Assessment of Language Barriers Among Nursing Students for Effective Communication

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ABSTRACT

Background: Language is a key barrier to effective communication among nursing students. Nursing students belong to different cultural background so it is difficult for them to express their ideas and meanings in the same language.

Aim: To assess the language barriers among nursing students for effective communication.

Methodology: A descriptive cross-sectional study design was used. A convenient sample of 100 nursing students enrolled from a College of Nursing Rawalpindi. The study was carried out from January 2023 to March 2023. A self-structured questionnaire was used to collect data from each participant. Informed written consent was obtained from all the selected participants. Participants were requested to respond on the basis of their own opinions and understanding to each question.

Results: The mean age of the students is b/w 15-29 years. All of the students were females and all students were unmarried. The study findings identified that language is a key barrier for them; some nursing students conceived it as strong barrier for communication and some of them as moderate level barrier for their learning process. The mean and S.D. of every question is analysed and displayed.

Practical Implication: Nurses may improve the delivery of effective care to patients impacted by language barriers by gaining a better knowledge of these limitations and developing appropriate methods to overcome them. The study's findings are relevant since language barriers have an impact on healthcare delivery wherever.

Conclusion: Successful orientation of students to the language used in the teaching environment will help the students overcome the communication barriers they encounter during their training and practices.

Keywords: Language Barrier; Nursing Students; Communication; Nurses; Teaching Environment.

1. Introduction & Literature Review

Individuals must be able to communicate in order to share their thoughts, feel their emotions, and find solutions to problems. In general, people can interact with one another in their native language, but when they try to speak in a National and International language, they find it challenging to articulate their thoughts or problems, they may run into difficulties. They must have a strong command of communication skills and must employ communication methods in an efficient and effective manner in order to manage these situations (Bosh, et al. 2011).

Communication is "an act or instance of transmission," according to the Merriam-Webster Dictionary Online, and the Cambridge Dictionary Online claims that the word communication is derived from the Latin word communis. The English term common evolved from the Latin word communis without losing any of its original meaning. It can be said that the definitions of transmission, channel, and mutuality are all included in the term "communication".

The linguistic difficulties (grammar, pronunciation, vocabulary, and sentence structure), cognitive difficulties (fear of exams, fear of failing in front of others, fear of failing in communication, fear of making mistakes, lack of self-esteem), the role of the teachers, student competition, and a lack of information are the causes of anxiety in language speaking classes (Kayaoğlu, 2013). A study conducted in Bahrain showed the differences between the three languages. The author stated that she had a goal that she wanted to accomplish as a student nurse. Study
everything, she can, take advantage of every chance to gain experience, and be sure to deliver the high-quality, holistic treatment that is anticipated. Moreover, she would want to encourage nurses to acquire a second language that is widely spoken and to become competent. Because it will be very advantageous and time-saving. Bahrain's official language is Arabic, although due to the country's ethnic and cultural variety, English, Urdu, Hindi, and Farsi are also widely spoken. The likelihood of poor or miscommunication rises when the patient and student nurses speak different languages (Al-Noaimi, A. 2020).

According to Bukhari, S.A., in a study conducted in the United Kingdom, data was collected from 300 students from 5 different international colleges through email. According to the research, just 25% of respondents said they were excellent at sticking with the course and staying on track. According to 45% of respondents, their inability to speak English well impeded them from progressing in their courses, and 40% of respondents found it difficult to communicate with professors. 50% of participants in this survey said they had difficulty achieving the level of English competence required to pursue the courses they were enrolled in. 40 to 45 percent of respondents said that their overall education and grades were impacted by language barriers. 30% of students choose to study English instead of their main studies. According to the research, 35% of respondents rate their ability to follow their suggested course as "excellent," while 40% report having trouble talking to their teachers. A lack of English language competency, according to 45% of students, limits their ability to advance in the course, while 50% of students describe their efforts to meet the course's language requirements as "challenging" (Bukhari, S.A. 2011).

Another study conducted in Germany revealed that throughout their interprofessional format, students felt that their abilities to successfully collaborate with others to address language barriers had improved. 51 students participated from November 2016 to July 2018 (of which 21 were nursing care students and 30 were medical students). The course earned excellent reviews overall (mean 1.73 (SD 0.85) on a scale of 1 to 5, where 1 is very good and 5 is inadequate). Medical and nursing students made quite different assessments. Twenty-one items total, and fourteen of them demonstrate a self-reported improvement in interprofessional knowledge or abilities. An interprofessional course for students studying medicine and nursing as well as other health professions would seem to be a perfect fit for how to manage language barriers and work effectively. Nurses and doctors must complete mandatory training programmes to deal with language problems and become sensitive to using interpreters (Krampe, et al. 2022).

A study conducted in India showed that due to the vast linguistic diversity present in the nation, the linguistic alignment of providers and patients is even more difficult. There are at least 122 different spoken languages in India, and there are over 22 official languages spoken throughout the country. The survey was completed by 106 clinicians, including 45 nurses, 19 paramedics, and 42 doctors (9 consultants, and 33 post-graduate trainees). Respondents spoke 3.75 languages on average. There were no monolingual respondents. 93% of physicians, 84% of nurses, and 95% of paramedics at the hospital reported being fluent in the language of the majority. 100% of medical professionals, 71% of nurses, and 63% of paramedics reported speaking English fluently. The number of languages spoken or fluency in the majority language was not predicted by the kind of clinician, age, gender, or time spent in clinical practice. Compared to other physicians, doctors were more likely to report speaking English fluently (p 0.003). In India, however, it is likely that the primary spoken language in each of these areas will vary (Douglass, K., Narayan, L., et al. 2022).
Saudi Arabia relies on expatriate nurses from other nations, primarily the Philippines, India, Malaysia, and South Africa, due to a shortage of nursing professionals. It is difficult for nurses to communicate with patients and other members of the medical team from different nationalities since nurses from these nations do not speak Arabic. 49 percent of the nurses said that the language barrier makes it difficult for them to communicate with patients. According to their own statements, the participating nurses had no knowledge of the Arabic language at all (68.8% or 70%, respectively). Nonetheless, 99.7% were either fully (39.1%) or very little (60.6%) able to understand Arabic, while 98.5% were fully (33.8%) or only slightly (64.7%) able to speak it. As a result, these communication issues may have an impact on patient satisfaction or, in the worst-case scenario, may result in medical errors (Al-Harasis, S. 2013).

A study conducted in Pakistan explored those 6 (20%) students favor using English in class. Yet, 24 out of the 80% of students would rather speak their native tongue and other regional languages than English. However, 9 of the 21 students who made up the 30% group disagreed with the claim that learning English is difficult for them because of their mother tongue. Just 5 students claimed that multimedia was available in most situations. 25 students reported that they only get classroom instruction from books, with no access to multimedia or audiovisual resources. 26 students, or 70%, reported that their schools had qualified English language teachers, whereas 9 students, or 20%, reported that there weren't enough trained English language teachers (Hassan, S., et al. 2015).

In Pakistan, Children raised in homes across the nation primarily speak the provincial regional language. These students are expected to acquire two new languages as soon as they enter school, whether it be Pashto, Punjabi, Sindhi, or Balochi. Additionally, since either English or Urdu is the medium of instruction, their entire way of thinking must now be adjusted to one of the new tongues. One cannot expect a youngster who speaks a regional language at home to compete with students who have been brought in from families where one of the national languages is spoken. The dropout rate in the nation is so high because the entire system is stacked against the majority of students (The News Report: Language Barrier, 2023).

1.1. Problem Statement

Despite the increasing diversity in healthcare, language barriers continue to be major challenge between healthcare providers and patients. Nursing students, who will soon become healthcare professionals, may face significant challenges when communicating with patients. Therefore, this study aims to assess the language barriers faced by nursing students to overcome these barriers and to enhance effective communication among nursing students.

1.2. Significance of the Study

Language barriers cause many problems in nursing, health sciences and education. These barriers also affect students learning process and also interpersonal relationships. Lack of complete mastery of the language makes it difficult for students learning a second language to express themselves, which can cause emotional stress and limit progress. The study was aimed to identify, explain and discuss the common barriers of language among nursing students. There were very few studies found in Pakistan to identify language barriers among nursing students. Therefore, the purpose of this study was to explore communication barriers among nursing students during their learning process.
1.3. Objectives of the Study

- To assess the language barriers among nursing students for effective communication.

1.4. Study question

- What are the language barriers experienced by nursing students that hinder effective communication in a multicultural education setting?

2. Methodology

There was a Descriptive cross-sectional study design.

2.1. Study Population

The accessible population was B.Sc. (N) nursing students studying 2nd & 3rd year nursing students at the College of Nursing, Rawalpindi.

2.2. Sample Size

The target population in this study was undergraduate nursing students enrolled in the nursing programme. In a college of nursing, there were 100 nursing students enrolled in session 2021–2022. Using Rao soft’s sample size calculator, the sample size was determined, with a 95% confidence level and a margin of error of 5%. 100 nursing students comprised the minimum necessary sample size.

2.3. Sampling Technique

Non-probability convenient sampling was used for samples from the target population.

2.4. Sample Selection

2.4.a. Inclusion Criteria

- Nursing students of Generic BScN.
- Those who were willing to participate in the study.

2.4.b. Exclusion Criteria

- Those nursing students who were not willing to participate in the study.
- Other nursing students except BSN.

2.5. Data Collection

A self-structured questionnaire was used for data collection from participants. Informed consent was given to all participants. The questionnaire was explained to all students to clarify unclear sentences. All the required information was taken from the participants.

2.6. Ethical Considerations

Ethical considerations were followed according to the ethical principles of Helsinki declaration.

1. Consent was taken from all the participants.
2. Participants had the right to refuse the study without any coercion.

3. The autonomy of the participants was respected.

4. The Confidentiality of the information was assured and maintained.

2.7. Data Analysis

The Statistical Package of Social Sciences (SPSS) version 26 was used in data analysis. All data were screened for missing responses and central tendencies. The normality and distribution of data were determined through the skewness and kurtosis. Descriptive statistics were used to summarize the students' demography. There were 20-item questionnaire each question carries four marks to measure positive and negative attitudes about language as a barrier for nursing students.

3. Results

Socio-demographic data of participants

Table 1. Gender of the participants

<table>
<thead>
<tr>
<th>Gender</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Female</td>
<td>100</td>
<td>100%</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 1 shows that all nursing students included in the study were females. So that 100% nursing students were females.

Table 2. Age of the participants

<table>
<thead>
<tr>
<th>Age of the respondent</th>
<th>Number</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-17</td>
<td>19</td>
<td>19.0</td>
</tr>
<tr>
<td>18-20</td>
<td>42</td>
<td>42.0</td>
</tr>
<tr>
<td>21-23</td>
<td>20</td>
<td>20.0</td>
</tr>
<tr>
<td>24-26</td>
<td>19</td>
<td>19.0</td>
</tr>
<tr>
<td>27-29</td>
<td>0</td>
<td>0.00</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 2 shows that all participants included in the study having the differences in age, nursing students which belong to 15-17 age group that are 19 out of 100, nursing students having the age b/w 18-20 are 42, 21-23 age of nurses are 20% and 24-26 years of age of the student nurses are 19%. It showed that most of the students are 18-26 years of age.
Figure 1. Age of the participants

The mean and standard deviation of every question were obtained and displayed to obtain the desired results.

Table 3. Language barriers for communication among nursing students

<table>
<thead>
<tr>
<th>S.No.</th>
<th>Questions</th>
<th>S. Dis</th>
<th>D</th>
<th>A</th>
<th>S. A</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Asks questions after the lecture.</td>
<td>46</td>
<td>39</td>
<td>6</td>
<td>9</td>
<td>1.7800</td>
<td>.91652</td>
</tr>
<tr>
<td>2.</td>
<td>Feels shy to communicate with classmates.</td>
<td>4</td>
<td>7</td>
<td>48</td>
<td>41</td>
<td>3.2600</td>
<td>.76038</td>
</tr>
<tr>
<td>3.</td>
<td>Unable to express ideas even when know the answer.</td>
<td>8</td>
<td>26</td>
<td>45</td>
<td>21</td>
<td>2.7900</td>
<td>.86801</td>
</tr>
<tr>
<td>4.</td>
<td>Feels uncomfortable when change seating.</td>
<td>2</td>
<td>10</td>
<td>46</td>
<td>42</td>
<td>3.2800</td>
<td>.72586</td>
</tr>
<tr>
<td>5.</td>
<td>Difficult to share personal issues with students.</td>
<td>8</td>
<td>50</td>
<td>36</td>
<td>6</td>
<td>2.4000</td>
<td>.72474</td>
</tr>
<tr>
<td>6.</td>
<td>Participates in co-curricular activities.</td>
<td>38</td>
<td>44</td>
<td>12</td>
<td>6</td>
<td>1.8600</td>
<td>.85304</td>
</tr>
<tr>
<td>7.</td>
<td>Communicates easily with the students having same colloquial region.</td>
<td>17</td>
<td>51</td>
<td>16</td>
<td>16</td>
<td>2.3100</td>
<td>3.1200</td>
</tr>
<tr>
<td>8.</td>
<td>Feels difficulty in pronunciation of words.</td>
<td>1</td>
<td>29</td>
<td>27</td>
<td>43</td>
<td>.93954</td>
<td>.86783</td>
</tr>
<tr>
<td>9.</td>
<td>Uses vague, ambiguous, or confusing words when talking to others.</td>
<td>4</td>
<td>9</td>
<td>45</td>
<td>42</td>
<td>2.3100</td>
<td>3.1200</td>
</tr>
<tr>
<td>10.</td>
<td>When communicating across cultures, never assume that the other person has understood.</td>
<td>4</td>
<td>32</td>
<td>49</td>
<td>15</td>
<td>.93954</td>
<td>.86783</td>
</tr>
<tr>
<td>11.</td>
<td>Use simple, clear, accurate, and correct and familiar language.</td>
<td>36</td>
<td>54</td>
<td>8</td>
<td>2</td>
<td>2.3100</td>
<td>3.1200</td>
</tr>
</tbody>
</table>
12. Choose simple words, phrases, and short sentences.
   45  47  8  0 .93954 .86783
13. Ask for clarification.
   36  51 11  2 2.3100 3.1200
14. Use repetition because people need to hear things more than once to understand and remember it.
   24  48 26  2 .93954 .86783
15. I often feel anxious and nervous when giving presentation in class.
   8  17 56 19 2.3100 3.1200
16. I also think about how my body language and facial expression can be perceived by others.
   13  66 19  2 .93954 .86783
17. It is difficult for me to understand languages of other students when communicating interpersonally.
   4  19 64 13 2.3100 3.1200
18. Face Problems in choosing an appropriate word.
   6  10 63 21 .93954 .86783
19. Feels difficulty in fluency while speaking.
   10  15 55 20 2.3100 3.1200
20. Mother tongue first come in mind when communicating to others.
   19  27 31 23 .93954 .86783

**Table 4. Language barrier Levels for communication**

<table>
<thead>
<tr>
<th>Language Barrier level</th>
<th>Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language is a strong barrier</td>
<td>If the respondents give 51-80% correct answers.</td>
</tr>
<tr>
<td>Language is a moderate-level barrier</td>
<td>If the respondents give 21-50% correct answers from the structured questionnaire.</td>
</tr>
<tr>
<td>Language is a weak barrier</td>
<td>If the respondents give &lt; 20% correct answers from the structured questionnaire.</td>
</tr>
</tbody>
</table>

**Table 5. Language barrier Level for communication**

<table>
<thead>
<tr>
<th>Language is a Barrier</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moderate level barrier</td>
<td>53</td>
<td>53.0</td>
</tr>
<tr>
<td>Strong barrier</td>
<td>47</td>
<td>47.0</td>
</tr>
<tr>
<td>Total</td>
<td>100</td>
<td>100.0</td>
</tr>
</tbody>
</table>
The study results showed that 53% students assumed that language is a strong level barrier for communication and 47% students said that moderate level barrier. The study results explored that some students felt difficulty in choosing words and phrases because they had not command in English language. It also showed that students had different mother tongue, different cultural background and feels difficulty in speaking and understanding other languages.

4. Discussions

Language difficulties between patients and healthcare providers place more and more restrictions on access to healthcare. The effects of language barriers range from poor communication, which has negative effects on health outcomes, to ineffective utilization of or inability to receive health care services. According to the results, the participating nurses had no knowledge of the Arabic language at all (68.8% or 70%, respectively). Nonetheless, 99.7% were either fully (39.1%) or very little (60.6%) able to understand Arabic, while 98.5% were fully (33.8%) or only slightly (64.7%) able to speak it. The results of the study showed that the majority of employed nurses have trouble interacting with Arabic-speaking patients, who make up the bulk of the facility's patients. So, nursing students were the most important persons and their communication skills would be improved in their training life (Al-Harasis, S. 2013).

This current study identified the level of students regarding communication and how they faced language problems in the class-room. The study results showed that 53% students assumed that language is a strong level barrier for communication and 47% students said that moderate level barrier. The study results explored that some students felt difficulty in choosing words and phrases because they had not command in the English language.

According to Douglass, K., et al. respondents spoke 3.75 languages on average. There were no monolingual respondents. 93% of physicians, 84% of nurses, and 95% of paramedics at the hospital reported being fluent in the language of the majority. 100% of medical professionals, 71% of nurses, and 63% of paramedics reported speaking English fluently.

Our study results showed that 43% students feel difficulty in pronunciation of word the mean score is 0.93 and SD is 0.86783, most of the students use vague, ambiguous, or confusing words when talking to others, the mean=2.3100
and SD=3.1200. 81% students feel that when they communicate across cultures, never assume that the what other person has understood. The mean score is 2.31 when they use simple, clear, accurate, and correct and familiar language.

Finally, they recognized that language barriers limit their abilities for further progress and produces inferiority in them. Effective communication is essential to high-quality healthcare. Student nurses said that being able to communicate with each other in their language was very important for their work environment. They felt that they hide some information due to language barriers.

5. Conclusion

The results of this study have demonstrated that language problems can hinder nurses' capacity to successfully communicate with their patients, teachers and colleagues in any location. A significant number of students were concerned about language barriers. This can hinder the delivery of appropriate, timely, safe, and effective care and skills to fulfill the desired requirements. Nursing students can improve their learning abilities affected by language barriers by gaining a better understanding of these communication skills and developing appropriate strategies to overcome them. As a result, language barriers have a great impact on healthcare delivery. Teachers should select their resources based on the academic levels and interests of their students and offer more materials that represent both cultures. Students should be given a chance to express themselves in a setting free from stress and danger. As a result, their interaction is based on mutual respect and trust.

6. Recommendations

• The findings from the study cannot be generalized due to the small sample size; they could serve to raise awareness about the growing need for multicultural-oriented nursing education systems.

• Future research is projected to include implementation of the recommendations and evaluations of their outcomes.

Declarations

Source of Funding

This study did not receive any grant from funding agencies in the public or not-for-profit sectors.

Competing Interests Statement

The authors have declared no competing interests.

Consent for Publication

The authors declare that they consented to the publication of this research work.

Ethical Considerations

Ethical considerations were followed according to the ethical principles of Helsinki declaration.

Author’s Contribution

All the authors took part in data collection and manuscript writing equally.
References


