasi-experimental study. *Res Square* 2026; 1-30.
- Razghandi R, Lines L, Smadi O, Gulyani A. Emotional intelligence and its relationship with demographic characteristics among nurses and nursing students: a cross-sectional study. *Nurs Open* 2025; 12(10): e70332.
- Mariati LH, Jakri Y, Djerubu D. The effect of emotional intelligence on nurse's communication skill. *J Ners and Midwifery* 2022; 9(2): 218-26.
- Turjuman F, Alilyyani B. Emotional intelligence among nurses and its relationship with their performance and work engagement: A cross-sectional study. *J Nurs Management* 2023; 48.
- Kindie L, Mitiku HZ, Muche M, Wondimneh BY, Geletie HA. Nurses' communication to patients and associated factors at East Gojjam Zone, governmental hospitals, Amhara Region, Ethiopia, 2022: An institution-based cross-sectional study. *Nurs Res Rev* 2024; 14: 137-48.
- Demir H, Dinç S. Evaluation of the relationship between communication skills and psychosocial care skills of nurses. *J Nursol* 2024; 27(3): 195-201.
- Hasan NN, Mohammed IH, Mahmood YA. Communication skills among nursing staff at Azadi Teaching Hospital. *Al-Kitab J Pure Sci* 2019; 3(1): 62-70.
- Hadi MA, Mohammed SS. Nursing communication skills in preoperative care: Nurses' feedback. *Int J Health Sci* 2022; 6(S2): 10480-88.
- Ndubuisi IF, Okoronkwo IL, Nwaneri AC, Maduakolam I, Nwodoh CO, Mbadugha C. Perceived level of assertiveness and self-esteem of nurse interns in Enugu, Nigeria. *International J Afr Nurs Sci* 2024; 20: 100804.
- Yousuf AAA, Stewart DC, Kane T, Soltani A, Al-Khal A, Sethi A. Health professionals' views and experiences of breaking bad news in the Eastern Mediterranean Region: A scoping review. *Frontiers Med* 2024; 11: 1440867.
- Colomer-Sánchez A, Ayuso-Murillo D, Lendínez-Mesa A, Herrera-Peco I. Anxiety effect on communication skills in nursing supervisors: An observational study. *Nurs Reports* 2021; 11(2): 207-16.
- El-HoussienyTaha NT, Abed Ali FA, Mohamed Abd-Elhady TR, Abdel-Aleem MM. Effect of patient-centered care training program on nurse-patient communication skills at AS-Salam Hospital

- in Port Said: A quasi-experimental study. *Cuestiones de Fisioterapia* 2024; 53(3): 4426-48.
18. Ruslan R, Abdullah SND. Evaluating communication skills of undergraduate healthcare students in Malaysia. *J Palembang Nurs Studies* 2025; 4(1): 9-15.
19. Zeynizadeh S, Pirzadeh A, Tabrizian S. Communication skills and its related factors in Ardabil Alavi Hospital nurses and staff. *Int J Comm Med Public Health* 2020; 7(2): 416-19.
20. Sayılan AA, Koyun ZC. The relationship between nursing students' therapeutic communication skills and their perceptions concerning care behaviors. *J Educ Res Nurs* 2024; 21(2): 174-82.
21. Seger HR, Oleiwi SS. Effect of communication skills training on nurses' and midwives' practices: A randomized controlled trial. *Bahrain Med Bull* 2025; 47(2).
22. Al-Shammari MA, Al-Showaily JS. Assessment of communication skills competence for new graduate nurses in Babylon Province hospitals: A cross-sectional study. *Eur J Med Health Res* 2024; 2(6): 30.
23. Chadayan C, Sweetey MS, Jancy TSC. Appraising the communication skills of nursing students in clinical settings. *J Emerg Technol Innovative Res* 2025; 12(8).