Relation between Mindfulness and Communication Skills among Psychiatric and Mental Health Nurses

ABSTRACT

Background: Mindfulness directly effects on communication skills, nurses that allow being truly present in this moment with curiosity, kindness, and compassion, listening with an open mind, and nonjudgmental heart to the other person. Speak skillfully, generally avoiding lying and harsh language and increase effectiveness skills. The aim of the study was to examine the relation between mindfulness and communication skills among mental health nurses. Descriptive correlational design was utilized to achieve the aim of the study. Setting: Psychiatric Mental Health Hospital in Benha City, Qalubia Governorate, which is affiliated to general secretariat. A convenient sample of 56 male nurses and 44 female nurses) from the above setting. Three tools for data collection were used, tool one was used to assess Socio-demographic characteristics of the studied sample, tool two to assess mindfulness and tool three to measure communication skills. Results reveals that. Nearer to half of studied subjects (49) had moderate level of mindfulness. More than half (50%) had average communication skills. There was positive significant correlation between studied nurses mean score of total mindfulness and their total mean score of communication skills (p<0.05). Conclusion: Mindfulness influence positively on nurses communication skills, there was positive significant correlation between studied nurses mindfulness and their communication skills. Recommendations: educational programs should be conducted to all psychiatric nurses about mindfulness techniques to improve their communication skill and psychological wellbeing.

Key words: Mindfulness, Communication Skills, Psychiatric, Nurses

Introduction

Communication is fundamental to the existence and survival and its significance in human life to extent that effect the individual psychological well-being. (Brownie et al, 1997). Communications is one of the basic skills of social life which described as a dynamic process of creating and sharing ideas, information, views, facts and feelings from person to another to reach a common understanding objectives which
involves mainly elements sender, message, and receiver. Also, good communication skills are defined as an important part of nurses’ core competencies, crucial for nursing practice and patient-centered care. To communicate effectively, nurses must acknowledge their own emotional responses according to nursing practice requires not only scientific knowledge, but an additional effective interpersonal communication, intellectual and technical abilities and kills (Boykins, r· l).

Mindfulness is an increasingly common topic in both popular and professional. In clinical populations, it’s defined as the capacity to intentionally bring awareness to present-moment experience with an attitude of openness and curiosity. It’s being awake to the fullness of your life right now, by engaging the five senses and noticing the changing landscapes of your mind without holding on or pushing away what you’re experiencing. Being mindful doesn’t mean stopping your mind from thinking or trying to be relaxed and peaceful. It benefit the healthcare professionals both personally and professionally through reduce psychological and physiological stress, emotional distress, and burnout while improving empathy, communication, job satisfaction, and sense of well-being (stroud, r· l).

Mindfulness is emerged as a powerful personal and social resource that allows people to deal faster and better from adverse life events and prepares them to deal more effectively with future adversities. This spiritual practice calming the mind and gaining insight into the impermanent and interdependent nature of self. This benefits of observing thoughts, impulses, and emotions appear to help people lead happier, more productive and fulfilling lives through the process of coming to
know themselves, realizing their experiencing and observe habitual pattern of their behavior (Tugade & Fredrikson, 2012).

Mindful communication refers to the process of being present during the interactions with other people. When nurses undistracted and present in the they will be better able to empathize with others, pick up on verbal and nonverbal cues, and be more sensitive to a different point of view, or situational context, not only strengthen relationships in every area of the life, it also feel confident in choices both personally and professionally, increase ability to be simultaneously curious and grounded is more likely to communicate, willing to listen and act with good toward audience to achieve constructive conversation (Hall, 2012).

Greater awareness and less distraction in the clinical setting can improve the nurse assessment skills (for instance, allowing her to identify changes in a patient’s condition) and her performance of complex technical procedures that may reduce the risk of clinical errors. Mindfulness can enhance her communication with patients and other healthcare team members by bringing a greater awareness to how and what others are communicating. Listening and speaking with greater attention can lead to more effective communication and better clinical outcomes, particularly in crises (Lois et al., 2012).

When psychiatric and mental health nurses more mindfulness practice, they augments positive reappraisal, it may prevent communication difficult that arise as a result of unconscious, maladaptive pattern of behavior. Allow to notice how communication concepts such as self-talk and nonverbal behavior acts as internal and external influences on their thought and emotional reactions. With this awareness mental health nurses make informed decisions about how to appraise and respond to
challenging situations, they more become cope effectively with stress, reduce the risk of burnout, more attention and improved work relations, understanding of clinical situations, relationships with other health care team, and ultimately the self. With this understanding comes the possibility of providing wiser and more compassionate care for the patients and self (Williams et al., 6107).

**Significance of the study:**

Communication skills is widely regarded to be a key determinant of patient satisfaction, compliance and recovery. To be able to communicate effectively with others is at the heart of all patient care. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) claims that 65% of adverse events or incorrect treatment is associated with communication failure. In its description of core competencies in the health profession, For this reason communication and communication skills should play an important role in nursing education and practice. Poor communication among health care teams can cause miscommunication, medical error and compromised safety and care. It can also prompt high turnover among health care staff (Owen Hargie, 6102).

Mindfulness enhances self-regulation abilities, including behavior flexibility and emotion regulation. Mindful awareness could enhance acceptance of negative or uncomfortable thoughts and sensations that are likely to occur. Mindfulness can enhance the communication with patients and other healthcare team members by bringing a greater awareness to how and what others are communicating. Listening and speaking with greater attention can lead to more effective communication which obtains its data from the very bases of human experience, namely
sensations, perceptions, emotions, thoughts, and consciousness itself (Shapiro et al., 2014).

so the aim of this study is to investigate the relationship between mindfulness and communication skill.

**Theoretical and operational definition**

Communication theoretically defined as is the process of exchanging the information between individuals or groups of people. Communication is successful only when both the sender and the receiver understand the same information. Internationally, good communication skills are described as an important part of nurses’ core competencies, crucial for nursing practice and patient-centered care. Nurses greet the way patients and other health professionals will affect how health care is provided (Percival, 2016).

In the present study communication can be operationally defined by the mean score of communication skills as general communication skills (verbal and nonverbal), interpersonal skills, speaking skills, Active listening and Asking questions skills measured by (Suzan & Krisanna, 2016).

Mindfulness theoretically defined as a kind of nonjudgmental, present-centered awareness in which each thought, feeling, or sensation that arises in the attentional field is acknowledged and accepted as it is. In a state of mindfulness, thoughts and feelings are observed as events in the mind, without over-identifying with them and without reacting to them in an automatic, habitual pattern of reactivity. This dispassionate state of self-observation is thought to introduce a “space” between one’s perception and response. Thus mindfulness is thought to enable one to respond to the notion of mindfulness require both control of cognitive processes (i.e., attention self-regulation) and monitoring the stream of consciousness (Kabat-Zinn & Shapiro, 2017).

In the present study can be operationally defined by the mean score of mindfulness scale items measured by (Bishop, 2017).
**Subject and methods**

This study aimed to examine the relation between mindfulness and communication skills among mental health nurses in psychiatric and Mental Health Hospital at Benha City.

**Research question ?**

1. What are the level of mindfulness among mental health nurses?

2. What are the level of communication skills among mental health nurses?

3. What is the relation between mindfulness and communication skills among mental health nurses?

**Research Design:**

A descriptive correlational design was utilized to achieve the aim of the study.

**Research Setting:**

This study was conducted at the Psychiatric Mental Health Hospital in Benha City, Qalubia Governorate, which is affiliated to general secretariat. It has 6 departments (4 males, 0 female and 1 department for addiction) and outpatient. The hospital with a capacity of 200 beds. It works 24 hours per day, 7 days per week. The hospital provides care for patients diagnosed with acute and chronic mental illness who need institutional care and receiving new cases for diagnosis and treatment as well as follow up for patients after discharge in Benha and other around cities.

**Research subject:**

A convenient sample of 11 psychiatric nurses fulfilling who the following inclusion criteria were selected.

**Inclusion criteria for nurses:**

1. Both sexes (male – female).

2. Willing to participate in the study.
Nurses have more than three year experience in psychiatric mental health hospital.

**Tools of data collection:**

In order to achieve the aim of the study, the following tools were used:

**Tool (1): Interview Questionnaire Sheet:**
This tool was developed by the researcher based on previous literature under guidance of supervisors to elicit information about:
- Socio-demographic characteristics of the studied sample which was constructed to describe nurses as (age, sex, social status, residence, educational level, occupation, years of experience and job).

**Tool (2): Mindfulness Scale**
This scale was developed by Bishop (2013). It used to assess mindfulness. The Scale was translated into Arabic by the researcher. It consists of 13 items: items 1, 5, 7, 11, 12 focus on Curiosity score and items: 2, 4, 6, 8, 9, 11 focus on Decentering score. Each question was answered from (1) mean never, (2) mean sometimes, (3) mean always.
Total Scoring System of mindfulness scale was categorized as follows:
- 1-6: indicate poor mindfulness levels
- 6-23: indicate mild mindfulness levels
- 24-49: indicate moderate mindfulness levels
- 50-66: indicate high mindfulness levels

**Tool (3): Communication Skills Scale**
This scale was developed by Suzan & Krisanna (2012). to measure communication skills, The Scale was translated into Arabic by the researcher, it consists of 5 subscale include 33 items, each items was answered from (1) mean never display behavior, (2) mean seldom display behavior, (3) mean almost always display behavior.

Total scoring system of Communication Skills Scale was categorized as follows:
- 1-14: indicate poor communication skills
- 15-34: indicate mild communication skills
- 35-55: indicate moderate communication skills
- 56-66: indicate high communication skills
Methods of the study

The preparatory phase:

An extensive literature related to the study area was done including electronic dissertation, available books, articles, doctoral dissertation, research and peer interaction, and idea from external sources and periodicals. A review of literature to formulate knowledge base relevant to the study area also done to get a clear picture of all aspects related to the research topic.

Validity of the tools:

Tools were provided to a jury of five experts in psychiatric nursing field. Tools were checked for the relevancy, clarity, comprehensiveness and applicability of the questions. The tools proved to be valid according to their opinions and the modifications were done.

Reliability of the tools

Reliability was applied by the researcher for testing the internal consistency of the tools, by administration of the same tools to the same subjects under similar condition on one occasion. Answer from repeated testing were compared (test-retest reliability) the tools revealed strongly reliable of .74 for mindfulness scale and .69 for communication skills scale.

Approval:

Official letter from the Faculty of Nursing Benha University to all authorized personal of the Psychiatric & Mental Health Hospital to conduct the study was done. Oral consent of the subjects was taken to participate in the study. Full explanation about the aim of the study was explored.

Consent and Ethical consideration:-

All subjects were informed that participation in the study is voluntary. Anonymity and confidentiality of each participant will be respected and protected. Confidentiality will be assured and subjects were informed that the content of the tool will be used for research purpose only and they had the right to refuse to participate in the study or withdrawal at any time without any consequences.
Pilot study:

Pilot study was done after the development of the tools and before starting data collection. It was conducted on 01 psychiatric nurses at Psychiatric and Mental Health Hospital in Benha City. Using the tools of the study(1),(2) and (3). The purpose of the pilot study was to test the clarity, applicability and feasibility of tools. In addition, it served as an estimate for the approximate time needed for interviewing psychiatric nurses as well as to find any problems that might interfere with data collection. After obtaining the results of the pilot study, modification of tools was done. A final format was developed under the guidance of supervisors. Those nurses were excluded from the actual study.

Field work (Procedure of data collection):

Before data collected an official letter was addressed from faculty of Nursing/ Benha University to the director of psychiatric and mental health hospital at the above mentioned setting for requesting their permission and cooperation to conduct the study. All of authorized personal provided needed information about the purpose and importance of the study. All nurses matching the inclusion criteria were approached by the researcher to fill the questionnaire according to the following:

1. The researcher introduced herself to the nurses then explaining the aim of the study for each one of them.

2. Oral consent was obtained from every participant who fulfill the inclusion criteria.

3. Brief description about the purpose of the study and the type of questionnaire required for filling was given to each participant.

4. The researcher visited the selected site to collect data from subjects from in patient ward of psychiatric and mental health hospital in spring season.

5. Questionnaire sheets were distributed between nurses and they were asked to fill them individually. Each interview lasted from 21 to 31 minutes.

6. The period of the study was from beginning of March 2019 till beginning of June 2019. The visits were twice weekly (Saturday - Monday) at 9 am to 4 am.
**Statistical analysis:**

Data collected from the study was coded, revised and entered using PC. Data entry and statistical analysis were done using the statistical package for social science (SPSS) version 21. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables, mean and standard deviation for quantitative variables. Qualitative variables were compared using the chi-square test and correlation coefficient was used to measure the direction and strength of the correlation between variables. Statistical significant difference was considered if $P < 0.05$. A very highly statistically significant difference was considered if $P < 0.01$.

**Results**

Table (1): Illustrates that, the studied subjects consist of more than half of them (56%) are male. The majority of them with mean age (36.9) years. Regarding to their social status most of them (9%) are married. Near to two third of them (64%) have technical nursing education. More than half of them working a staff nurse (49%) and nearer to half their experience more than 10 years. More than two third of the sample (75%) are from rural area and finally around more than three quarters of the studied subjects (81%) their financial status is to some extent enough for living.

Figure (1): Indicates that, nearer to half of studied subjects (49%) having moderate mindfulness level.

Figure (2): Shows that, more than half of the studied subjects (51%) having average communication skills.

Table (3): Reveals that, there is positive correlation between total mean score of mindfulness and nurses years of experience while negative correlation between total mean score of mindfulness and their age.

Table (4): Demonstrate that, there is positive correlation between total mean score of communication skill and both of nurses years of experience and their age.

Table (5): Reveals that, there is positive correlation between studied nurses total mean score of mindfulness and their total mean score of their communication skills ($p < 0.05$).
Table (1): Frequency distribution of socio-demographic characteristics of the studied nurses (n=111).

<table>
<thead>
<tr>
<th>ITEMS</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>56</td>
<td>56.0%</td>
</tr>
<tr>
<td>Female</td>
<td>44</td>
<td>44.0%</td>
</tr>
<tr>
<td>Age in years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-28</td>
<td>16</td>
<td>16.0%</td>
</tr>
<tr>
<td>28-38</td>
<td>38</td>
<td>38.0%</td>
</tr>
<tr>
<td>38-48</td>
<td>39</td>
<td>39.0%</td>
</tr>
<tr>
<td>48</td>
<td>7</td>
<td>7.0%</td>
</tr>
<tr>
<td>Mean ±SD</td>
<td>36.4 ± 9.8</td>
<td></td>
</tr>
<tr>
<td>Social status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>3</td>
<td>3.0%</td>
</tr>
<tr>
<td>Married</td>
<td>97</td>
<td>97.0%</td>
</tr>
<tr>
<td>Educational level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical nursing education</td>
<td>64</td>
<td>64.0%</td>
</tr>
<tr>
<td>Bachelor of nursing</td>
<td>36</td>
<td>36.0%</td>
</tr>
<tr>
<td>Job</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff nurse</td>
<td>60</td>
<td>60.0%</td>
</tr>
<tr>
<td>Supervisor</td>
<td>40</td>
<td>40.0%</td>
</tr>
<tr>
<td>Years of experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 5 years</td>
<td>10</td>
<td>10.0%</td>
</tr>
<tr>
<td>5-10 years</td>
<td>44</td>
<td>44.0%</td>
</tr>
<tr>
<td>More than 10 years</td>
<td>46</td>
<td>46.0%</td>
</tr>
<tr>
<td>Mean ±SD</td>
<td>14.8 ± 9.2</td>
<td></td>
</tr>
<tr>
<td>Setting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>71</td>
<td>71.0%</td>
</tr>
<tr>
<td>Urban</td>
<td>39</td>
<td>39.0%</td>
</tr>
<tr>
<td>Economic status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not enough</td>
<td>7</td>
<td>7.0%</td>
</tr>
<tr>
<td>Enough</td>
<td>8</td>
<td>8.0%</td>
</tr>
</tbody>
</table>
Figure (1): Level of mindfulness among the studied nurses (n=\cdots).

![Bar chart showing levels of mindfulness among nurses](image)

Figure (2): Frequency distribution of the studied nurses regarding to their communication skills

![Polar area chart showing communication skills distribution](image)
Table (2): Correlation between total mindfulness, age and years of experience for studied nurses.

<table>
<thead>
<tr>
<th></th>
<th>Total mindfulness</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R</td>
<td>p-value</td>
</tr>
<tr>
<td>Age</td>
<td>, .1 *</td>
<td>. . 4</td>
</tr>
<tr>
<td>Years of experience</td>
<td>, .7 *</td>
<td>. . 3</td>
</tr>
</tbody>
</table>

Table (3): Correlation between total communication, age and years of experience for studied nurses.

<table>
<thead>
<tr>
<th></th>
<th>Total communication skills</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>R</td>
<td>p-value</td>
</tr>
<tr>
<td>Age</td>
<td>, .1 4</td>
<td>. . 5</td>
</tr>
<tr>
<td>Years of experience</td>
<td>, .1 3</td>
<td>. . 7</td>
</tr>
</tbody>
</table>

Table (4): Correlation between total mindfulness skills and total communication skills

<table>
<thead>
<tr>
<th>Total communication</th>
<th>Total mindfulness</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>r</td>
<td>, .1 4</td>
</tr>
</tbody>
</table>

Discussion

Communication in mental health nursing is an essential component of all therapeutic interventions. The knowledge and interpersonal skills that a nurse uses to communicate are essential aspects of helping the person who is experiencing mental health problems or distress, as well as facilitating the development of a positive relationship. This requires the mental health nurse to use a range of appropriate and effective communication and engagement skills with individuals, their careers and other significant people involved in their care (Melinda Fouts, \* 4). Mindfulness directly effects on communication skills. When it comes to mindful communication, we are aware of the choices we are making and of our thinking and reasoning. Link nonverbally and verbally conveyed emotional support and improved affective outcomes, conceived as
enhanced nonreactive attention and awareness of current internal and external stimuli (Melinda Fouts, 1994).

This study aimed to examine the relation between mindfulness and communication skills among mental health nurses in psychiatric and Mental Health Hospital at Benha City.

The result of current study revealed that. The majority of the studied nurses were male. This might be due to presence of four male department, which contain large number of male nurses they needed for psychiatric emergency cases, and one female department. These results were similar to a study done by Rosseel (1994) who found that most of the studied sample were males. Also supported by Panel Tammy(1994) who found that two-thirds of the studied subject were male. While these results contradicted with Bazarko et al., (1997) they found more than three-quarter of studied subject were female.

As regards to the age, the present study showed that most of the studied nurses age range from 38 to 48 years with the mean age 36.43 years . This result was congruent with Lois et al., (1998) who pointed out that most of the studied subject age range from 35 to 45 years with mean age 33.03 years. Also similar to the result of De vries et al., (1997) they found that the most of studied subject mean age 39.4 years.

Concerning nurse's marital status, the present study showed that the majority of the studied nurses were married, while the minority of them was single. This may be due to the studied subject were at age 38 to 48 years and most of them from rural aria which encourage early marriage. This finding were similar to Falkenstorm (1997) who found that more than three-quarter of the studied group were married

Also, As regarding to the educational level, the result of the present study revealed that more than half of the total nurses were technical nursing .This illustrate that nurses are in need to know, learn and obtain information regarding communication and mindfulness skills . This result was supported by Gao et al.,(1997) they found the same result, most of studied sample had technical nursing education.

Considering studied subjects work status, the result of present study show that more than half of studied sample were employed as staff nurse. This might be due to most of them had technical nursing education and the polices and needs of hospital are to large number of the staff
nurse. This result agreed with Rodriguez-Rey et al., (Rodriguez-Rey et al., 2018) they found that most of studied sample were employed as staff nurses that their monthly income was some extent enough for living.

With regards to nurses years of experience, the present study showed that the highest percentage of them had more than 10 years of experience in psychiatric field and the minority of them had 5 years of experience. This finding disagreed with Bazarko et al., (Bazarko et al., 2018) they found that most of nurses had less than 5 years of experience in psychiatric field.

As regards to the residence, the present study revealed that around three quarters of studied sample lives in a rural area. This result was supported with Shelia & Hartung (Shelia & Hartung, 2018) they found in their result majority of studied sample reported in rural societies.

Regarding to mindfulness levels among the studied nurses, the result of the present study indicates that, nearer to half of the studied subjects having moderate mindfulness level. This might be due to their age, experience, and desire to learn and become more open-minded, compassionate toward themselves and their patients increased their ability to be non-judgmentally aware and accepting of their circumstance. Jensen et al., (Jensen et al., 2018) they found that more than half of the studied nurses having moderate mindfulness level supported these results. While disagreed with Baer et al., (Baer et al., 2018) they found that three quarter of the studied nurses having high mindfulness level. also this result disagreed with Falkenström (Falkenström, 2018) who reported that majority of the studied nurses having high mindfulness level. This difference with the present study could be due to culture, educational level and interest difference.

Concerning the communication skills levels among the studied nurses, the result of the present study Shows that, more than half of the studied subjects having average communication skills. This might be due to lack of knowledge and practice of communication skill. This results was supported by Zeyghami Mohammadi et al. (Zeyghami Mohammadi et al., 2018) they found that most of the nurses had average communications. This also similar to Mohamed & Sharifirad (Mohamed & Sharifirad, 2018) they reported that more than half of studied subjects had average communications while disagreed with Rhezaii, et al. (Rhezaii, et al., 2018) they found in their study That most of the studied sample having poor communication skills.
Concerning correlation between total mindfulness skills and total communication skills. The present study showed that there was positive correlation between studied nurses total mean score of mindfulness and their total mean score of communication skills. This illustrate that mindfulness can enhance communication skills with other healthcare team members by bringing a greater awareness to how and what others are communicating. Listening and speaking with greater attention can lead to more effective communication and better clinical outcomes, particularly in crises. This result was agreed with Maurice (6102) who reported that Mindfulness and communication go hand in hand.

Also this result supported by Parker et al., (6102) They found that Mindfulness, with its inherent focus on being present and non-judgmental, seems particularly suitable for promoting the quality of communication. Specifically, we assume mindfulness to be related to specific communication behaviors and later similar to Greeson (6104) who found that significant improvements with large effects of mindfulness and significant improvements with moderate-to-large effects on communication skills.

Concerning correlation between total mindfulness, age and years of experience. The present study pointed out that there is positive correlation between total mean score of mindfulness and nurses’ years of experience while negative correlation between total mean score of mindfulness and their age. This might be due to increase knowledge and observes their internal experiences (thoughts, emotions, physical sensations) might be better able to accept negative emotions and to deal with positive way to surround events. This result was supported by Hayes (6102) & Bishop et al., (6104) who showed in their study years of experience were strongly correlation coefficient with mindfulness.

Concerning correlation between total communication skills, age and years of experience. The present study pointed out that there was positive correlation between communication skills, age and years of experience. This result was agreed with by Keshtkaran et al., (6107) they showed in their study a significant correlation was observed between the age, with general communication, speaking, listening, asking, feedback and punishment and reward, that increase age lead to improvement of communication skills.
Conclusion

It was concluded that nearly half of studied sample had moderate mindfulness level and more than half of the studied sample had average communication skills. Mindfulness influence positively on nurses’ communication skills, there was positive correlation between mindfulness skills and communication skills.

Recommendations

- Psycho-educational programs should be given to psychiatric nurses to help them gain self-awareness, self-understanding and enhance their communication skill and mindfulness skill.

- Conduct workshops and seminars to help the nurses in refreshing their knowledge, and to discuss their daily mindful interaction.

- Stress management and mindfulness training program should be given to psychiatric nurses to relieve their psychological distress and enhance their communication skill.

References


Zeyghami Mohammadi (2014): The investigation of the ratio of education of interpersonal communication skills on Associate degree of family health staff on their satisfaction in health care facility centers of Mashhad. [Google Scholar]


