

2023

Effects of Nurse-Patient Relationship on Mental Health Patients' Medication Adherence/Healthcare Outcome

April Monica Magbual
Dominican University of California

<https://doi.org/10.33015/dominican.edu/2023.NURS.ST.28>

Survey: Let us know how this paper benefits you.

Recommended Citation

Magbual, April Monica, "Effects of Nurse-Patient Relationship on Mental Health Patients' Medication Adherence/Healthcare Outcome" (2023). *Nursing | Senior Theses*. 107.
<https://doi.org/10.33015/dominican.edu/2023.NURS.ST.28>

This Senior Thesis is brought to you for free and open access by the Department of Nursing at Dominican Scholar. It has been accepted for inclusion in Nursing | Senior Theses by an authorized administrator of Dominican Scholar. For more information, please contact michael.pujals@dominican.edu.

Effects of Nurse-Patient Relationship on Mental Health Patients' Medication

Adherence/Healthcare Outcome

April Monica Magbual

Thesis Advisor: Maryam Hamidi, BSN, RN, MSPH, PhD

Dominican University of California

May 05, 2023

Abstract

Background and Significance:

Medication adherence among mentally ill patients (MIP) is a significant issue which require extra support & guidance to encourage better recovery. Administering medication is a critical role of nurses that must be performed effectively and appropriately, especially for MIPs.

Literature Review and Gap in the Literature:

There is insufficient research exploring NPR and medication adherence specifically for MIPs. Participants' cultural variations, age range, specific interventions & economic factors influencing medication compliance are missing. The current study aims to explore strategies that nurses can implement during patient interaction in the hospital setting.

Study Design and Method:

A qualitative method will be used as a study design with two groups having one control group. One-on-one interviews and focus groups will be conducted as the study method to gather results toward the end of the shift.

Sample and Setting:

Participants will involve patients in multiple psychiatric/behavioral hospitals around Marin County. Gathering data from multiple settings can ensure that various cultural groups, age ranges, and economic statuses are considered for meaningful results. Participants will vary from 18 to 65 years of age which can also determine the severity of symptoms related to the onset of their mental health conditions.

Data Collection Method:

After conducting interviews and focus groups, participants' descriptive responses will be analyzed by looking for similarities and differences. Subsequently, the results will be categorized into themes in finding deep understanding and perspective from patients with mental illness.

Anticipated Results:

It is anticipated that the control group of participants with increased nursing interaction will have positive outcomes in improving their medication adherence and being committed to following medical treatments.

Clinical implications:

Demonstrating effective strategies to improve medication adherence in MIPs can guide nurses and other healthcare professionals to value patient interaction. Establishing conversational relationships and building supportive environments can contribute to the rich experience of implementing patient-centered care as an important nursing component.

Keywords: *empathy, trustworthiness, quality time, mental health, mental illness, listening skills, medication adherence and nurse-patient relationship*

Acknowledgment:

I would like to thank Amy Gilbert, University Librarian, for her assistance during my literature review and Dr. Maryam Hamidi, Thesis Advisor, for her guidance and support throughout my writing process. I would also like to give special thanks to my friends and family for their continued support throughout this journey. It would not have been possible for me to make it this far without their comfort and guidance in the nursing program.

Table of Contents

Abstract.....	2
Acknowledgement.....	4
Introduction	6
Problem Statement	6
Literature Review.....	7
Patients’ Subjective Experience of Antipsychotic Medication and NPR	8
Nurses’ Perception of Nurse-Patient Relationship.....	11
Other Factors Affecting Medication Adherence	13
Overall Discussion of Literature Review.....	16
Proposal for Further Study	18
Conclusion	23
References	26
Appendix	28

Introduction

Medication is a critical aspect of health for patients with mental illness in order to prevent relapses, improve symptoms, and have an overall better quality of life (Kalimashe, 2020). However, adherence to medication continues to be a hurdle for patients' daily regimens due to their extenuating circumstances that prevent them from prioritizing their healthcare needs. Having a nurse-patient relationship (NPR) affects patients' healthcare engagement and outcomes including medication adherence. NPR displays genuine care by healthcare providers such as registered nurses that focus on presence, alliance, and connection to respond to patients' needs. However, further research should be conducted to evaluate the value and effects of nursing presence (Kalimashe et al., 2021). In light of the need for such research, the goal of the current study is to identify whether spending more time building NPR during hospitalization has a positive impact on medication adherence and overall health outcomes for patients with mental health illnesses.

Problem Statement

Barriers to medication adherence involve experiences of side effects, severity of illness, and environmental factors from friends and family. More specifically, patients with schizophrenia experience delusions, hallucinations, disorganized thinking, speech, or motor behavior, and negative symptoms such as self-neglect, inability to experience pleasure, and being socially withdrawn (Mayo Clinic, 2020). With depression, people typically have feelings of sadness, hopelessness, tiredness, irritability, sleep disturbances, inability to make decisions, and suicidal thoughts (Mayo Clinic, 2022). These factors are individual barriers and may not be in patients' control as to why nonadherence to medications continues to occur in the mentally ill

population. Other contributing factors include patients' lack of insight provided by healthcare providers, side effects that could be worse than their illness, comorbidity of substance abuse or medical conditions, financial instability, intentional non-adherence due to denial of diagnosis, improper communication, using less beneficial drugs and dissatisfaction with treatment being provided by patients' healthcare team (Kalimashe, 2020).

Having a nurse-patient relationship (NPR) is important in the clinical setting, however, the lack of evidence in the literature to recognize its effects may also be due to the lack of staffing in the psychiatric field. A study found that nurses would only employ themselves in psychiatry if no other opportunities were offered. Other factors leading to disinterest in psychiatric nursing are stress, burnout, and negative attitudes about the working environment. There are also beliefs that patients have limited recovery, have a higher risk for re-hospitalizations, and that the workplace reduces their professional knowledge and learning (Rahmani, Mohammadi, & Fallahi-Khoshknab, 2021). Additional factors are related to patients' conditions which fear of being assaulted, and the varying behaviors of the mental illness.

Literature Review

The object of the literature review is to gather relevant information related to the topic of this study. Viewing related research can provide answers and familiarity regarding the effects of the nurse-patient relationship on medication adherence and overall health outcome for patients with a mental illness. Having sufficient information and evidence from other studies will help to solidify the existing knowledge and fill in the gaps that were missing from previous literature.

Prior to conducting the literature review, the librarian at the university was consulted to discuss relevant keywords and databases. Terms that were used during the actual search include *empathy, trustworthiness, quality time, mental health, mental illness, listening skills, medication*

adherence and nurse-patient relationship. Three main databases were used based on reliability, easy access to citations, and relevancy to the current study: Cumulative Index to Nursing and Allied Health Literature (CINAHL), PubMed, and Google Scholar. In total, 6 articles were found that focused on the issue of medication adherence and strategies to manage proper drug regimens. Articles were chosen by inputting keywords on either of the 3 databases which were modified to include full texts or a PDF version and publication dates within 5 years of the current study year. Other studies similar to the articles found from the original search were also used by choosing the “related articles” option or relevant articles from the reference list.

Six articles were selected for the literature review which were separated into 3 different categories. Each category will explore the nurse-patient relationship and medication adherence from the patients' and nurses' perspectives. The results will guide interpretation of past interventions in finding new ways of effectively increasing adherence to prescription administration in the psychiatric environment. Additionally, the studies include measurement tools to gather information from patients which may or may not be reliable due to their symptoms that can affect interpretation of questions as well as results. After the review of each category, a discussion will be included to identify gaps in interventions, sampling groups or study methods that can be fulfilled with the current study.

Category 1: Patients' Subjective Experience of Antipsychotic Medication and NPR

The first category of articles focuses on the perspective of nursing presence, diagnosis of mental disorders, and pharmacological treatment for their condition. Gathering information from the subjective experience of patients is critical to investigate the issues and factors affecting their nonadherence to their drug regimen. As a result, nurses may have an increased understanding and be provided with a foundation to begin their interactions with patients.

Article 1:

The first article by Kalimashe & du Plessis (2021) focuses on the relationship between mental healthcare users' (MHCUs) medication adherence and their perception or presence by registered nurses. The major finding of this study revealed that the adherence level of patients was partially adherent with an average score of 6.45 out of 10. Participants also reported that they recognized and sensed a low amount of nursing presence displayed by the nurses with an average score of 72.2 out of 124. Lastly, there is a positive correlation between medication adherence and nursing presence through self-reports using a Medication Adherence Rating (MARS) and the Present of Nursing Scale (PONS) (Kalimashe et. al., 2021).

Some of the strengths discovered after conducting this study were that it filled in the research gaps to answer the question of whether there is a relationship between MHCU pharmacological management and nursing presence through self-reports. On the contrary, the study methods focused only on self-reports by patients which can make it difficult to generalize the results. The authors also recognized that the results would have more value if participants from urban areas were also included in addition to urban health districts which was the only geographical region included in the study (Kalimashe et. al., 2021).

Article 2:

The second literature by Salzmann-Erikson and Sjödin (2018) from the category of patient perspectives aims to find out the experience of being diagnosed with schizophrenia and being prescribed antipsychotic medications along with the motivations and obstacles of staying adherent. The results of the study found that majority of the patients were simply not aware of their medications, however, they find it meaningful to have discussions with healthcare professionals such as nurses. For example, during injection administration patients perceive this opportunity as having quality time to address any concerns and goals of being in a better state in

the future without the need for medication. Being coerced and pressured by healthcare professionals to stay adherent created further stressors for patients to follow orders. However, Families who handled the participants' physical and mental needs in times of their illness served as motivation to continue their medication routine. Other major findings revealed that the motivation was to be able to participate in activities involving studying, writing, working, playing board games, and cleaning their homes (Salzmann-Erikson et al., 2018).

The study methods in this study followed a structured approach using relevant studies from 3 databases including PsychINFO, PubMed, and CINAHL. These databases were relevant for the purpose of the study largely due to the substantial amount of citations offered. Another strength of the study is that based on the major findings, the results provide complex factors influencing adherence to antipsychotic medications. However, reported experiences regarding medications were all-inclusive for the general population due to the limited antipsychotics that are available which are usually prescribed to manage similar conditions regardless of the area. Since the study method was a meta-synthesis from quantitative studies, the current study was designed to be qualitative which cannot be generalized (Salzmann-Erikson et al., 2018).

Discussion of Category 1:

Implications for these two studies suggested the usage of tools to monitor patients medication adherence and to signify the discussion of treatment options. Being uninformed, experiencing side effects, and forcing attitudes from healthcare professionals and families are major barriers to medication adherence that staff should be aware of. As a result, adopting a person-centered approach in healthcare where patients are viewed as the “experts” while professionals act as “learners” to assist during their recovery process can tackle this issue. To fill in the gaps between these two research, the current study will involve multiple cultural groups

and participants from different geographical areas for better population density. Knowledge of illness and access to medication due to economic conditions may impact people's ability to adhere to their medical necessities.

Category 2: Nurses' Perception of Nurse-Patient Relationship

The second category of articles involves nurses' experiences and perceptions of employing effective therapeutic relationships in their work environment to improve medication adherence for patients. Awareness of nurses' experience from their point of view provides an understanding of the relationship effectiveness that they display with psychiatric patients. Moreover, information from nurses may verify whether or not they implement therapeutic relationships and factors that may inhibit performing this nursing competency.

Article 1:

Moreno-Poyato and Rodriguez-Noguei (2020) examined whether the practice of displaying empathy to patients played an influence on the nurse-patient relationship that is necessary for nursing competencies. The researchers noticed that there are four main components of empathy: perspective-taking, fantasy, empathetic concern, and personal distress. Both researchers found a stronger bond when nurses acknowledged patients' feelings and recognized patients as people. To employ effective empathy, nurses must generate mutual trust and acceptance of the relationship. Another important finding was that having empathetic concerns inclines one to help others which is significant based on the interpersonal relations theory (Hagerty et al., 2017). However, nurses' personal distress can greatly affect the relationship when working with patients toward their goals especially when patients are admitted non-voluntarily. As a result, nurses may become emotionally distant to avoid conflict (Moreno-Poyato et al., 2020).

Strengths of the study include the amount of participating nurses with a total of 198 nurses from 18 mental health units. Identifying different dimensions of empathy will influence future studies to further investigate the quality of therapeutic relationships. During the orientation phase with the patient, the study proved that understanding the patients' perspectives can enhance the bond toward creating goals. During the working phase, it was found that by displaying empathetic concern and having less personal distress, nurses can further improve goal creation consequently establishing shared decision-making. The study found several limitations where the design of using cross-sectional did not investigate nurses' perspectives for a longer period of time nor influential inferences. Another limitation that may have affected the study is how empathy was studied as a general measure solely from the nurses' perspective without the patients' viewpoint (Moreno-Poyato et al., 2020).

Article 2:

The next study in the category of nursing perspective was conducted in Taiwan universities in the nursing department (Lin Y.Y., Lin M.L., Yen, Hou & Liao, 2022). Compared to the previous study, nurses explored various strategies instead of focusing solely on empathy to improve medication adherence for schizophrenic patients. Major findings include the nurses' practice of having conversational interaction, evaluating non-adherence to medication, grasping the mental health conditions and adjusting to patients' thoughts of medication, incorporating feedback, and creating supportive environments. Some interventions that enabled the nurses to implement these findings were to express care nonverbally, assess patients' beliefs about taking medications and confirm side effects. Nurses also invited family members to aid patients with their medication regimen while also discussing the burden that their loved ones may feel as well

as stating positive affirmations, peer interactions, and encouraging them to express concerns about their prescribed medications (Lin et al., 2022).

In-depth interviews using seminars and problem-based learning were identified to be a strength of the study. The study design enabled staff to have valuable experiences of sharing their personal interactions as they were asked to provide in-depth descriptions. The researchers regularly met with participants to ensure consistent and reliable data for the result. However, as a consequence, involving the nurses solely in the interviews may extract subjective interpretations leaving out other standpoints that can provide meaningful value to the study (Lin et al., 2022).

Discussion of Category 2:

The studies involved in this category of nurses' experiences implicated the use of responsive nursing care, nursing visibility, interpersonal competence, seminars, and problem-based learning on increasing medication adherence and were identified to be beneficial and pivotal in enhancing nurse-patient relationships. Although other studies have proved that the therapeutic relationship in mental health is relevant, there is a gap that determines nurse-sensitive patient outcomes towards the patient, nurse, and the problem requiring solutions. Another gap considers the economic statuses of patients to further determine influences that affect their medication adherence. The current study will involve participants between the ages of 18 to 65 years old from different ethnicities to have a variety of respondents, have cultural sensitivity and a deeper analysis of the results. To further enhance the quality of the outcome, nurses will interact more with patients who have longer hospital stays instead of short inpatient stays to allow proper therapeutic engagement.

Category 3: Other Factors Affecting Medication Adherence

The last category of articles explores other factors relating to medication nonadherence of psychiatric patients. There are other influences that may inhibit patients to follow prescription orders or nurses to display appropriate therapeutic relationships. As a result, relapse and hospitalization may occur as a constant loop which results in obstacles for many healthcare workers to overcome and patients most especially. As part of the nurse-patient relationship, it is critical to recognize behaviors and influences that are affecting clients' ability to follow their health goals including medication.

Article 1:

A study organized by researchers (Tessier et al., 2017) in multiple French universities wanted to explore whether traumatic experiences from previous psychiatric hospitalizations, personal insights, and therapeutic alliance influenced medication adherence. Major findings discovered that better adherence was largely influenced by having more insight and therapeutic alliance with less perceived trauma. Therapeutic alliance was defined as providing patient centered-care in order to achieve health-related goals and implementing this competency moderated psychotic symptoms when taking medications. During the study, more than half of the patients reported experiencing traumatic healthcare treatments including involuntary drug administration which resulted in spending less time accessing treatments using medications or mental health services. Surprisingly, patients who had higher insight believed that forced interventions were justified especially for those who had been mechanically restrained (Tessier et al., 2017).

Strengths of the study revealed that the current results signify the importance of displaying therapeutic alliance and insight for patients to adhere to medications. More specifically, insight was measured using a 3 point-Likert scale from 0 to 2 which was considered

to be reliable, especially for patients who have acute or chronic psychotic symptoms. The impact of the research warrants healthcare professionals' sensitivity when patients are expressing traumatic experiences, allowing shared decision-making, and displaying more therapeutic relationships when treating mentally ill patients such as schizophrenia. The weakness observed in this study was the small sample size ($n=72$) where the researchers recommended having a larger sample group. Another weakness was that perceived trauma was considered retrospectively and the therapeutic relationship may have been an ongoing relationship with their providers. Also, the questionnaires used regarding traumatic experiences were personally created by the researchers. Evaluation of patient insight was studied using the Birchwood Insight Scale (BIS) which was a short, but reliable measurement through a multidimensional concept of clinical symptoms and acceptance of drug treatments limiting the patient's subjective viewpoints beyond their condition (Tessier et al., 2017).

Article 2:

The last study was conducted by Harris and Panozzo (2019) where they focused on determining factors that affect therapeutic relationships for psychiatric nurses with the intent of working with patients toward health-related goals. The researchers examined 15 studies from multiple countries using several databases such as PubMed, ProQuest, and EBSCO. Important findings of their literature reviews revealed that patients' severity of illness, and demands of nurses' working environments whether it involves tasks or time constraints can damage the opportunity to engage in therapeutic relationships. However, a simple act of self-repair which is an alteration of communication in response to the needs of others resulted in increased quality of relationships leading to better compliance with medication (Harris et al., 2019).

The researchers recognized the usage of literature reviews as a strength in the study because this method carefully examines the functions, experiences, and obstacles of partaking in therapeutic relationships in the psychiatric setting. Limitations that were discussed include inadequate research involving nurses as the study mostly involved clinicians. There was also a variety of study designs, study methods, and clinical settings which may have affected the rating of relationships and neglected cultural influences of the results, respectively. Lastly, the population of interest did not fully include patients diagnosed with schizophrenia, schizoaffective disorder, and psychosis as only 50% of the participants met the sample criteria (Harris et al., 2019).

Discussion of Category 3:

Studies that were discussed in this last category have implications that nurses, nurse educators, and even students can use perceptions, prioritization, perceived trauma, and increasing insight to guide their assessments and interactions with patients. The studies also strongly suggest for healthcare professionals to become sensitive to patients' perceptions of health-related needs and traumatic experiences. The present study will focus on finding creative ways to interact with patients such as providing increased time, being reflective of actions before engaging with patients, and prioritizing rapport to maintain an appropriate and sufficient therapeutic relationship.

Overall Discussion of Literature Review

To summarize the findings, it is important to first note that there is a significant correlation between medication adherence and NPR (Kalimashe et. al., 2021). Nursing presence partially affected medication adherence while some patients recognized decreased this type of service. Factors affecting medication nonadherence include lack of education and support from medical professionals or family (Lin et al., 2022). However, there are also factors that serve as

motivation to continue adhering to medication such as daily life activities and social relations. The studies found that effective ways to employ empathy can further enhance NPR by addressing patients' shared feelings and recognizing them as humans, not their diagnoses (Moreno-Poyato et al., 2020). Additional characteristics of effective interaction are allowing positive attitudes toward medications, personal insights, therapeutic alliance, and decreased perceived trauma (Tessier et al., 2017).

Overall Strengths and Limitations:

Recognized strengths of the studies include the usage of relevant databases such as PsychINFO, PubMed, and CINAHL which are reliable with high-quality resources of journals (Salzmann-Erikson et al., 2018). Some of the studies had sufficient sample sizes from multiple psychiatric settings while other studies involved small sample sizes (Moreno-Poyato et al., 2020; Tessier et al., 2017). Additionally, using seminars and problem-based learning allowed thorough investigation of nurses' interaction with their patients (Lin et al., 2022). Utilizing scoring tools such as the Birchwood Insight Scale (BIS), MARS, a 3-point Likert scale was reliable and uncomplicated for patients with acute or chronic symptoms (Tessier et al., 2017; Kalimashe et al., 2021). Furthermore, some of the questionnaires used by the researchers were created during their study which may lack value in the results (Tessier et al., 2017). Limitations that were discovered for the studies were subjective reports of patients and nurses which may not be used to generalize results for the entire population of psychiatry (Lin et al., 2022; Moreno-Poyato et al., 2020; Tessier et al., 2017; Kalimashe et al., 2021; Harris et al., 2019). Lastly, the timing of the study with a shorter duration of nurse-patient interaction or observation from one shift may lack generalizability (Moreno-Poyato et al., 2020).

Evidence Worthy of Guiding Practice:

The findings from this literature review provide proper guidance and continued learning for nurses to implement in their work field, especially for patients with mental illness.

Perceptions from other nurses and patients can guide assessments that influence nonadherence to medications and effective therapeutic relationships.

Gaps Identified in the Current Research:

Gaps that were identified from the literature review are evidence of time spent with patients, age range, cultural groups, and economic factors which can affect access to healthcare management including medications and assistance from healthcare professionals.

Proposal for Further Study

After reviewing various literature studies, the overall research question asks “How does spending more time building trustworthiness and empathy with MIP positively affect their medication adherence and overall healthcare outcome?”

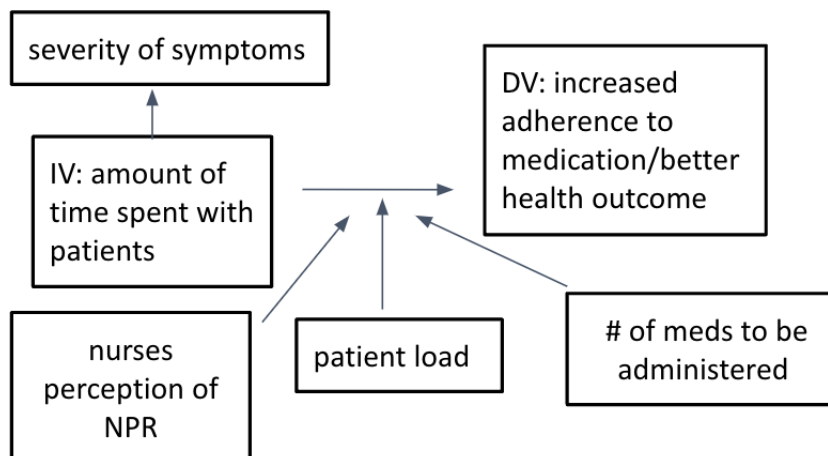
The current study relates to the literature review by implementing previous characteristics of therapeutic relationships, however, there was no actual evidence of interaction duration between patients and nurses. Moreover, there is little to no research about nurses spending more time with patients in their respective rooms. Despite time constraints in the bedside setting, it is important to remember that patient-centered care requires understanding concerns and possible causes of noncompliance to medication or other health-related goals. Consequently, it will help everyone in the healthcare team to have better decisions and results. Participants involved in the current research will also involve patients who are diagnosed with mental illness with the consideration of psychiatric comorbidity. Other factors influencing factors such as personal

lifestyle, family relationships, education, economic status, and age will also be explored to further investigate nonadherence to medication regardless of interventions presented by nurses.

Theoretical Framework

In helping to build knowledge effectively during the interpretation of results, the structure of the study will be based on a theoretical framework by Hildegard Peplau's Interpersonal Relation theory (Hagerty et al., 2017). Peplau's theory has 3 phases: orientation, working, and termination where the focus of the current study will focus on the first two phases. As defined, orientation is the first contact with patients where careful attention, listening, and asking are the sole focus of the relationship. Peplau noted that this period of time is where "the nurse's behavior signals a pattern of receptivity and interest in the patient's concerns or fails in this regard" (Hagerty et al., 2017). During the working phase, patients are more familiar with and accepting of the nurses' role where they recognize them as health educators, resources, counselors, and care providers. It is during this phase that "non-directive listening" should be implemented correctly to increase patients' knowledge about their health situation and its changes. Having a reflective and non-judgemental interpretation of patients' communication can further facilitate clarification of their own thoughts. In addition to the content of the conversation, subtle acts of smiling and making eye contact can have a remarkable effect between a nurse and patient's interaction. The scope of nursing practice is multifaceted and comprehensive, however, small gestures can have a lasting impact on patients.

Conceptual Framework



The primary research aim of the current study is to explore strategies that nurses can implement for MIPs during hospitalization. The quality of hospital care received by patients influences their own health decision-making or goals regarding medication adherence and overall well-being. The goal of the interventions is to examine whether increased interaction with patients in the psychiatric unit promoting NPR has a critical impact on patients' health outcomes.

Ethical Considerations

Before involving data collection, the proposed study will be submitted to the Institutional Review Board (IRB) for approval. Before conducting the study, the research team will gain approval for participation from administrative committees of multiple psychiatric hospitals around Marin County. All nurses and patients will be provided with consent forms to sign on their understanding of the study process and acknowledgment of audio recording during interviews or focus groups. Any questions or concerns from the participants will be addressed with the opportunity to opt-in or out of the study at any given time. All participants' identifiable information will be kept confidential without being disclosed outside of the study. There is no potential for physical or social harm, however, patients will be informed about the sensitive

nature of the interview or focus groups and will be kept confidential. All collected data will be stored using a password-protected laptop and any document on paper will be organized using a folder and locked in a drawer file cabinet.

Study Method

The research design will be a qualitative experiment using focus groups and in-depth interviews to analyze results. Control groups will involve nurses spending more time with patients building NPR and therapeutic communication by actively listening, asking about patients' understanding of their diagnosis and concept of medications including side effects. The other group will have regular interaction with nurses that is similar to their day-to-day regimen. One of the main goals of the relationship is to allow patients to address any concerns and health goals with feedback that is responsive to their needs. All aspects of nursing competency will remain the same, however, the only difference between groups is the time duration. Spending more time with patients may or may extract more information that can help to mitigate nonadherence to medication and increase patients' health decision-making. To measure the effects of NPR and the therapeutic relationship displayed by nurses, the following open-ended questions will be asked during interviews and focus groups:

- How did your nurse introduce themselves?
- What characteristics of your nurse did you feel supported and guided?
- What concerns or questions did they address related to your medication adherence or health goals?
- What feedback did your nurse provide after sharing your concerns or questions?
- Do you feel like your nurse listened to/responded to your needs? If so, how?
- What becomes easier and what becomes more difficult with medication?
- In what ways do you think the medication affects you?

The questions were developed and adapted using the presence of nursing scale (PONS) (Kalimashe et. al, 2021). To test the validity and reliability of these questions, they will be pre-tested with participants and statistically analyzed using statistical programs such as SPSS. By asking a series of related questions covering different aspects of therapeutic communication, responses can be combined to find themes.

The study's population will consist of patients diagnosed with any mental disorders not limited to schizophrenia, bipolar disorder, PTSD, OCD, anxiety and depression. All involved participants will be recruited from multiple psychiatric hospitals around Marin County. With qualitative study, a specific sample size cannot be determined due to the collection of data through interviews and focus groups. However, the goal of the study is to have at least 30 patient participants (n=30) depending on the nurses' patient loads during their respective shifts. Participants' age will range between 18 to 65 years old and diagnosed with at least one psychiatric disorder and any other comorbid conditions.

Recruitment Strategy

The recruitment process will first involve nurses' participation by attending a shift exchange meeting in the morning and requesting their involvement. Consent for recruitment will be obtained from the charged nurse or nursing manager in the unit before shift exchange. Nurses who agree to participate will be briefed on the purpose and process of the study followed by the distribution of consent forms. The research team will visit patients in their respective rooms that are under the care of participating nurses to distribute consent forms. Results will be gathered through interviews or focus groups depending on whether the rooms are shared or private. The time of questioning will be highly considered depending on whether the participants are physically or emotionally present to provide answers. It is expected that participants will be

questioned at the end of the shift when nurses have minimal interaction with the patients or while attending shift exchange meetings.

Content Analysis

After gathering all responses from the participants, the data will be organized and generated for theme analysis. To do so, all the interview answers from each of the 5 questions will be inputted into a spreadsheet to reveal patterns in communication content. For example in the first question “How did your nurse introduce themselves?”, corresponding answers may include “smiled” “made eye contact” “knocked on the door” or “said my name”. At least 2 nurses will independently review participants’ responses and compose themes for each category including medication adherence and nursing presence. The general trend and pattern of responses will be used to draw conclusions and generalizations of strategies that nurses implemented during their shifts. Based on the extraction and organization of results, an answer to the research question will be available as well as potential challenges for future analysis.

Conclusion

Following the proposed study, it is anticipated that more information to increase medication adherence for patients in the mental health system will be more available. Based on the efficacy of other research, the results of the current study should confirm that having increased interaction with patients by nurses promotes better medication adherence and overall health outcomes. There are diverse reasons impeding healthcare compliance, however, nurses need to consider patients’ situations individually which is why having increased nurse-patient interaction is a noteworthy factor to reveal more information

Demonstration of correct therapeutic communication and effective NPR can guide nurses to prioritize the importance of patient interaction. The moment nurses walk-in patients’ rooms

there is a profound effect that can determine the relationship. An introduction is also the starting point for effective NPR whether trust can be built throughout care. Knocking on the door, facing patients at eye level, and focusing on the patient without distraction are points of cooperation that maintain professionalism. Employing “non-directive listening” and allowing space to share concerns are all steps in considering the best outcomes for patients. When nurses can adjust their behaviors that fit their patients' attitudes, it promotes a non-judgemental environment and responsiveness to their needs. Patients will feel and know that someone really cares for them.

As a general understanding, nurses and other healthcare professionals may assume that patients may stop taking medications due to the negative side effects of memory loss or decreased libido. However, some patients have reported that these side effects are not always unpleasant (Salzmann-Erikson & Sjödin, 2018). For this reason, nurses should remain open-minded and explore patients' motivations for their healthcare decisions. The value of interpersonal relationships is so crucial that it may be overlooked due to pressures and time constraints within the working environment. Protecting and employing therapeutic relationships as much as possible is essential to keep patients involved in their care to emphasize patient-centered care. The hospital environment can create pressures for patients and cooperation is much warranted, but they also need to maintain a sense of autonomy.

Further research should be conducted to explore nurses' tacit knowledge of therapeutic communication and other core nursing competencies such as judgment, values, or attitudes. In the current study, any nurses who are willing to participate regardless of experience will be included. However, it will be meaningful to also discover whether years of work experience have a strong correlation to nurses' attitudes towards MIP. Other comorbidities not related to mental

health issues should also be explored as symptoms unrelated to medication side effects or psychiatric symptoms can further exacerbate medication nonadherence.

References:

- Antonio R. Moreno-Poyato, & Óscar Rodríguez-Nogueira. (2020). The association between empathy and the nurse–patient therapeutic relationship in mental health units: a cross-sectional study. <https://doi.org/10.1111/jpm.12895>
- Hagerty, T. A., Samuels, W., Norcini-Pala, A., & Gigliotti, E. (2017). Peplau's Theory of Interpersonal Relations: An Alternate Factor Structure for Patient Experience Data?. *Nursing science quarterly*, 30(2), 160–167. <https://doi.org/10.1177/0894318417693286>
- Harris, B., & Panozzo, G. (2019). Therapeutic alliance, relationship building, and communication strategies-for the schizophrenia population: An integrative review.33 <https://doi.org/10.1016/j.apnu.2018.08.003>
- Kalimashe, L., & du Plessis, E. (2021). Mental healthcare users' self-reported medication adherence and their perception of the nursing presence of registered nurses in primary healthcare. *Health SA Gesondheid (Online)*, 26, 1-9
- Kalimashe, L. (2020). The relationship between mental healthcare users' medication adherence and the nursing presence of registered nurses in primary healthcare (Doctoral dissertation, North-West University (South-Africa)).
- Mayo Foundation for Medical Education and Research. (2020, January 7). *Schizophrenia*. Mayo Clinic. Retrieved from <https://www.mayoclinic.org/diseases-conditions/schizophrenia/symptoms-causes/syc-20354443>
- Mayo Foundation for Medical Education and Research. (2022, October 14). *Depression (major depressive disorder)*. Mayo Clinic. Retrieved from <https://www.mayoclinic.org/diseases-conditions/depression/symptoms-causes/syc-20356007>
- Rahmani, N., Mohammadi, E. & Fallahi-Khoshknab, M. Nurses' experiences of the causes of

their lack of interest in working in psychiatric wards: a qualitative study. *BMC Nurs* 20, 246 (2021). <https://doi.org/10.1186/s12912-021-00766-1>

Salzmann-Erikson, M., & Sjödin, M. (2018). A narrative meta-synthesis of how people with schizophrenia experience facilitators and barriers in using antipsychotic medication: Implications for healthcare professionals. *International Journal of Nursing Studies*, 85, 7-18. [10.1016/j.ijnurstu.2018.05.003](https://doi.org/10.1016/j.ijnurstu.2018.05.003)

Tessier, A., Boyer, L., Husky, M., Baylé, F., Llorca, P., & Misdrahi, D. (2017). Medication adherence in schizophrenia: The role of insight, therapeutic alliance and perceived trauma associated with psychiatric care. *Psychiatry Research*, 257, 315-321. [10.1016/j.psychres.2017.07.0](https://doi.org/10.1016/j.psychres.2017.07.0)

Yao-Yu Lin, Wen-Jiuan Yen, Wen-Li Hou, Wei-Chou Liao, & Mei-Ling Lin. *Mental Health Nurses' Tacit Knowledge of Strategies for Improving Medication Adherence for Schizophrenia: A Qualitative Study*. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC89550>

Appendix

Key:

patient's subjective experiences

nurses perceptions

other factors impacting medication adherence

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
Kalimashe, L., & du Plessis, E. (2021). Mental healthcare users' self-reported medication adherence and their perception of the nursing presence of registered nurses in primary healthcare. Health SA Gesondheid (Online), 26, 1-9.	To investigate the relationship between mental healthcare users (MHCUs') self-reported medication adherence and their perception of the nursing presence by registered nurses in PHC	N=180 MHCUs	quantitative, descriptive correlational, cross-sectional design	using Medication Adherence Rating Scale and the Presence of Nursing Scale	<ul style="list-style-type: none"> - Overall adherence level of respondents was partially adherent, with an average score of 6.45 out of a total score of 10 - Respondents also reported a low level of perceived nursing presence demonstrated by registered nurses, with an average score of 72.2 out of 125. 	<ul style="list-style-type: none"> - The research fills a knowledge gap, namely the question of whether there is a relationship between MHCUs' self-reported medication adherence and the perceived nursing presence of RNs. - The findings have the potential to enrich existing knowledge regarding medication adherence (MARS scale) and nursing presence (PONS scale). 	<ul style="list-style-type: none"> - The study depended on self-reporting and will be difficult to generalize the results because of the small sample size and the sampling method. - Population of the study comprised of only participants from an urban area

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
					<ul style="list-style-type: none"> - Positive correlation between respondents' self-reported medication adherence and their perceived nursing presence of registered nurses 		
<p>Salzmann-Erikson, M., & Sjödin, M. (2018). A narrative meta-synthesis of how people with schizophrenia experience and narrate pharmacological treatment with antipsychotic medication. <i>Implications for healthcare professionals. International Journal of Nursing Studies</i>, 85, 7-18. 10.1016/j.ijnurstu.2018.05.003</p>	<p>To describe how people who are diagnosed with schizophrenia experience and narrate pharmacological treatment with antipsychotic medication.</p>	<p>N =156 from 9 articles for interpretative meta-synthesis</p>	<p>Narrative meta-synthesis from quantitative studies</p>	<p>Search was conducted in three databases, PubMed, CINAHL and PsycINFO, to identify qualitative original research</p>	<ul style="list-style-type: none"> - Patients were uninformed about medication but valued talks about medication with professionals - The findings also demonstrated that patients are motivated to take medication in order to gain stability in their life and to be able to participate in life activities and in relationships 	<ul style="list-style-type: none"> - The study methods followed structured approach using 3 major and relevant databases (PubMed, CINAHL and PsycINFO) - The present results do contribute to a more complex view of factors affecting the experience of antipsychotic medication 	<ul style="list-style-type: none"> - Experiences pertaining to the medications themselves are often universal, because there is a limited number of antipsychotic drugs available and they are used in a similar way regardless of the country of care.

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
					- Good support, both from relatives and professionals, also motivates them to continue taking medication. The obstacles were side-effects, pressure and compulsion, and rigid organizations		
Antonio R. Moreno-Poyato, & Óscar Rodríguez-Nogueira. (2020). The association between empathy and the nurse–patient therapeutic relationship in mental health units: a cross-sectional study. https://doi.org/10.1111/jpm.12895	To examine whether the dimensions of empathy influence the nurse–patient therapeutic relationship within mental health units.	N= 198 at 18 mental health units.	cross-sectional design	questionnaires using an online form	Nurses established a greater therapeutic alliance with patients when they were able to adopt their patient's perspective and experience concern.	- The rate of participation among nurses in the participating institutions - The study identified specific relationships between the dimensions of empathy and therapeutic relationships with mental health patients	- Cross-sectional design did not allow detection of changes in nurses' perceptions over time, nor make causal inferences

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
						<p>- The results show that the nurses' perspective regarding the patient's situation improves the bond, and therefore, this skill is especially useful in the orientation phase</p> <p>- During the working phase of the therapeutic relationship, the affective components of empathy are specifically associated with greater empathic concern, together with less personal stress among nurses. This improves the joint establishment of goals with patients and therefore supporting shared decision-making.</p>	<p>- Empathy was evaluated as a general measure, and this was related to the overall perceptions of nurses on therapeutic relationships, which could have differed from those of their patients if these had been specifically measured.</p>

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
						- Findings suggest the need to perform further in-depth studies of the factors that influence a quality therapeutic relationship.	
Yao-Yu Lin, Wen-Jiuan Yen, Wen-Li Hou, Wei-Chou Liao, & Mei-Ling Lin. Mental Health Nurses' Tacit Knowledge of Strategies for Improving Medication Adherence for Schizophrenia: A Qualitative Study. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8955025/	<p>- To explore the strategies employed by mental health nurses (MHNs) to improve medication adherence in clinical practice.</p> <p>- To describe MHNs' knowledge of facilitation strategies in medication administration</p>	n = 25 MHNs over the age of 20 years with at least 1 year of nursing experience	Purposeful sampling	One-on-one interviews	The following were identified as the strategies MHNs used to promote medication among patients with schizophrenia: establishing a conversational relationship, overall assessment of non-adherence to medication, understanding the disease and adjusting the concept of medication, incorporating interpersonal connection feedback, and building supportive resources	<p>- Sample selection was a fair and adequate reflection of the study purpose, which maximizes the potential transferability of the study</p> <p>- The use of seminars and problem-based learning contributed to the rich experience of nurses in medication adherence</p>	- Selection of extracts and analyses inevitably involved subjective interpretation; thus, other interpretations may also exist concurrently.

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
<p>Harris, B., & Panozzo, G. (2019). Therapeutic alliance, relationship building, and communication strategies-for the schizophrenia population: An integrative review.33 https://doi.org/10.1016/j.apnu.2018.08.003</p>	<p>To examine current research findings on factors that influence therapeutic relationships for psychiatric nurses who seek to better use the relationship to work with the client toward health-related goals.</p>	<p>15 studies from multiple databases with samples involving adults aged 18-65 with schizophrenia, schizoaffective disorder or psychosis</p>	<p>integrative review or qualitative and quantitative research</p>	<p>Literature review using PubMed, ProQuest and EBSCO</p>	<ul style="list-style-type: none"> - The severity of client illness and demands of the treatment setting whether task and time demands can negatively impact nurses' ability to participate in the therapeutic relationship. - The simple technique of Self-repair, or adjusting one's responses to better meet the client in the midst of interaction, resulted in significant positive assessments of the quality of relationship - Poorly rated therapeutic relationships may stay poorly rated 	<ul style="list-style-type: none"> - Literature review identify the function of, experiences of, and barriers to therapeutic relationship between nurses and clients with schizophrenia - Findings suggest that providers can grow in their ability to participate in relationships 	<ul style="list-style-type: none"> - Insufficient amount of research by and about nurses in the psychiatric setting - There was also great variation in instruments and methods used to assess ratings of relationships. - Variety of countries and clinical settings were represented in this sample and there was no method to assess or determine cultural influences on findings

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
							- Population of clients within the studies was not composed of 100% schizophrenia or psychosis diagnosis. The study included >50% of the sample had schizophrenia diagnoses, schizoaffective disorder or psychosis

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
<p>Tessier, A., Boyer, L., Husky, M., Baylé, F., Llorca, P., & Misdrahi, D. (2017). Medication adherence in schizophrenia: The role of insight, therapeutic alliance and perceived trauma associated with psychiatric care. <i>Psychiatry Research</i>, 257, 315-321. 10.1016/j.psychres.2017.07.063</p>	<p>- To investigate the complex relationship among insight, therapeutic alliance, perceptions of trauma experiences related to psychiatric treatment and medication adherence in patients with schizophrenia</p>	<p>N= 72 inpatients from 3 psychiatric hospitals</p>	<p>Multicentred cross-sectional study</p>	<p>- Psychopathology were assessed using Positive and Negative Syndrome Scale (PANSS) - Current and lifetime comorbid substance use disorders were determined using the MINI International Neuropsychiatric Interview - Overall functioning was estimated with the Global Assessment of Functioning scale (GAF) - Depressive symptoms were assessed using the Beck Depression Inventory (BDI) & Birchwood Insight Scale (BIS) - Medication Adherence Rating Scale (MARS)</p>	<p>- Greater adherence was correlated with higher insight, higher therapeutic alliance and lower perceived trauma - Medication adherence could be enhanced by reducing perceived trauma and by increasing insight</p>	<p>- The current results confirm the important influence of therapeutic alliance and insight on medication adherence - The present study articulates the need for mental health clinicians to be sensitive to patients' perception of traumatic experiences related to psychiatric treatment and to be aware of the importance of therapeutic relationship in treating patients with schizophrenia. - This study raises</p>	<p>- small sample size - perceived trauma was retrospectively assessed and patients' assessment of the therapeutic relationship may have reflected an ongoing relationship with the clinician during hospitalization - The questionnaire was developed for this study. This assessment of subjective traumatic experiences related to psychiatric care was not based on a validated questionnaire.</p>

Authors/Citation	Purpose/Objective of Study	Sample - Population of interest, sample size	Study Design	Study Methods (e.g. survey, interviews, observation)	Major Finding(s)	Strengths	Limitations
						<p>questions that need further exploration to fully understand the complex relationship between insight, therapeutic relationship, adherence and outcomes</p>	<p>- BIS is a self-report, quick and reliable measure exploring insight in a multidimensional concept which includes the subjective impression of patient facing to clinical symptoms and two items on acceptance to drug treatments that may be related to medication adherence (MARS)</p>