

COMMUNICATIVE COMPETENCE OF NURSING STUDENTS: STEPS TO IMPROVE

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Purpose: Communicative competence of nursing students is one of the central prerequisites for success in education and future occupation. However, some countries including Ukraine have faced low levels of communicative competence in nurses and the need to introduce this topic into the nursing curriculum. The aim of the research is to identify key factors associated with communicative competence.

Design/methodology/approach: Ukrainian nursing students were surveyed to determine specific policies on how to improve shaping communicative competence during education and in-service. Since communicative competence is one of soft skills, another survey was conducted among nursing teachers and students to explore their readiness to develop soft skills. Factor analysis was performed to process the survey data.

Findings: Factor analysis showed that students' communicative competence has a significant relationship with five factors indicating communication effectiveness, the ability to work together, willingness to improve communicative skills and availability of nursing-specific trainings. It was found that over 60% of teachers and 70% of students support introducing soft skills classes or trainings.

Research limitations/implications: The research was limited to nursing students and teachers. Practicing nurses will participate in the next phase that will allow developing specific trainings for the curriculum.

Practical implications: The research results are summarized in the program for developing soft skills in nursing students and nurses employed. The study was carried out at an initial stage of a short-term program suggested to improve communicative competence. The subsequent stages and management tools are addressed.

Social implications: The program outlined in the research can lead to deeper international contacts and partnerships in nursing education, facilitate the exchange of experience and best practices. As a result, nursing profession will become increasingly attractive and prestigious for local and international students, which will contribute to further improvement of the quality of nursing and life in general.

Originality/value: Factor analysis was used to process the survey data and identify key factors which influence shaping communicative skills in nurses. It makes it easier to determine priorities when planning programs to develop communicative competence, which is a common task engaging educational and public institutions, local and government authorities.

Keywords: communicative competence, nursing education, factor analysis, soft skills, program of improving communicative competence.

Category of the paper: Research paper.

1. Introduction

Before discussing how to improve the communicative competence of nursing students, it is necessary to define the meaning of the terms used. So, what is communicative competence? Turning to dictionaries, these trusted and reliable sources, we get:

Collins Dictionary (<https://www.collinsdictionary.com/>) – «a speaker's internalized knowledge both of the grammatical rules of a language and of the rules for appropriate use in social contexts».

The Cambridge Dictionary (<https://dictionary.cambridge.org/>) – «These words are often used together. Click on the links below to explore the meanings».

The final sentence suggests that this phrase does not have a universal and unchanging definition. Its meaning depends on the situation and the nature of the activity. If we talk about nursing, there is probably no serious doubt that it deals with many situations and is an ever-evolving field. The same will be true for the concept of communicative competence of nursing students.

Therefore, let us refer to the literature that attempts to address this issue. For many researchers, it appears most obvious to bring together the ideas about skills with the concept of competence. This approach resulted in a reasonable explanation that «understanding of communicative competence can benefit from understanding it as the situation-specific use of specific skills. We might then transfer what we already know about the acquisition of motor and other skills to the domain of communication, and this knowledge can help us to systematically train communicative competence» (Kießling, Fabry, 2021). For pragmatic purposes, this definition covers a full scale of teaching, acquisition, and testing of skills of communicative competence in nursing.

Research findings reported in numerous publications show that communication difficulties are a two-sided problem, engaging both patients and nurses. For instance, «studies show that a low level of patient satisfaction occurs in the case of an inadequate interpersonal communication between nurses and patients», and one contributing reason is the «poor effectiveness of shaping communicative competences of nurses based on standard education in the area of general psychology and communication knowledge, because this knowledge does not convert itself «spontaneously» into communicative competences during occupational activity» (Włoszczak-Szubzda, Jarosz, 2013). This is what nursing teachers worry about: «Nursing trainees have reported a lack of preparation and confidence in communication and interpersonal skills with patients and members of the health care team» (Del Vecchio et al.,

2022). It was also shown that nurses «have difficulty prioritizing dialogue with patients, due to lack of time, organizational and cultural factors. Like other health care professionals, nurses may also have difficulties communicating with patients due to personal fears and shortcomings» (Partsch et al., 2021).

Healthcare practitioners «identified patient-doctor and patient-nurse communication as an area for intervention to improve suboptimal patient satisfaction» (Allenbaugh et al., 2019; Mehralian et al., 2023). In its turn, nursing education community responds with many creative suggestions on curriculum development, instruction tools, technology, «methods of shaping and evaluating professional nursing communication», «both among student nurses and occupationally active nurses» (Włoszczak-Szubzda, Jarosz, 2013). Long-known methods are complemented by alternatives: «Role-playing, open dialogue, guessing games, and simulation activities may be given to the student-nurses to cultivate more on their skills in using varied communication strategies and to achieve a holistic approach to giving quality and excellent care to their patients» (Eustaquio, 2022). Other method, «an acting- based workshop, inspired by classic acting exercises taught in drama conservatories for decades, to develop core communication and interpersonal skills», appears «efficacious in instilling core communication and interpersonal skills to preclinical nursing students based on participants' self-efficacy ratings» (Del Vecchio et al., 2022). Some researchers make more specific suggestions regarding communicative competence in the curriculum: «In particular, students in the third and fourth years need a continuous/intensified curriculum that fosters their communicative competencies, such as listening to patients' needs and establishing effective interpersonal relationships with peers/superiors» (Kang, Lee, Cho, 2021). Communicative competence can be reframed within the broader context of nursing competence (Fukada, 2018) or even clinical competence (Kang, Lee, Cho, 2021).

It is truly said that the importance of communicative competence «does not guarantee its uniform and proper implementation in undergraduate curricula», and to achieve this several interventions are recommended, e.g. monitoring the allocation of credits assigned to communicative competence, «increasing the teaching load of these contents, improving their proportional distribution in all courses and warranting the presence of exclusive and compulsory subjects» (Ferrández-Antón et al., 2020).

The prerequisites of the nursing profession are numerous. Spiritual intelligence is one of them. Since it impacts the competency and self-efficacy of communication, «it is recommended to promote problem-solving skills, improve self-awareness, and pay attention to moral standards to nurture communicative competence and self-efficacy among nurses» (Bullington et al., 2019).

There are approaches underpinned by complicated philosophical principles, as in this example: «The communication training curriculum based upon phenomenology aims at systematically training students to stay focused upon patients' and relatives' narratives, allowing them to reflect upon and better understand their current situation» (Partsch et al., 2021).

The authors compare the approach to «other common communication methods used in nursing (motivational interviewing, caring conversations, empathy training)» and «highlight the nurses' role as dialogue partner as well as emphasize the importance of communication skills training in nursing education».

Nursing education has an international perspective «focused on determining outcomes, content, methods of teaching and learning, and the order of the learning situations for the 3 years of training» (Darmann-Finck, Reiber, 2021). The competence-based and situation-based curriculum gradually fosters communicative competences to a higher level, «with learning situations becoming more and more complex as the training progresses».

The communicative competence of nursing students is one of the central prerequisites for establishing positive therapeutic relationships with patients. Students' ability to effectively interact with patients contributes to patient satisfaction with medical care and reduces the likelihood of errors in treatment. High levels of communicative skills among medical students increase the overall standard of nursing care they demonstrate during practical classes and internships (Pope, Rodzen, Spross, 2008; Vaghee, Lotfabadi et al., 2018).

A few of principal features of communicative competence and recommendations on development of communicative skills are presented in many publications about medical and nursing education. The USA and the UK can be mentioned as useful examples (BMA, 2004). These details are not listed here because developing a specific syllabus on communicative competence is beyond the scope of this study.

Ukraine, like several other countries, has faced the problem of insufficient attention to the development of communicative competence in nurses. This may be due to long-standing traditions and standards in medical education, where the main emphasis is placed on clinical skills and theoretical knowledge, leaving aside communicative competence. It is often assumed that everyone has communicative competence, because this concept gives a misleading view of intuitive plainness, however, as can be seen from the above, it is quite difficult to define it. However, qualitative nursing care and a patient-oriented approach require professional communicative competence, thus it is necessary to actively introduce programs and trainings on the development of professional communicative competence into nursing curriculum in Ukraine (Holovchak, 2024b).

The issue of developing communicative competence among nursing students in Ukraine is relevant and important for several reasons. Firstly, communication helps maintain the patient's trust, understand patient's needs and expectations, and build fruitful relationships in the team of medical workers.

Secondly, the education of students cannot be reduced only to teaching professional skills. Successful nursing requires medical personnel with a high level of morality, ethics and the ability to empathize. These traits are associated with the level of communicative competence, which helps nurses to respond to difficult situations, interact with patients, colleagues with respect and empathy.

Thirdly, nursing students should be trained to transfer their communicative skills in various socio-cultural contexts because of extending international cooperation.

Finally, during the ongoing armed conflict in Ukraine and the following time of reconstruction nurses will care of patients who have survived and now are suffering of stresses, psychological disorders, and uncertainty in future. Nevertheless, they must start new life, and nurses' support at this time cannot be overestimated.

Direct borrowing of international experience seems unlikely possible due to some specifics of both Ukrainian nursing education and patients. Some topics are perceived as taboo when communicating with patients (e.g. sexually transmitted diseases, malignant neoplasms, abortion, mental disorders, etc.). Information literacy of Ukrainian patients is insufficient. Most of them prefer to ask a neighbor or relative or read posts on social networks instead of reading reliable patient-oriented literature available on trusted web resources (Mayo Clinic is one of them). They also do not have much experience in using IT, for example, contacting a family doctor by email. Formal patient education has not become a common practice in Ukrainian hospitals and library, so nurses are often forced to fill this gap in their communication with patients.

The above shows the urgent need to improve shaping communicative skills in nurses, starting from college training. The study presented below was designed and conducted as an initial stage of a short-term program to figure out key issues of introducing a communicative competence curriculum in nursing education and to achieve better understanding about how this initiative will be accepted by nursing community in Ukraine.

2. Search and Method Procedure

The general outline of the research is shown in Figure 1.

The research algorithm includes steps for collecting and analyzing data to draw conclusions based on the findings.

The main objects of this study were students at nursing schools. The study covered 35% of non-public nursing colleges, which ensures the representativeness of the sample surveyed, since the variety of educational institutions and their contribution to the training of healthcare practitioners is considered.

Anonymous online survey of students using the Google Forms tool was used for the primary data collection. The data obtained relate to students' opinions, attitudes, and needs for developing communicative competence. This very valuable direct feedback from future nurses helps identify the weaknesses and strengths of the existing education system and to determine specific policies for its improvement. The research was conducted from October 17, 2023, to November 4, 2023.

Factor analysis using Minitab software (<https://www.minitab.com/>) was used to process the survey data. In general, factor analysis identified groups of interrelated variables (factors), which helped to find complex relationships in the phenomenon under consideration and make it more understandable.

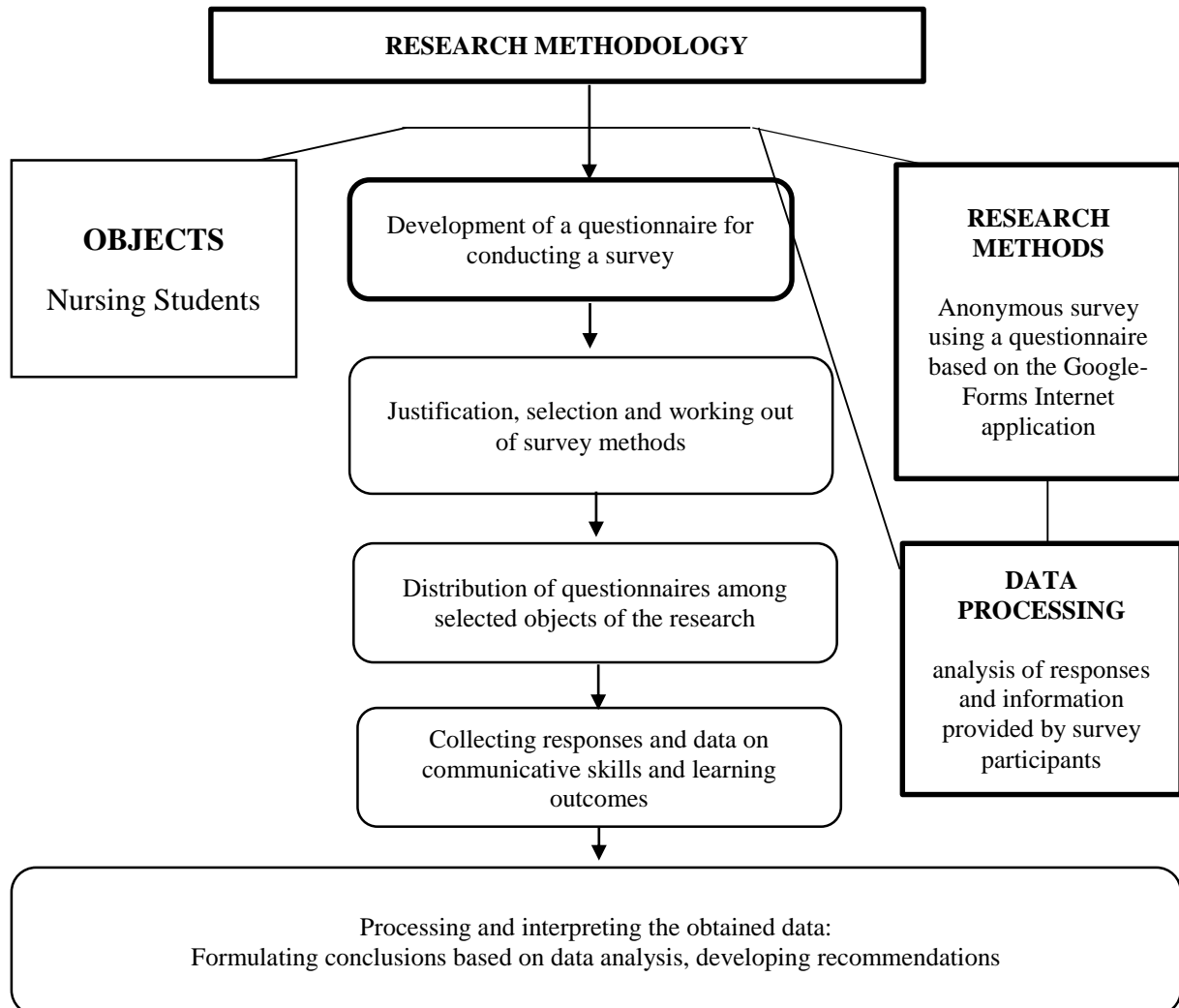


Figure 1. The general outline of the research.

Source: developed by the authors.

3. Results

During factor analysis various indicators were used to measure factors and the value of «Communality», indicating what portion of the variation in the initial data is due to each factor (Table 1).

The results obtained for the data below show that five main factors can be identified, since their Community exceeds the threshold value (0.5 - usually used as a criterion for including a factor in further analysis). Each factor explains from 7.2% to 25.7% of the total variation in the data, which indicates their significance. Five factors were identified because each factor's communality exceeded the threshold value of 0.5, indicating their significance in explaining the variance in the data. Each of these five factors accounts for between 7.2% and 25.7% of the total variation, demonstrating their contribution to understanding students' communicative competence. Additionally, the method of principal components highlights the strong relationships between variables and factors, reinforcing the importance of these five factors in the analysis. A communality of 0.5 is used as a threshold in factor analysis because it indicates that at least 50% of the variance in a variable is explained by the factors, ensuring that the included variables have a meaningful contribution to the analysis.

Table 1 «Determining the Number of Factors by the Principal Component Method», presents the loading coefficients for each variable on each of the five factors. These coefficients indicate how strongly each variable is related to each factor. The Communalities indicate how much of the variance in the variable is explained by all factors together.

Table 1.

Determining the Number of Factors by the Principal Component Method

Variable	Factor1	Factor2	Factor3	Factor4	Factor5	Communality
The level of understanding between students and teachers	0,112	-0,156	0,095	0,056	-0,420	0,226
Effectiveness of communication during internship	-0,114	-0,466	0,321	0,133	-0,000	0,351
Effectiveness of interaction with different age groups	-0,141	-0,446	0,318	0,174	-0,019	0,350
Communicative skills	0,603	0,411	0,417	0,089	-0,077	0,721
Improving communicative skills	-0,488	0,291	0,466	-0,416	-0,036	0,714
Communicative skills and improved learning outcomes	0,499	-0,126	0,154	-0,126	0,165	0,331
Students with high levels of communicative skills are best team workers	-0,027	-0,044	0,253	0,119	0,255	0,146
Programs or courses on developing communicative skills offered in nursing colleges	0,312	-0,445	-0,082	-0,506	-0,015	0,558
The importance of students' self-esteem of communicative skills in their development	0,035	-0,113	0,060	0,025	0,062	0,022
Variance	0,99521	0,92282	0,70264	0,51853	0,28067	3,41987
% Var	0,257	0,238	0,181	0,134	0,072	0,882

Source: Computed by Holovchak.

Table 2 «Factor structure regarding the development of students' communicative skills obtained by the normalized rotation method» shows the same data after applying the factor rotation. This method makes the relationships between variables and factor loadings more evident to make the structure easier to interpret.

Table 2.

Factor structure regarding the development of students' communicative skills obtained by the normalized rotation method

Variable	Factor1	Factor2	Factor3	Factor4	Factor5	Communality
The level of understanding between students and teachers	0,062	-0,096	-0,035	0,030	-0,459	0,226
Effectiveness of communication during internship	-0,065	-0,575	0,019	0,074	-0,099	0,351
Effectiveness of interaction with different age groups	-0,075	-0,576	0,016	0,021	-0,112	0,350
Communicative skills	0,834	0,114	0,011	-0,056	-0,091	0,721
Improving communicative skills	-0,023	-0,017	0,838	-0,074	0,071	0,714
Communicative skills and improved learning outcomes	0,392	-0,073	-0,156	0,377	0,075	0,331
Students with high levels of communicative skills are best team workers	0,131	-0,270	0,045	-0,061	0,225	0,146
Programs or courses on developing communicative skills offered in nursing colleges	-0,047	-0,018	-0,057	0,735	-0,112	0,558
The importance of students' self-esteem of communicative skills in their development	0,021	-0,125	-0,041	0,059	0,031	0,022
Variance	0,88416	0,77904	0,73624	0,70465	0,31578	3,41987
% Var	0,228	0,201	0,190	0,182	0,081	0,882

Source: Computed by Holovchak.

Table 3 «Factor Structure of Students' Communicative Skills Development» contains factor score coefficients for each variable. These coefficients are used to calculate factor scores for each observation in the factor analysis.

Table 3.

Factor Structure of Students' Communicative Skills Development

Variable	F	F	F	F	F
The level of understanding between students and teachers	0,019	0,013	0,042	-0,069	-0,798
Effectiveness of communication during internship	0,006	-0,446	0,008	-0,003	-0,073
Effectiveness of interaction with different age groups	0,001	-0,449	-0,003	-0,057	-0,111
Communicative skills	0,823	0,030	0,083	-0,144	-0,250
Improving communicative skills	0,042	0,026	1,004	0,150	-0,006
Communicative skills and improved learning outcomes	0,288	-0,097	-0,072	0,342	0,323
Students with high levels of communicative skills are best team workers	0,112	-0,233	-0,017	-0,034	0,412
	-0,101	0,114	0,138	0,845	-0,105
The importance of students' self-esteem of communicative skills in their development	0,014	-0,060	-0,020	0,021	0,060

Source: Computed by Holovchak.

A more detailed analysis of the results indicates that:

1. The loading coefficients show that all variables have a significant relationship with all 5 factors. The strongest relationship is observed for communicative skills (0.603) and improvement of communicative skills (0.499), while the importance of students' self-esteem is characterized by the lowest loading coefficient (0.035);

2. Communality indicates what part of the variance of each variable is explained by all factors together. It also shows the importance of each variable for the overall explanation of variance. For example, for communicative skills, communality is 0.72%, i.e. 72% of the variance of this variable is explained by all five factors;
3. After rotation of factors has changed the loading coefficients for some variables, the relationship with the relevant factor becomes more obvious. For example, the loading coefficient of communicative skills increases from 0.603 to 0.834.

Overall, the analysis shows that students' communicative competence has a significant relationship with all five factors. Particular attention should be paid to the relationship between communicative skills and the factors indicating communication effectiveness and the ability to work together.

The Kaiser criterion (sedimentation graph) was used to select the number of factors in the system of developing students' communicative skills. Figure 2 shows that a certain turning point is observed at the fifth factor. This indicates the consistency of the criteria used.

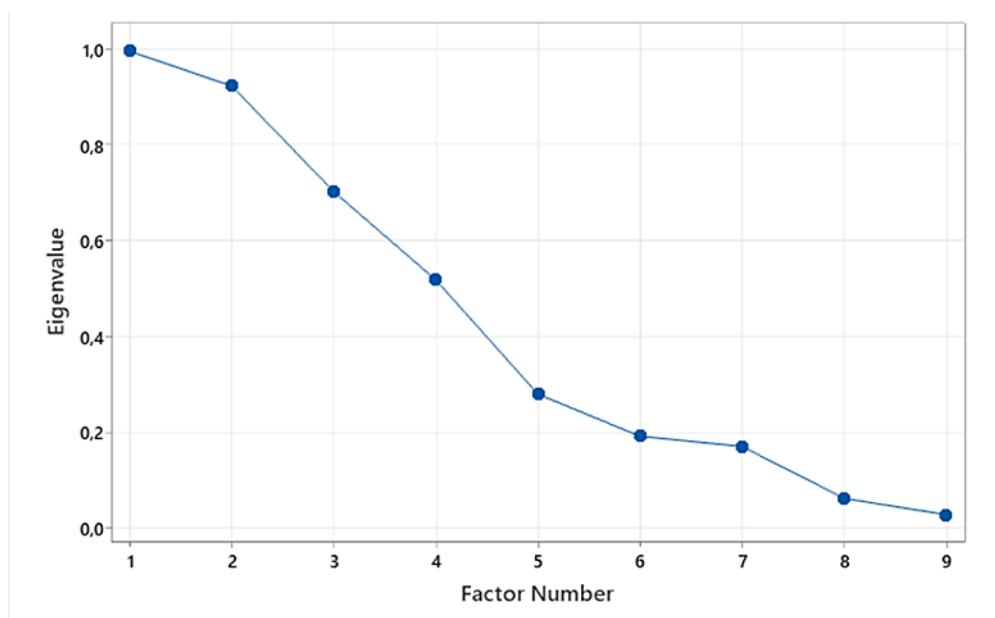


Figure 2. The sedimentation graph to specify the number of factors describing the development of students' communicative skills.

Source: created by the authors based on the conducted research.

In conclusion, it is important to note that students with a higher level of communicative skills tend to be more successful in their education and professional development compared to those with less developed skills.

The results obtained from the study show that «Improving communicative skills» and «Programs or courses on developing communicative skills offered in nursing colleges» are factors with high loading coefficients which is evidence of their substantial relationship with communicative competence of nursing students. This is consistent with the findings regarding the role of training reported in a few studies (Yusef, 2013; Holovchak, 2024a): it is nursing-

specific trainings on the development of the communicative competence, which differ from traditional academic courses, that are an effective instruction method, since they are based on previous communicative experience and allow the application of acquired knowledge in action without delay. Trainings on the development of communicative competence of nurses are very intensive and emotionally saturated educational processes. The knowledge obtained during the training is not provided in a ready-to-use form but is the result of a team effort with many participants. An important aspect is the independent learning of the participants and their intensive communication. Responsibility for the training efficiency is shared between the leader and each participant in the training (Yusef, 2013). Particular attention is given to introducing simulation and interactive technologies into instruction programs, which contributes to more effective development of communicative competence in the digital information environment (Holovchak, 2024a). Thus, training acts as a special technology that fosters a better understanding of one's personality, increasing success in life and managing one's own desires and actions (Totska, 2001).

Training as one of the education forms has certain objectives. Many guidelines on training objectives can be found on the Internet. We will mention here only one objective that is important specifically for nurses - the development of assertive communication (Yusef, 2013). Assertive communication skills are an important tool for improving teamwork in the healthcare, and nurses can acquire these skills during studies (Mansour et al., 2020).

The results of the training are not assessed immediately after its completion. Training outcomes can only be fully assessed later, when the participants apply the acquired knowledge and skills in their practice and everyday life. Only observation of changes in participants' work and behavior can help understand how successful the training was and what benefits it brought them.

Communicative competence takes its place in the structure of soft skills and has already become part of the curriculum at institutions of higher medical education (Kienle et al., 2021; Schick et al., 2020; Exenberger et al., 2021). It is obvious that health care workers should not only have professional skills (hard skills), but also have developed soft skills, including the ability to communicate effectively, listen, collaborate in a team, resolve conflicts, and understand (Education Hub, 2021). Such skills help improve the quality of healthcare delivery, increase patient satisfaction, and improve the standard of healthcare services.

It should be recognized that special educational programs, trainings and practical classes to develop leadership skills, emotional intelligence and other soft skills have not yet become a mandatory component of curriculum in nursing educational institutions in Ukraine. Thus, the development of nurses' soft skills should become an important aspect of public policy regarding the nursing educational reform which is in progress now.

In order to find out what issues should become key in the soft skills development program in nursing education institutions, the Google Forms tool was used to conduct a survey among teachers and students of nursing colleges in Ukraine. One of the objectives was to study their

readiness to develop soft skills. Respondents from 13 regions of Ukraine, a total of 2000 people, took part in the survey. Although an invitation to participate in the survey was sent to both students and teachers, it was students who took a more active part. In total, 87.6% of the survey participants were students, and only 13.4% were teachers.

Examination of soft skills in nursing students has significant potential to influence their social skills and future career. Firstly, knowledge of the soft skills concept allows students to understand the importance of these skills for their future career in the healthcare. Involvement in the survey allowed respondents to confirm or determine their level of proficiency in these skills. The survey results are presented in Figure 3.

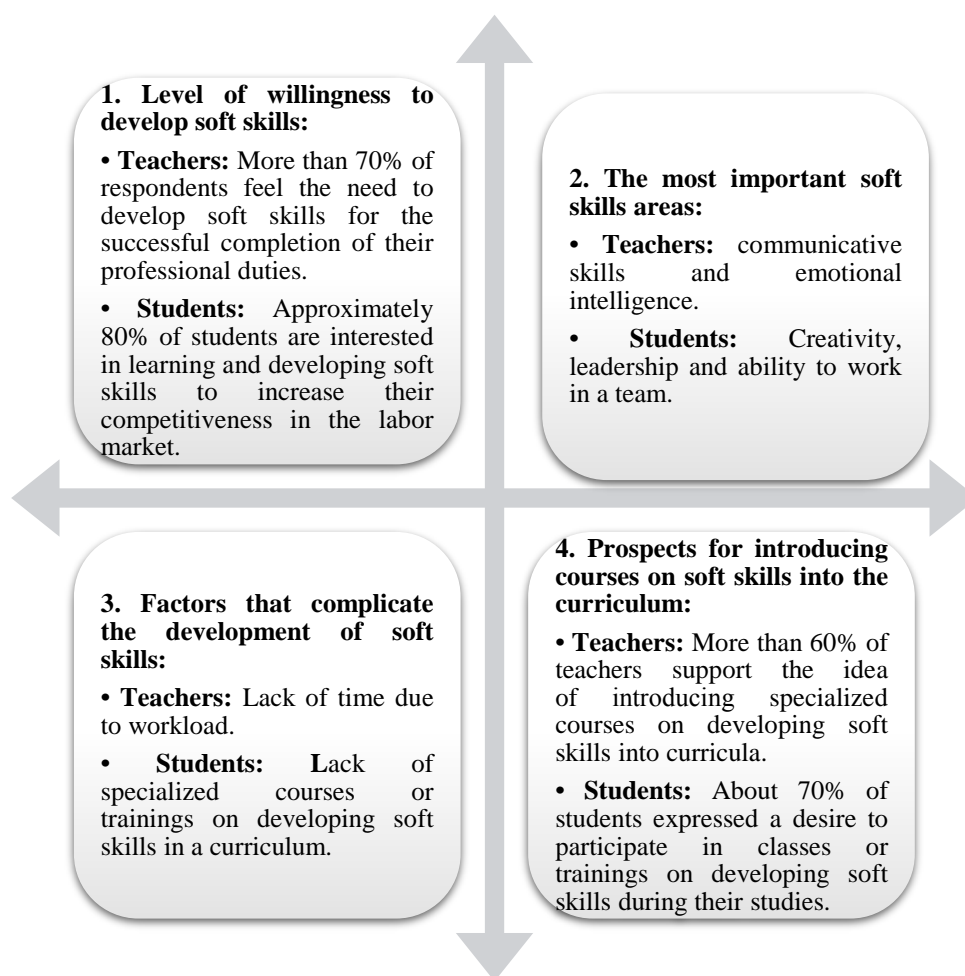


Figure 3. Results of the survey on willingness to develop soft skills.

Source: prepared by the authors.

The results of the survey and the respondents' comments in the open-ended questions of the questionnaire are summarized in the proposed program for developing soft skills in students of nursing education institutions (Figure 4).

It should be emphasized that the program also reaches nurses already employed in healthcare in accordance with the concept of continued or lifelong learning. In addition, the program will contribute to create an innovative environment for scientific research and the development of new methods of providing medical care of patients.

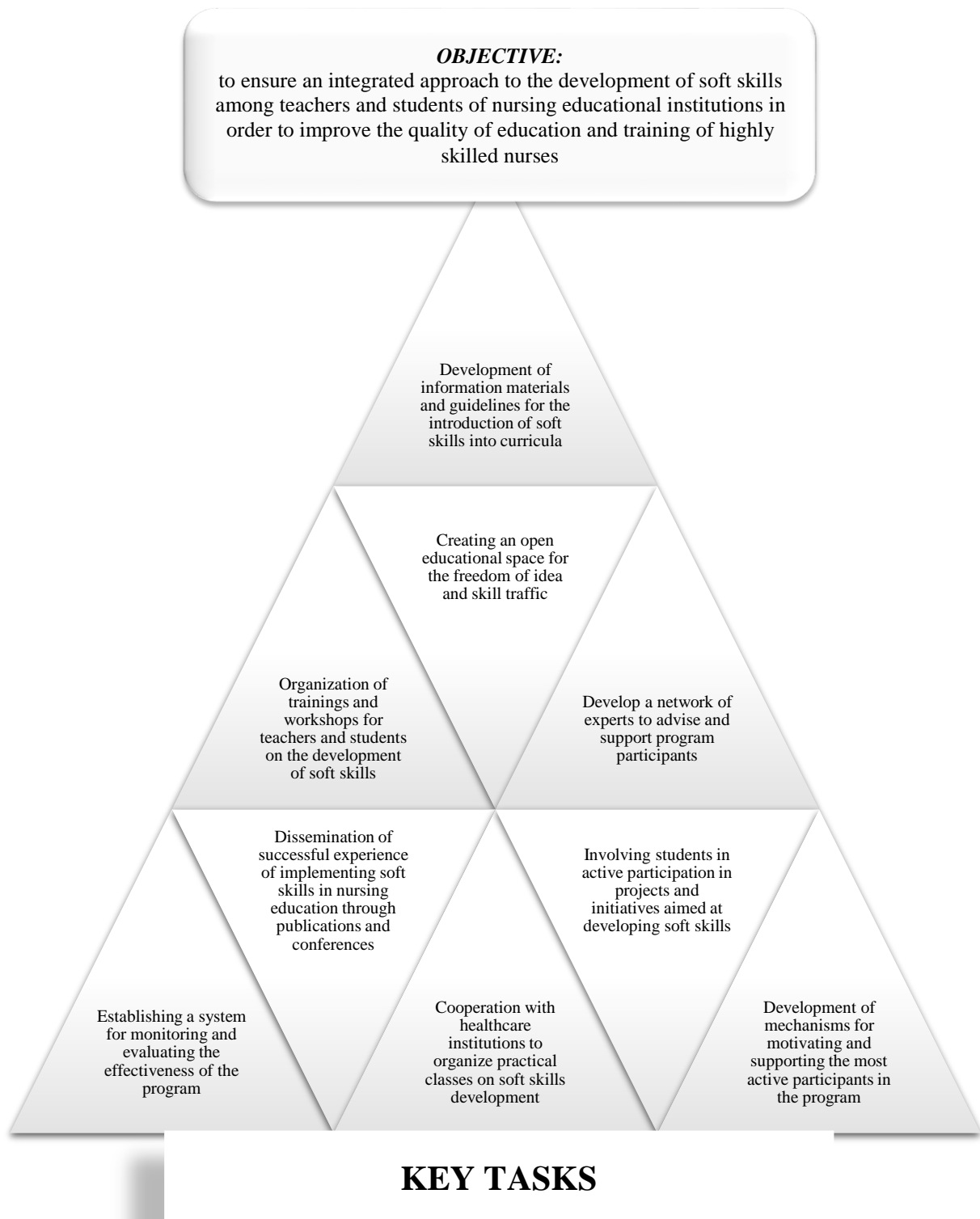


Figure 4. Program for developing soft skills in students of nursing education institutions in Ukraine.
Source: prepared by the authors.

4. Discussion and Conclusions

The results of the study confirm the importance of developing students' communicative skills for their success in education and future professional occupation. That factor analysis gives a better sense of the nature of these relationships. It is also easier to see how to determine priorities in planning programs for the development of communicative skills.

In the long term, the program outlined may lead to deeper international contacts and partnerships in nursing education, which will facilitate the exchange of experience and the implementation of best international practices. It is quite reasonable to expect that nursing schools in Ukraine will become increasingly attractive and prestigious for students from different countries, which will also contribute to the development of international cooperation and knowledge exchange. As a result, further improvement of nursing education will be possible.

The subsequent stages of the program of improving communicative competence in nursing students will include the development of trainings and workshops followed by verification of them in educational institutions. At the final stage, an assessment of the results through testing, surveys and observation is planned.

Some management tools can be added to support the program implementation. For example, mentoring programs which involve experienced colleagues to assist students in developing communicative skills. The level of students' communicative competence will be more accurately evaluated if assessment criteria and tools are implemented. Involvement of psychologists to provide individual consultations on emotional and social intelligence seems very helpful. These measures may help prepare nursing students for future occupation (Holovchak, 2024a).

Consequently, developing a communicative competence among nursing students in Ukraine is a common task engaging educational and public institutions, local and government authorities. The patients, that is, literally each of us, will express their opinion on the progress achieved, because it is communication with the nurse and doctor that creates our first impression of their qualifications, which determines our trust in them, the willingness to cooperate during treatment and, ultimately, the success of the outcome.

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