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### RESEARCH ARTICLE

#### LEVEL OF SATISFACTION ON COMMUNICATION AND LEVEL OF ANXIETY AMONG SUSPECT COVID PATIENTS

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#### Abstract

**Background:** The COVID pandemic has created a huge impact on the emotional level of individuals around the globe. When one is suspected to develop or have the infection, the amount of stress individuals go through is enormous. Communication specially by the health care workers when they are hospitalized will bring a positive impact on their coping.

**Objectives:** The objectives of the study were to assess the suspect COVID patient's level of satisfaction on communication, to assess the suspect COVID patient's level of anxiety, to find the relationship between the suspect COVID patient's level of satisfaction on communication and their level of anxiety, to find the association between the suspect COVID patient's level of satisfaction on communication and their demographic variables and to find the association between level of anxiety of suspect COVID patients and their demographic variables.

**Methods:** A correlational study to assess the suspect COVID patient's level of satisfaction on communication and their level of anxiety was carried out in the suspect COVID areas of Christian Medical College. Patients who fulfilled the inclusion criteria were recruited using consecutive sampling technique. Patients were given information on the study and informed consent was obtained. Data was collected by interviewing the patients using a Likert scale on the level of satisfaction on communication and the level of anxiety using Hamilton Anxiety Scale.

**Results:** Data was analyzed using descriptive and inferential statistics (SPSS Version 21). Majority of the subjects were found to be between the age group 41 to 60 years. Also, most of them (64%) were male. And around 60% of them had only schooleducation. It was found that 47% of the subjects were found to have mild anxiety and only 41% were highly satisfied with the level of communication. Also, it was proved that as the level of satisfaction on communication increases, the level of anxiety decreases ( $r=-0.5$  at  $p=0.01$ ). There was also significant association found with education and level of satisfaction on communication ( $p=0.028$ ) and education and level of anxiety ( $p=0.017$ ).

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**Conclusion:** The findings of this study reveal that we need to develop right communication models in times of pandemics and strategize coping measures that will help individuals going through such crisis.

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### **Introduction:-**

The coronavirus disease 2019 (COVID-19) pandemic has been very stressful for people. Fear and anxiety about a new disease and what could happen be overwhelming and can cause strong emotions in adults and children (coping with stress, CDC, <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>). Appropriate and adequate communication can ease the patient's and their family member's anxiety.

Working with patients diagnosed with COVID 19, suspect COVID patients, their contacts and families has helped understand that as health care workers; most often we are worried only about the physiological wellbeing, the spread of infection to us and the other patients. We forget to address the emotional trauma the family and the individuals go through. Anxiety kills them during these days.

Patients and families are physically separated. The world is talking of technology as a boon during these days but in a developing country like India, everybody cannot afford neither everybody is well versed with this modern technology. Especially patients and families coming from low socio-economic backgrounds struggle a lot.

A lot of studies have been undertaken on patients infected with COVID. Not many studies have been done among suspect COVID patients. Suspect COVID patients are those with Influenza Like Illness (ILI) who get admitted for covid testing. During the first wave of the pandemic, it was a new situation to everyone, and everything was in chaos. So, these patients who were suspected to have COVID also went through the ordeals any COVID patient went through. The stigma around the world made life even more worser.

Williams and colleagues in a study that reviewed various studies have reported that when doctors provide adequate information, patients are more likely to be satisfied<sup>2</sup>.

All their anxieties and worries can be eased by honest and timely communication by nurses and the other health care workers. Along with creating awareness and training health care workers on the disease, its spread and prevention, one should also be taught on the effective communication that will help the patients and families cope better. Good communication is definitely a healer!

### **Materials and Methods:-**

A correlational study to assess the suspect COVID patient's level of satisfaction on communication and their level of anxiety was carried out in the suspect COVID areas of Christian Medical College. Patients who fulfilled the inclusion criteria were recruited using consecutive sampling technique. Patients were given information on the study and informed consent was obtained. A sample size of 100 was calculated based on the pilot study and the same were recruited for the study.

The objectives were to assess the suspect COVID patient's level of satisfaction on communication and level of anxiety, to find the relationship between the suspect COVID patient's level of satisfaction on communication and their level of anxiety and to find the association of the suspect COVID patient's level of satisfaction on communication and level of anxiety with their demographic variables.

Data was collected in the suspect COVID areas of Christian Medical College, Vellore, Tamilnadu, India. Patients who gave consent and who spoke English, Tamil, Hindi, and Malayalam were included in the study. Patients who were critically ill, children less than 15 years, postnatal mothers and antenatal mothers were excluded from the study. The level of satisfaction on communication given during their hospitalization were measured using a 5-point Likert scale. This scale was developed by the investigator. It had ten items which assessed satisfaction on the basic information on admission, facilities, the covid testing procedure and the further treatment plans. The total scores were summed up and converted into percentages and categorized into highly satisfied (>80%), moderately satisfied (51 to 80%) and dissatisfied (<50%). The internal consistency of the tool was assessed using Cronbach's Alpha and

was found to be 0.91. The level of anxiety experienced by the suspect COVID patients after hospitalization was measured by Hamilton Anxiety Rating Scale (HARS), which is a free standardized tool with proved sufficient reliability and concurrent validity. HARS consists of 14 items which measures both psychic anxiety (mental agitation and psychological distress) and somatic anxiety (physical complaints related to anxiety). Each item is scored on a scale of 0 (not present) to 4 (severe), with a total score range of 0–56. It has sensitivity of 85.7% and specificity of 63.5% and has good reliability and validity. The score interpretation is as follows: <17-mild, 18–24-moderate and >25-severe anxiety<sup>3,4</sup>. Data was analyzed using descriptive and inferential statistics (SPSS Version 21).

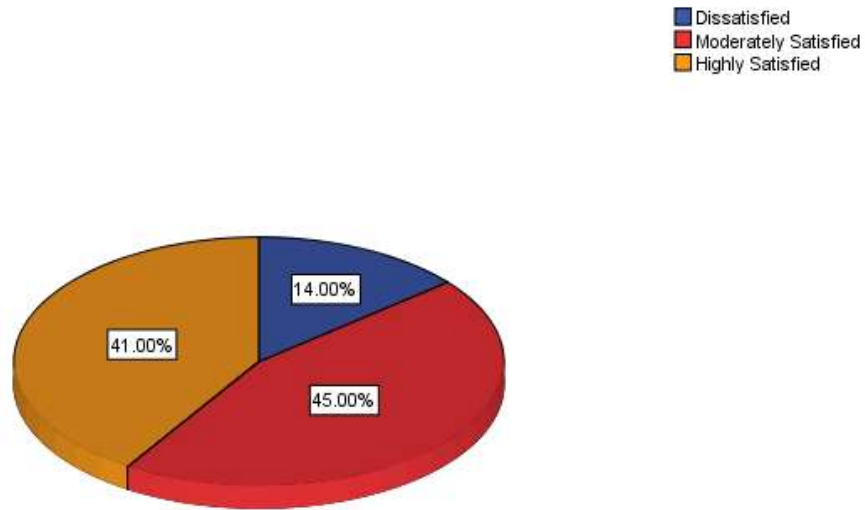
## Results:-

**Table 1:-** Distribution of patients based on demographic variables.

S No	Demographic Variable	Frequency (n)	Percentage (%)
1	<b>Age</b>		
	16 to 26	2	2.0
	21 to 40	22	22.0
	41 to 60	44	44.0
	Above 60	32	32.0
2	<b>Gender</b>		
	Male	64	64.0
	Female	36	36.0
3	<b>Education</b>		
	Illiterate	14	14.0
	School Education	60	60.0
	Graduate	18	18.0
	Postgraduate	8	8.0
4	<b>Occupation</b>		
	Unemployed	19	19.0
	Laborer	34	34.0
	Professionals	18	18.0
	Any other	29	29.0
5	<b>Family Income</b>		
	Less than 5000	13	13.0
	5001 to 10000	43	43.0
	10001 to 15000	13	13.0
	More than 15000	31	31.0
6	<b>Residence</b>		
	Urban	59	59.0
	Rural	41	41.0
7	<b>Comorbidities</b>		
	None	23	23.0
	DM	24	24.0
	HTN	10	10.0
	CVD	6	6.0
	CKD	1	1.0
	DM + HTN	22	22.0
	Bronchial Asthma	5	5.0
	Others	9	9.0

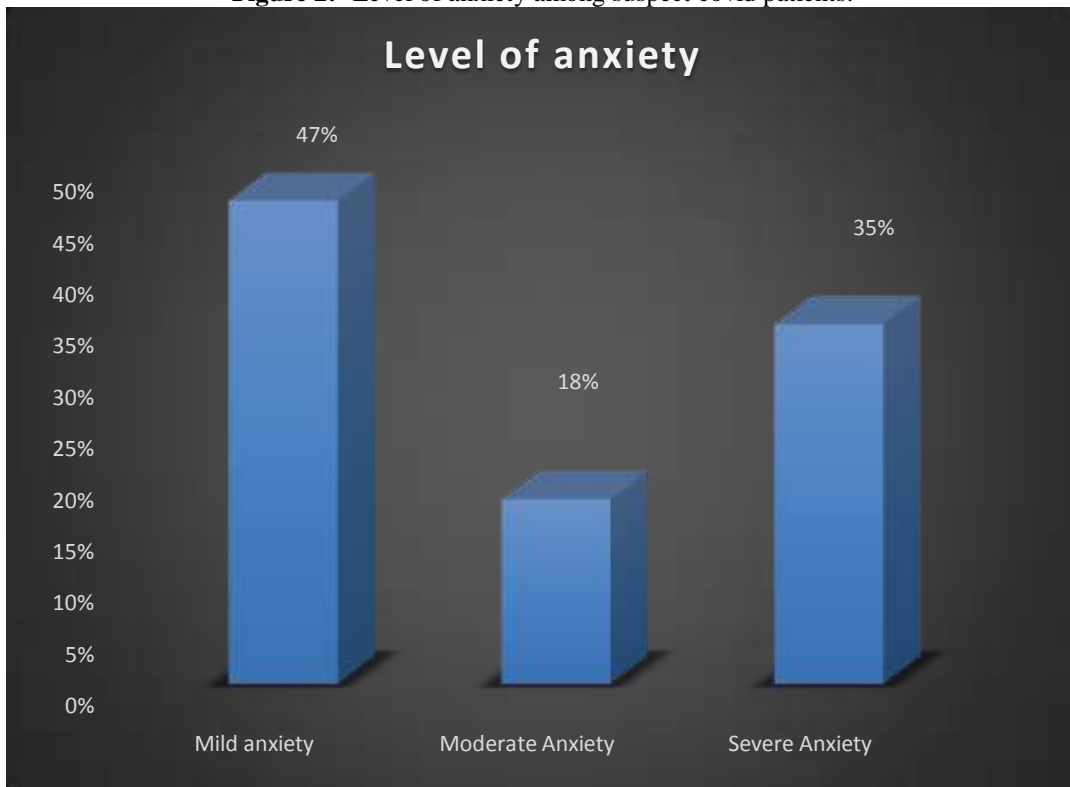
The above table reveals that majority (44%) of the study subjects were between the age group 41 to 60 years. Also, most of them (64%) were male. And around 60% of them had only school education.

**Figure 1:-** Level of satisfaction on communication among suspect covid patients.



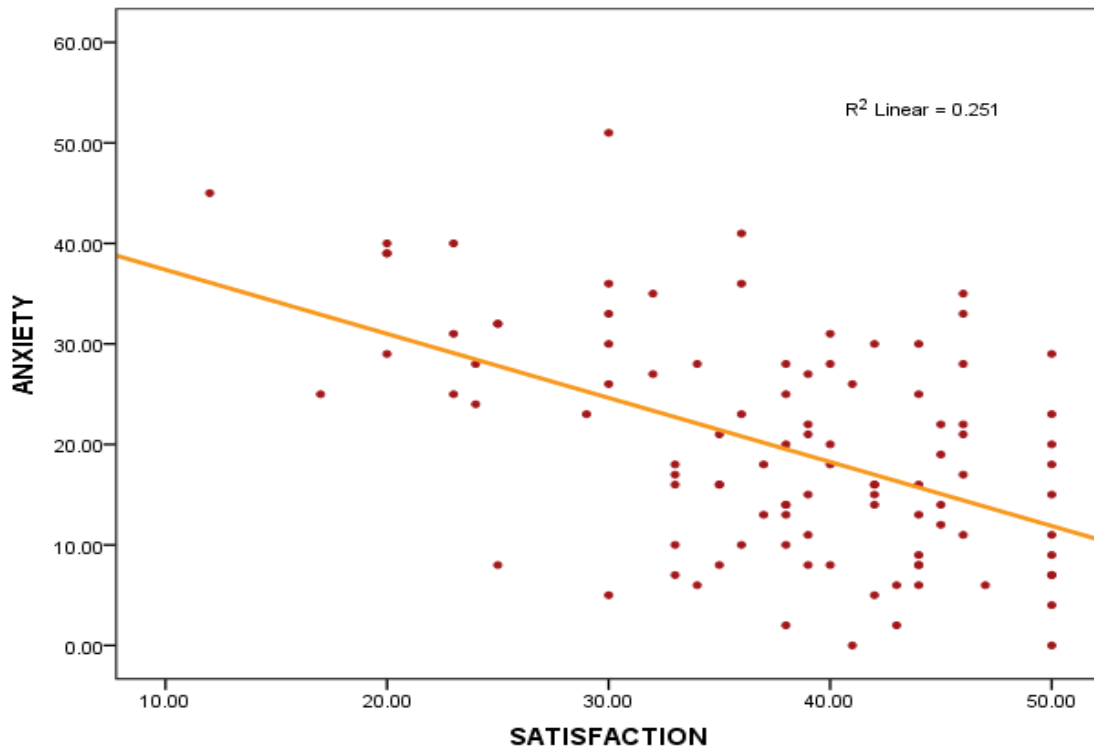
The above figure reveals that less than half of the subjects (41%) studied only had higher level of satisfaction on communication.

**Figure 2:-** Level of anxiety among suspect covid patients.



The above figure reveals that majority of the subjects (47%) had at least mild anxiety.

**Figure 3:-** Relationship between level of anxiety and level of satisfaction on communication among suspect covid patients.



The above figure reveals that there is a negative correlation between level of satisfaction and level of anxiety with a Pearson's correlation coefficient of 0.501\*\*

\*\* p = 0.01

### **Discussion: -**

Majority of the subjects were found to be between the age group 41 to 60 years. Also, most of them (64%) were male. This was seen during the first wave of the pandemic in the country. There were changing trends in the age groups in the second wave but even during the second wave most affected were men.

Around 60% of them had only school education. And around 34% were only laborers who got daily wages and around half of the subjects (43%) had an annual income ranging between Rs 5000 to 10,000/-. This highlights that majority of the study subjects were not highly educated and were from a poor socio-economic background. Probably their economic stand might also have caused a lot of stress during the pandemic because of lockdown and unavailability of resources.

### **Suspect COVID patient's level of satisfaction on communication**

Only 41% were highly satisfied with the level of communication. Most of the subjects studied were not highly satisfied which might be because of their level of education or their social status. This also cites the importance of providing basic information to all the patients who get admitted in the hospitals. Specially during the times like this pandemic, nurses and health care team members should take extra efforts to provide honest and timely communication.

During this pandemic, most subjects were isolated from their families too. Good communication will foster therapeutic relationship, reassure and ease out most of their stress and anxiety.

### **Suspect COVID patient's level of anxiety**

It was found that 47% of the subjects were found to have mild anxiety, 18% with moderate anxiety and 35% with severe anxiety.

There were a larger group of subjects who were having severe anxiety that was serious. Any disease or illness diagnosis may provoke anxiety in an individual. But severe anxiety is not good for any individual. During the first wave of the pandemic, many people around the world were going through anxiety and depression because of lack of awareness, poor communication, and rumors.

It was found that there was a general fear and anxiety that existed among the public about the spread of the novel corona virus. But no study talks about the magnitude of the stress and anxiety an individual undergoes waiting for the diagnosis of a deadly disease.

Expecting the diagnosis of a deadly viral infection and added anxiety might prove fatal.

**Relationship between the suspect COVID patient’s level of satisfaction on communication and their level of anxiety**

The major objective of the study was to understand the impact of the level of satisfaction on communication given by the health care team members on the level of anxiety. It was found that there was a negative correlation ( $r=-0.5$  at  $p=0.01$ ). It means as the level of satisfaction on communication increases, the level of anxiety decreases.

The CDC guidelines to cope with stress during the pandemic talks about being informed and being connected with others (<https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>) In a country like India, where everyone is not educated and does not have the social standards, the technology needed and specially a pandemic situation like this warrants effective and appropriate communication from the health care team members.

The findings are supported by a study which assessed the impact of Peplau's therapeutic communication model on Anxiety and Depression in patients candidate for Coronary Artery Bypass. Therapeutic communication was recommended as a simple, cost effective and efficient method in reducing anxiety and depression of the patients<sup>6</sup>.

Health care team members, importantly nurses who are the closest to the patients need to come with up with appropriate communication models to cater to the mental wellbeing of patients. Appropriate communication to the subjects and their families with systematic information guidelines would solve a lot of their concerns.

Communication stations where the patients and the families could contact and pass on information on either side would benefit the anxious patients and their families. In situations like this pandemic, in the hospitals and the wards, it warrants for communication stations where specially trained health care team members who are patient, well informed and knowledgeable need to be present round the clock to address the concerns of the patients and also provide regular systematized basic information to all the subjects getting admitted should be there. They should also be willing to liaise between the other health care team members. Not all patients and the relatives might be well versed with technology, hence health care team members should make communication happen between the parties that would ease down the bottled-up stress and anxiety.

**Association of the suspect COVID patient’s level of satisfaction on communication and level of anxiety with their demographic variables.**

There was significant association found with education and level of satisfaction ( $p=0.028$ ), and education and level of anxiety ( $p=0.017$ ). It infers that education plays an important role in the way subjects perceive things, that in turn might reduce a lot of anxiety that might be unnecessary. The better the educational status, the better the level of satisfaction and the level of anxiety.

**Conclusion:-**

The study reveals that there is a significant impact in the level of anxiety, the way communication happens. Specially situations like the COVID pandemic puts the individual into a lot of stress and anxiety. In a developing country like India, with added factors like poor socio-economic background, illiteracy, societal norms, lack of technical facilities and lack of awareness puts people through tough experiences that affects the mental wellbeing.

It recommends development of communication models and communication stations in the hospitals for patients and families during the pandemics. It also highlights the importance of right communication for the right mental well being of individuals waiting for any disease diagnosis.

**Ethical consideration:**

Informed consent, IRB approval and no conflicts of interest

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