# INTERPERSONAL COMMUNICATION OF NURSE MANAGERS AND ITS INFLUENCE ON NURSES' PERFORMANCE IN PRIVATE HOSPITALS IN NAIROBI, KENYA: A CASE STUDY OF MP SHAH HOSPITAL

**PAULYNE VINAYWA SEKAH**

**MACSNRB717018**

**A THESIS SUBMITTED TO THE DEPARTMENT OF COMMUNICATION STUDIES IN PARTIAL FULFILMENT OF THE REQUIREMENT FOR THE AWARD OF THE MASTERS DEGREE IN COMMUNICATION AT ST. PAUL'S UNIVERSITY**

**AUGUST 2019**

## DECLARATION

**Declaration by the Candidate**

I declare that this thesis is my original work and to the best of my knowledge has never been presented for a masters' degree award in any other university.

…… ……

Paulyne Vinaywa Sekah Date

MACSNRB717018

**Declaration by Supervisors**

This Thesis has been submitted for examination with our approval as University Supervisors.

This Thesis has been submitted for examination with our approval as University Supervisors.

…… ……

**Dr. Winnie Ndeta** Date

St. Paul's University

…… ……

**Dr. John Ndavula** Date

St. Paul's University

## DEDICATION

This work is dedicated to my mother for her support throughout my studies.

## ACKNOWLEDGEMENT

Special thanks to the Almighty God for His sufficient grace and mercies throughout this process. I wish to express my sincere appreciation to my supervisors Dr. John Ndavula and Dr. Winnie Ndeta for their valuable guidance, patience and devotion from the start all through to the finalization of this thesis. Their competence, knowledge and expertise in scientific research have really enriched my work. Their readiness, availability, commitment and valuable contribution towards this work have always been amazing.

Lastly, I thank my classmate at St. Paul's University, Agnes Mugeni and my friends for their support, encouragements, advice, contributions and a favorable conducive atmosphere for learning.

May God bless you abundantly.

## TABLE OF CONTENTS

**DECLARATION** ..... **i**
**DEDICATION** ..... **ii**
**ACKNOWLEDGEMENT** ..... **iii**
**TABLE OF CONTENTS** ..... **iv**
**LIST OF TABLES** ..... **vii**
**LIST OF FIGURES** ..... **viii**
**DEFINITION OF TERMS** ..... **ix**
**ABSTRACT** ..... **x**
**CHAPTER ONE** ..... **1**
**INTRODUCTION** ..... **1**
1.1 Background of the study ..... 1
1.2 Problem Statement ..... 6
1.3 Objectives of the study ..... 7
1.4 Research Questions ..... 9
1.5 Justification of the study ..... 9
1.6 Significance of the study ..... 10
1.7 Scope of the Study ..... 10
1.8 Limitations of the Study ..... 11
**CHAPTER TWO** ..... **12**
**LITERATURE REVIEW** ..... **12**
2.1 Introduction ..... 12
2.1.1 Interpersonal Communication in Healthcare ..... 12
2.2 Theoretical Framework ..... 14
2.3 Conceptual Framework ..... 19
2.4 Review of Variables ..... 20
2.6 Research Gaps ..... 30
2.7 Summary ..... 31
**CHAPTER THREE** ..... **32**
**RESEARCH METHODOLOGY** ..... **32**
3.1 Introduction ..... 32

3.2 Research Design ..... 32
3.3 Research Population ..... 33
3.4 Sample Frame ..... 33
3.5 Sampling Techniques ..... 33
3.6 Research Instruments ..... 35
3.7 Reliability and Validity of the Research Instruments ..... 36
3.8 Data Collection Procedure ..... 36
3.9 Data Analysis ..... 37
3.10 Ethical Issues ..... 37
3.11 Conclusion ..... 38
**CHAPTER FOUR ..... 39**
**DATA ANALYSIS, PRESENTATION, INTERPRETATION AND DISCUSSION ..... 39**
4.1 Introduction ..... 39
4.2 Reliability Analysis ..... 39
4.3 Demographic Information ..... 40
4.4 Forms of Interpersonal Communication ..... 44
4.5 Patterns of Interpersonal Communication ..... 48
4.6 Communication Skills Competence ..... 50
4.7 Hindrance to Communication ..... 52
4.8 Employee Performance ..... 54
4.9 Correlation Analysis ..... 57
4.10 Multiple Regression Analysis ..... 59
**CHAPTER FIVE ..... 63**
**SUMMARY, CONCLUSIONS AND RECOMMENDATIONS ..... 63**
5.1 Introduction ..... 63
5.2 Summary of the Findings ..... 63
5.3 Conclusion ..... 69
5.4 Recommendations ..... 71
5.5 Suggestions for Further Research ..... 72
**REFERENCES ..... 73**
**APPENDICES ..... 79**

Appendix A: Letter to Respondents ..... 79
Appendix B: Questionnaire ..... 80
Appendix C: Interview Guide for Nurse Managers ..... 85
Appendix D: University Authorization ..... 86
Appendix E: Research Authorization - NACOSTI ..... 87
Appendix F: Research Permit -NACOSTI ..... 88

## LIST OF TABLES

Table 3.1: Sample size of nursing employees in MP Shah Hospital 34
Table 4.1: Reliability Analysis .....40
Table 4.2: Level of Use of Forms of Interpersonal Communication .....45
Table 4.3: Effectiveness of Communication Medium .....46
Table 4.4: Forms of Interpersonal Communication .....47
Table 4.5: Patterns of Interpersonal Communication.....49
Table 4.6: Communication Skills Competence .....51
Table 4.7: Hindrance to Communication .....52
Table 4.8: Employee Performance.....56
Table 4.9: Correlations .....58
Table 4.10: Model Summary .....59
Table 4.11: ANOVA[a] .....60
Table 4.12: Coefficients[a] .....61

## LIST OF FIGURES

Figure 2. 3 Conceptual framework.....199
Figure 4.1: Respondents Length of Service in the Organization.....41
Figure 4.2: Age of the Respondents.....41
Figure 4.3: Respondents Highest Level of Education.....42
Figure 4.4: Management Position of the Respondents in the Organization.....43
Figure 4.5: Rate of Employee Performance.....55

## DEFINITION OF TERMS

**Employee performance**

It's an indicator determining if an employee is performing their tasks and responsibilities appropriately based on the energy and effort that they input (Welch, 2011).

**Communication**

A process of the exchange of information or message among individuals through a certain medium with the information or message being understood by the individuals (Nebo, Nwankwo, & Okonkwo, 2015)

**Effective Communication**

The exchange of meaningful and understandable information between individuals at the right time using the right medium (Crown, 2013)

**Organization**

It's a group of people who work under defined set rules, procedures and relationship that are developed in a way that facilitates achievement of set goals and objectives (Greenwald, 2008).

**Organizational communication**

The exchange or sharing of information (information, ideas, opinions, etc) in an organization for the purpose of carrying out organizational tasks

**Medium**

A channel by which information or message is transferred from a sender to a receiver (Owusu-Boateng & Jeduah. 2014)

## ABSTRACT

Commitment level of employees, their work performance and engagement is affected by their relationship with their employer. One key factor in influencing employee performance is interpersonal communication. In recent years, interpersonal communication has consistently been regarded as a requirement for successful employee performance in organizations. This study purposed to examine the influence of interpersonal communication of nurse managers on nurses' performance in private hospital in Nairobi. The study was guided by the following specific objectives: to establish the forms of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi, to examine the patterns of interpersonal communication between nurse managers and nurses in hospitals in Nairobi, to evaluate interpersonal communication skills competence of nurse managers and its influence on their communication with nurses in hospitals in Nairobi, and to find out hindrances to interpersonal communication between nurse managers and nurses in hospitals in Nairobi. The study was guided by the relational patterns of interaction theory and the social penetration theory. The study used a mixed methods research design where qualitative and quantitative methods were be used. A sample size of 90 nurses and 6 nurse managers was drawn from a total population of 300 nurses at MP Shah Hospital. Selected data collection tool was questionnaire and interview guides. Descriptive statistics was used in analysing quantitative data obtained from the field while qualitative data which was obtained from interviews was analysed using content analysis. The study found that interpersonal communication positively relate with nurses' performance in private hospitals in Nairobi; patterns of interpersonal communication positively related with nurses' performance in private hospitals in Nairobi; communication skills competence had a positive relationship with nurses' performance in private hospitals in Nairobi and hindrances to effective interpersonal communication had a negative relationship with nurses' performance in private hospitals in Nairobi. The study therefore recommends that management of the hospitals to have an organizational structure that favors interpersonal communication. Nurse Managers should be trained more often on communication skills. Improved communication skills by managers will ensure that they are able to deal and handle those employees who have different personalities and attitudes; therefore improving work environment. It is the responsibility of the management of the organization to ensure that the technology used is up to date and is user friendly. Some of the nurse's fear communicating their mind because they fear being victimized; it is therefore important for the hospitals management to ensure that information confidentiality and anonymity is maintained.

# CHAPTER ONE

# INTRODUCTION

Over the past ten years, academic researchers (Brun, 2010 & Williams, 2007) and institutional studies (Job Outlook, 2016 & Career-Builder, 2017) have re-evaluated the critical importance of interpersonal communication in domestic and global organizations. This is especially critical for employee's performance and productivity in organizations. These studies have determined that interpersonal communication competence greatly improves an employee's performance as well as improving the operations of business organizations. Another recent study (Singh, 2014) noted that businesses, agencies, and institutions of all kinds place a high premium on interpersonal communication effectiveness because of the centrality of communication skills in the productivity of organizations. The study further argues that both administrative, managerial functions and activities in organization settings require effectiveness of interpersonal communication skills.

## 1.1 Background of the study

Communication is a phenomenon that comprises of many sides and has different meaning to different individuals. Communication provides a way to gain access to thoughts of another person. Because communication allows certainty to be achieved, it can be defined as form of exchanging meaning (Williams, 2007). Communication is important in an organization and among human beings, because of the crucial role it plays towards achievements of the institution's objectives and goals (Ada et al., 2008)

Through regular and effective communication, both formal and informal forms, employees are made aware of the organizational goals, its policies and their progress so that they can work towards accomplishing them. Confusion may arise if there lacks regular

communication between employees and their supervisors. The tasks to be accomplished by employees get their bases from policies, vision, and mission of the organization and employee feedback. The advantage of having informal communication is that it removes any obstacles that can affect work ensuring that departments in the organization work collaboratively to deal with innovations of employees in time (Okoye, 2004). Managers being role models in communicating creates a cultural norm and the employees will behave in a similar manner.

Haiemann (2011) views effective communication as the imparting of ideas and making oneself understood by others. Barrett (2002) posits that meaningful and effective communication informs all the members if staff in a bid to take part in the strategy and goals of the organization. According to Keith (2014), it is a continuous process between two parties involved and it occurs at all levels including intrapersonal, interpersonal, intra organizational, inter-organizational etc. Communication is effective when the sender of the message receives the intended feedback or action (Peter, 2015).

In Australia King and Hope (2013) noted that communication is a cornerstone of workforce engagement. Strong communication among healthcare team members has been shown to influence the quality of working relationships and job satisfaction, and clear communication about task division and responsibilities has been linked to reduced workforce turnover, particularly among nursing staff. Communicating, properly, is important so that leadership is effective and the organization's objectives are met. In this sense, the commitment to improve communication is extremely important for a good relationship between the team (Vilela & Souza, 2010).

According to figures released by the South African Nursing Council (SANC) in 2012 for 2011, professional nurses (PNs) and registered midwives numbered 30 770 in Gauteng. Of these, the largest number is employed by hospitals in the public health sector (South African Nursing Council, 2012). Poor communication by professional nurses was noted as one of the reasons for their intention to leave their organisation's (Mokoka *et al*. 2011). Professional nurses spend, on average, approximately 40 hours per week at work, where they are required to communicate effectively on an on-going basis. These nurses want to experience a high level of communication satisfaction, which could enhance their job satisfaction. A follow up study at the Chris Hani Baragwanath Hospital, conducted by Von Holdt and Maseramule (2005), reported that this hospital still had no internal communication capacity, implying that it did not make provision for either formal or informal communication channels. This constituted one of the hospital's many managerial problems, creating justifiable frustration and disempowerment among staff.

In Kenya, hospitals serve critical roles as the first level of referral care, while also providing support to peripheral health facilities such as health centres, dispensaries and the community. Unfortunately, the performance and quality of Kenyan public sector hospitals are often poor (Irimu *et al.* 2012) due to resource and structural limitations, inadequate leadership and poor communication between senior and frontline workers.

### 1.1.1 Interpersonal Communication

An organization that practices effective communication finds it easy to create an organizational culture through appropriate communication and feedback mechanism cultivating values and behaviors apposite for the success of the organization. Larger enterprises have understood the significant benefits of delivering a structured employee

communication strategy where the most effective communication methods are adopted and executed unlike smaller businesses who may deliver employee communications on a more ad-hoc basis. Delivering an effective internal communication strategy can be a substantial driver in setting one company apart from another and giving them a competitive advantage. By strategically selecting the most effective channels and information, an organization is able to not only inform but also enthuse each and every employee to deliver business goals effectively and efficiently (Staffconnect.com 2010).

Peter (2015) explained that any form of communication either face to face or voice to voice that allow one to receive instant feedback is considered to be interpersonal form of communication. They added that this form of communication is suitable for cases where the participants are discussing issues that need give-and-take. Discussions regarding appraisals, objective management, training sessions or counseling sessions are some of the situations that need give and take form of communication. Some forms of interpersonal communication include meeting, conferences, quality circles, brainstorming sessions, contract negotiations, and committee meetings. It is important to note the difference between organizational and interpersonal communication. Organizational communication is the type of communication that takes place at institutional level (Hittet al., 2006). There are various factors that motivate interpersonal communication and they include; for fun; because of affection (caring), form of escape to avoid other things, form of relaxation, to avoid loneliness and sharing feelings (Okoye, 2004). One can understand the results of ones relationship if they understand the reasons that motivate people to communicate.

### 1.1.2 Performance of Nurses

Currently it has become common to see issues related with dissatisfaction of nurses among nursing staff in hospitals. One contributing factor is the issue of labor organization in hospital units and the way the issues are manages (Garlet, 2009). Dissatisfaction also arises from relationship issues and lack of adequate communication encompassing empathy, constant listening and authenticity. (Chan, 2012). Such skills assist in effective expression of issues and therefore improving daily working lives of employees within the institution. Some factors that will ensure nurses feel comfortable in their working conditions are effective communication between them and colleagues, forms of social interaction and good interpersonal relationship. (Stremlau, 2013)

In light of this, management should create a working environment that prioritizes social support for their employees (McCabe & Sambrook, 2013) (opportunities for training and development), because by doing so, the level of employee job satisfaction increases and their stress levels reduce (Scarnera et al, 2009). It's important for the management to come up with organizational formulas that their employees suggest with the aim of lowering precarious working environment. (Cardoso et al, 2009)

When traced interpersonal communication has complete indicators to contribute to employee performance. According to (Satir, 2013), considered interpersonal communication to be a very important life skill and can be applied in giving and collecting information, influencing behavior and attitude of others, maintain relationship and form contact, use our experience to make sense of the world, understanding needs of others and expressing personal needs, receiving and giving emotional support, solving problems and making decisions, predicting and anticipating behavior and regulating power.

The level to which an individual practice and exhibits interpersonal skill determines effectiveness of their interpersonal relationship is. Organizational commitment is explained as the state in which an employee is committed to help the organization to achieve its goals and it comprises of employee's level of involvement, identification and loyalty to the organization (Satir, 2013). Therefore, this research believes that organizational commitment and interpersonal communication have a positive effect on nurse performance. Thus, the research found out the relationship between interpersonal communications of nurse managers on nurses' performance in private hospitals in Nairobi.

### 1.2 Problem Statement

It is easy to attract nurses into an organization by providing them with bonuses and generous packages as compensation, but the challenge comes in retaining proficient and dedicated nurses (Davis, Ward, Woodall, Shultx, & Davis, 2007). Commitment of employees, their job performance and engagement is directly affects by their relationship with their employers (Cullen & Gordon, 2014). One of the biggest factors in influencing employee performance is internal communications (Thao & Hwang, 2015). In recent years, interpersonal communication has consistently been regarded as a requirement for successful employee performance in organizations (Singh, 2014). A research carried by Wyatt (2004) connecting organizational communication and employee performance, found that organizations with higher levels of interpersonal communication effectiveness experience higher shareholder return than firms that communicated less effectively (Watson Wyatt, 2004). Stronger communication channels ensure communication structure, employee feedback, adjustments to change openness and hence contribute positively to employee performance. Additionally, effective interpersonal communication helps to establish a sense of corporate identity,

teamwork, productivity, participation, improve retention and job performance (Neves & Eisenberger, 2012). Private hospitals are struggling with the retention of nurses and this is negatively affecting employee performance. Recent studies indicate that effective interpersonal communication in an organization impacts employee performance (Neves & Eisenberger, 2012). Although this is the case, no study has been conducted to establish relationship between interpersonal communication and the performance of nurses in hospitals in Nairobi. This study therefore sought to establish the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi

## 1.3 Objectives of the study

### 1.3.1 General Objective

The general objective of the study was to examine the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi.

### 1.3.2 Specific Objectives

The study was guided by the following specific objectives:

i. To establish the forms of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi.

ii. To examine the patterns of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi

iii. To evaluate interpersonal communication of nurse managers and its influence on nurses' performance in private hospitals in Nairobi.

iv. To highlight the hindrances to interpersonal communication by nurse managers and their influence on nurses' performance in private hospitals in Nairobi.

## 1.4 Research Questions

The study was guided by the following specific research questions:

i. What is the influence of interpersonal communication used by nurse managers on nurses' performance in private hospitals in Nairobi?
ii. What are the patterns of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi?
iii. How does the level of interpersonal communication competence of nurse managers influence nurses' performance in private hospitals in Nairobi?
iv. What are the hindrances to interpersonal communication by nurse managers on nurses' performance in private hospitals in Nairobi?

## 1.5 Justification of the study

Employer-employee relationships have a direct effect on employee commitment, work performance, and job engagement (Cullen & Gordon, 2014). Additionally, one of the biggest factors in influencing employee performance is internal communications (Thao & Hwang, 2015). It was not known how interpersonal communication between nursing managers and nurses affects their performance in private hospitals in Nairobi, which continue to experience a high turnover of nursing staff. On the other hand, the provision of safe and quality patient care is dependent on the job satisfaction of nursing staff. This study therefore was important because it shed light on the influence of interpersonal communication on the performance of nursing staff in private hospitals in Nairobi. This study might help nursing staff of health care organizations make critical decisions such as the choice communication strategies that might improve the general service provision in the health sector in Kenya.

## 1.6 Significance of the study

The study provides information on the interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi. The recommendations, therefore, might be useful to private hospitals in their review regarding communication policies at the workplace and subsequent retention of nursing staff. The study might also be useful to nursing managers since it might provide information that might help to improve their communication strategies. The study might also be beneficial to the Ministry of Health in its policy formulation and implementation in that it might ensure that the health sector adopts strategies and techniques to improve their employee communication as well as service delivery and productivity. Overall, the study adds knowledge, more information and data to existing research on communication and employee performance in Kenyan organizations. This research might as well form the basis for further research to be done by other researchers.

## 1.7 Scope of the Study

Although there exist many private hospitals in Nairobi, the study was limited to only MP Shah Hospital. The study was limited to interpersonal communication between nurse managers and nurses, although there are other cadres of employees in hospitals, because nurses are critical to service provision in hospitals. There are many theories of interpersonal communication, but this study was limited to the relational patterns of interaction theory. The data collection method was limited to the use of questionnaire and interview to gather both quantitative and qualitative data respectively. The area of study was limited to Nairobi. The study was conducted in the span of three months in 2019.

## 1.8 Limitations of the Study

The researcher encountered challenges mostly in the process of data collection. The respondents took a longer time to complete the questionnaires citing lack of enough time due to their duty shifts. The researcher had to persuade them to spare some time and fill them.

Secondly getting interview appointments with the respondents was not easy due to their sensitive and busy nature of work, and therefore the researcher had to reschedule most of the interviews hence taking a longer time to finish.

# CHAPTER TWO

# LITERATURE REVIEW

## 2.1 Introduction

This chapter critically reviewed literature that is pertinent to the study. It reviews literature that is related to interpersonal communication and employee's performance in organizations. The theory that relate to interpersonal communication was also discussed. The chapter also analyzed the conceptual framework in terms of the independent and the dependent variables. Further, it discussed the empirical reviews, the research gaps identified, and provides a summary of key issues in this chapter.

### 2.1.1 Interpersonal Communication in Healthcare

In healthcare effective interpersonal communication is a key part in creating and maintaining good patient-physician relationship as well as colleague relationship in the hospital (Rajashree, 2018). This is important since it helps care givers learn a lot from each other and provide good medical care to their patients. Such include communicating with patient's relatives, communicating with other health care professionals, dealing with anxious patients, giving instructions to colleagues and patients, involving patients in decision making amongst others.

Rajashree (2018) explains that healthcare workers have to be aware of their own interpersonal communication practices and should undergo continuous appraisal. Ojwang, Ogutu and Matu (2010) argue that patients can only enjoy their rights at the health care centers when the nursing staffs are trained to understand their duties, relationships and strategies of communicating with them. The authors further add that many of the well trained and experienced nurses leave Kenya to go seek for greener pastures in United

Kingdom and United States of America leaving a gap behind. Ojwang et al., (2010) reveals some of the reasons to be associated with poor remuneration for service, burn out as a result of overworking, lack of support from senior colleagues and general poor working conditions. All the factors listed by the authors and key contributors to communication behavior.

Williams (2018) offers several suggestions that can enhance interpersonal communication between nurses in hospitals. First, is the understanding that a good nurse manager leads their team by example. He or she should spearhead respect in the workplace such that all the nurses feel respected and valued despite the working environment. This will create an atmosphere of job satisfaction as well as a motivation for the nursing community within the hospital. Secondly, the nursing manager should foster a two way communication structure that is to say a nurse manager should be open for discussion with other junior nurses for the sake of openness. Allowing nurses to contribute to certain decisions will give them a sense of ownership and freedom to practice. The nurse manager should also create a team environment that enhances professionalism. This means that the manager should encourage collaboration of team efforts and expertise at work. According to Williams, it is also the manager's responsibility to hire qualified and competent staff who will add value to the nursing community. A good nurse manager should be able to match applicants with the roles they suite best. Lastly, William (2018) adds that a nurse manager should demonstrate employee advocacy where the nurses know that they have a senior who is willing to support them at the executive level and even defend them if need arises.

Ojwang et al. (2010) agrees that for interpersonal communication to be successful in the nursing department the nursing manager needs to create a safe and healthy communication environment that can support the work the nurses provide to the patients and the hospital in

general. The authors assert that nurse managers need to have strong interpersonal communication and leadership skills.

## 2.2 Theoretical Framework

This study was guided by the relational patterns of interaction theory and social penetration theory as it sought to examine the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi.

### 2.2.1 Relational Patterns of Interaction Theory

This theory explains how people taking part in communication define relationship. Gregory Bateson, Paul Watzlawick, et al. (1967), developed a foundation for this theory which was later referred to as the Palo Alto Group. This theory formed the basis through which scholars in communication field used as an approach to their studies on relationships.

**Ubiquitous communication**

According to Palo Alto Group the presence of an individual already expresses the way they relate with others; this could be with or without them knowing. According to Dalton (2004) it is not possible for an individual to avoid interacting and if they do avoid, that avoidance can pass a message to others. Such ubiquitous relationship results in establishment of patterns and expectations that are applied in determining and explaining the form of relationship they have. 1. **Expectations;** People join others in communication having already established what they expect out of their own behavior and that of the individuals they are communicating with. Reinforcement of the expectations can take place either during the interaction or other expectation that will be used in future interactions are developed. New interaction patterns result in new expectations and established interaction patterns result in established expectations. 2. **Patterns of interaction;** development of new trends regarding interaction

between individuals is what results in established patterns of interaction. In this theory, two patterns are of great importance: **Symmetrical relationships;** whereby the relationships are developed from interaction of two individuals who respond to each other in a similar manner. It's a common form of interaction that is characterized by power struggles.

**Complementary relationships;** it's developed from interaction that takes place between individuals who respond to each other in opposing manner, for instance in an interaction where one individual argues when the other is quiet. **Relational control;** it's who in the relationship is in control. Control in a relationship is determined within time through the behavior of partners in a relationship. Behavior patterns involve person's response to assertion of others. Three forms of response exist: One-down is the submissive form of response where one accepts the assertion of the other. One-up is the opposite of One-down where one disagrees with the assertion of the other.

One-across is a neutral form of response. In addition to rational control, Seth Weiss and Marian Houser elaborated more using the example of teacher/student. A student who communicates with a teacher with rational reasons hopes to maintain or develop a personal relationship; functional reasons aiming at discussing or seeking additional information from the teacher; students communicating,; participatory reasons demonstrating comprehension and interest in course are class material, and learners communicating for sycophantic reasons hoping they can impress their teachers.

**Complementary exchanges;** this takes place when a partner agrees to a one up message where the other partner agrees by providing a one-down response. Frequent occurrence of complementary exchanges is in a relationship and parties in both ends of the exchange remain uniform. **Symmetrical exchanges;** this takes place when the assertion of one partner

is countered with a reflective reply. Therefore, when one-up assertion gets a one-up reply, or one-down assertions gets a one-down reply, then it's said that a symmetrical exchange has taken place. Frequent occurrence of symmetrical exchanges is an indication of existence of symmetrical relation.

This theory will be beneficial to this study in the sense that it will create a better understanding of how relationships are defined by people's interaction in the process of communication. It will as well cause a deeper understanding to the nurses and their managers on how to manage and sustain interpersonal relationships by expressing themselves e.g. their expectation of one another, coming up with patterns of communication and building complimentary relationships which are healthy in their working environment

The theory will also help the researcher in understanding how relationships happen by people's interaction during communication

### 2.2.2 Social Penetration Theory

This theory, also known as Onion theory, indicates that the process of getting to know an individual, we take part in a reciprocal process that involved self-disclosure where transformations take place in both depth and breadth affecting development of our relationship. Depth is how sensitive an individual is to information while breadth is the number of topics engaged in. There are circumstances that cause depth or breadth to grow rapidly. This theory indicates that just like layers of onion are peeled, so do individual in a relationship peel gradually through the personality layers of their partners (Tolstedt et al., 1984).

Altman and Taylor (1973) indicated that there is a close link between steady change in communication and relationship development. Generally, any relationship begins with exchanging superficial information and gradually advances to conversations that have more meaning. Intimate relationship can only be developed by increasing breadth and depth of conversations. Breadth means widening the topics being discussed and depth is the significance of the topics to an individual.

This theory comprises of four various stages. They are orientation, exploratory affective exchange, affective exchange, and stable exchange. The first stage which is the orientation stage, two individuals are strangers and are very cautious of their interaction and therefore share very little information. In the second stage (exploratory affective stage) they become more relaxed and friendlier in their communication. The next stage (Affective exchange) is characterized by more open communication and they are now close friends or are in a romantic relationship. The final stage is the Stable stage which is characterized by continuous expression of personal and open form of interaction. In case an individual rushes too first and shares too much information very fast, the receiver of the information might develop a negative perception of the interaction and there is a less likelihood that the relationship will form.

According to Altman and Taylor this theory can be applied to get an accurate prediction of whether individuals can risk self-disclosure. Some of the principles that are included are rational income, stability and satisfaction. The assumption of this theory is that possible results is the stance of process of making decision and the way people decide whether they can risk self-disclosure and this is based on their evaluation on the cost and the reward the person will incur if they decide to share their personal data.

One instance of this theory is seen when a person considers hypothetical cases like accepting to meet a stranger for the first time. Penetration depth is the level accomplished by the intimacy of the relationship. It is expected that when individuals, meet for the first time information that isn't personal will be shared. Some of that information is names, age, occupation etc. Nonetheless, if both parties decide that they want to continue their friendship by continuing their chat then more personal information will be shared. Altman and Taylor explained them to be the depth and breadth of self-disclosure. Griffin explained depth to be the level to which specific areas of the life of an individual are disclosed while breadth refers to the area of life of an individual that the disclosure is taking place.

Altman and Taylor explained that there are four reasons why a relationship exists: Exchange of Peripheral items if frequent and sooner compared to private information, Self-disclosure is reciprocal, especially during the early phases of developing relationships, There is rapid penetration at the start but it quickly slows and get tightly wrapped in layers hard to peel and degeneration is a gradual process of layer-by-layer withdrawal.

The theory will be of benefit to this study in the sense that, it will enable the readers to understand that relationships develop through engaging in self-disclosure which grows from breadth and depth. Therefore, the same way nurses and nurse managers can manage and develop their interpersonal relationships by adopting the processes involved in the onion theory of peeling the layers. The theory also helped the researcher in understanding how relationships begin with exchange of superficial information and how they gradually move to on to more meaningful conversation.

## 2.3 Conceptual Framework

In order to provide a systematic overview of various independent variables that influence employee performance in organizations, the researcher developed a conceptual model (see Figure 2.3). The model identifies independent variables such as forms of interpersonal communication, patterns of interpersonal communication, communication skills competence, and hindrances to effective interpersonal communication as important to influence nurses' performance in private hospitals. The dependent variable is identified as nurses' performance. The conceptual model graphically shows the relationship between the independent and dependent variables in the study.

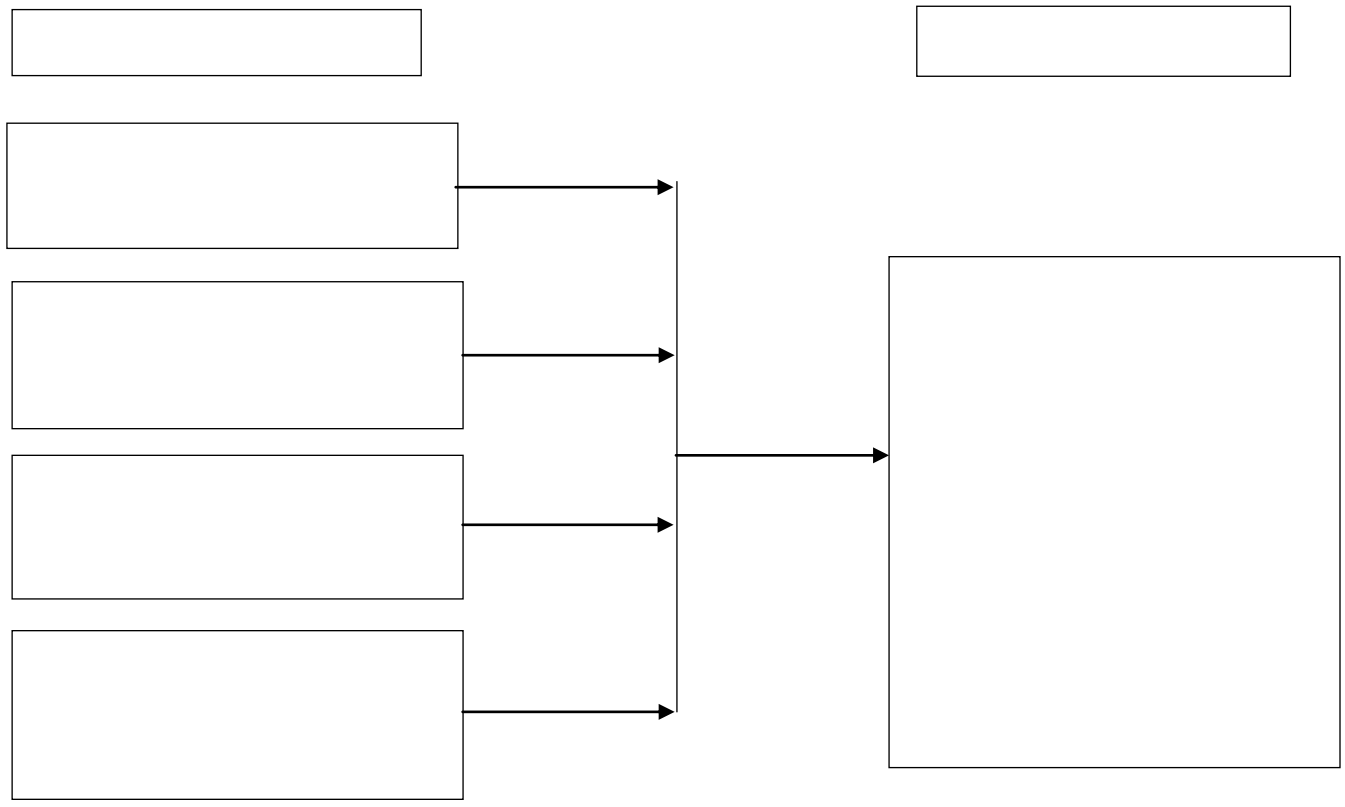


**Figure 2. 3 Conceptual framework**

## 2.4 Review of Variables

### 2.4.1 Forms of Interpersonal Communication

Interpersonal communication means communication between people. According to Mangal and Mangal (2009), there are three major forms of interpersonal communication commonly used by managers in organization known as; written communication, oral communication and non-verbal communication.

Letters, memos, bulletin, procedures/ policy manuals, notices, books, etc. are some of written forms of communication which are used in organizations. Oral communication is explained as verbal communication that tales place between two or more people in an institution. It's a form of face to face communication that's used most of the time to pass information in conferences, meetings, seminars, interviews, etc. This form of communication is rich in content since it involves high levels of interactions between the receiver and the sender. Non-verbal communication it's the use of other forms of communication other than written or oral. This type of communication includes the use of facials, personal appearances, movements of the body to pass information. Main categories of this communication is physical distance, kinetic behavior, and object language (Kukule, 2012)

### 2.4.2 Patterns of Interpersonal Communication

One of the major ways of categorizing major Patterns in interpersonal communication is through relationships between people in communication and this is known as relational patterns (Muscato, 2018). The author recognizes that different relationships define the way people interact while communicating. To begin with, communication patterns between individuals who communicate in the same way referred to as symmetrical communication. In symmetrical pattern each person responds just like the other and the communication is a

continual back and forth. According to Muscato, this pattern is very direct and well understood by both parties. However, symmetrical pattern does not decrease conflict. The Author adds that most power struggles in conversations are between people with symmetrical relationships. Despite this it is still viewed as the most efficient pattern since little time is spend in understanding what the communicators are trying to communicate. Walker (2017) a doctor in Psychology posits that in healthy symmetrical communications, the parties communicating mirror each other and one person's success gets celebrated, hence motivating the other person to work hard and be equally success full. Unhealthy symmetry is when the two parties are brutally competitive with each other and would even do unethical things to win.

The second pattern is complimentary communication in which people have opposing communication styles and the patterns of each person's behavior is complementary to the other (Muscato, 2018). In organization, this is expressed as division of labour where an individual can take on a project while the other provides supports necessary for the success of that project. In this pattern, both parties appreciate the other person's contribution to the project. Unhealthy complimentary will therefore be seen in a situation where one party dominates and controls the other while the oppressed party will respond by being more passive (Walker, 2017).

### 2.4.3 Interpersonal Communication Skills Competence

This is referred to the ability to use appropriate communication to build and maintain an effective relationship. A communicator is considered competent when they are able to express information that are perceived to be both effective and appropriate. Satir (2013) states that one communicates effectively when their message is understood by others and it

achieves its intended purpose. For instance, when the nurse manager tells a nurse to remove oxygen mask from patient in bed 4, the message will become effective if the nurse removes the oxygen mask from the patient in bed 4.

Secondly, competent communication is measured by appropriateness of the communication. That is the communicator should consider the time, place and overall context of the message and should be sensitive to the feelings and attitudes of the listener Satir (2013). The author asserts that there is no single way to best communicate with others. However, there are avenues that can help a person become both more effective and appropriate when communicating with others. The author recommends that for a person to become a competent in the interpersonal communication skills they first need to be knowledgeable. A communicator needs to understand how communication works, its components, principles and rules of the communication process. Secondly, a person needs to be skilled that is know how to translate knowledge into action.

Developing communication skills requires practice and helpful feedback from others who can confirm the appropriateness of one's communication. Thirdly, a communicator should be motivated to practice the learnt skills in order to improve on communication. Lastly, competent communication should be made to differ. This involves a deliberate effort to consider the worldview of other people with whom a person interacts with. A communicator needs to consider the views, thoughts, needs, experiences, personality, emotions, motives, desires, culture and goals of other communicators while still maintaining their own integrity. The choices people make is forming their information, how and when to deliver that information are made more effectively when other peoples' worldview are put into consideration (Satir, 2013).

### 2.4.4 Hindrances to Interpersonal Communication

Johnson (2018) defines a barrier as anything that prevents communication from reaching the intended receiver. In communication a barrier will prevent a message from travelling in a way that gives it the intended meaning. Johnson (2018) identifies psychological barrier as one of the hindrances to communication. According to Johnson psychological hindrances are invisible distance conveyed through tone and are present in all forms of interpersonal communication when a communicator can be audible and use a common language but the tone and expression of the communicator can make the receiver misinterpret the message. For instance, when a supervisor at work may use a harsh tone while passing a message to the juniors.

Another hindrance to interpersonal communication identified is gender barrier. Meier (2018) indicated that gender barriers in communication can result to issues both at home and at workplace. Communication gap that exist between genders can be because of stereotype in the society and differences in personalities of the involved parties (Meier, 2018). There are roles that are assigned to women and others to en in the society and are the basis for gender divide. He added that the focus of women is more on relationship while that of men is on task and that the preference of women is developing relationship and then make use of the developed relationship to work collaboratively but on the other hand, this method frustrates men. In addition, he stated that men connect with others through tasks. The variation of the two approaches is what creates a barrier in communication between both genders. In instances where conflict arises, communication oriented by relationship and that oriented by task can be exaggerated. Women have the tendency of discussing the conflict in an effort to

maintain their relationship while men internalize conflict without putting into consideration the effects it might have on their relationship.

The divide is deepened by the natural inclination of women to empathy (Meier, 2018). Another form of gender barrier is varying styles in the process of making decisions. Meier indicated that while men use communication style driven by product women are process oriented and prefer gathering. For example, incase issues arise at work, there is a likelihood that women nurses will seek advice from their colleagues but male nurses might consider such a move to be a weakness since they believe that as leaders they should have the ability of making decisions on their own with no consultations/opinion of others.

There are also semantic hindrances to communication and they relate to symbolic challenges distorting message sent in a way that isn't intended, causing challenges in decoding the message (Businesstopia, 2018). Semantic hindrances mostly occur in organizations where there is no effective communication system in place. These hindrances occur as a result of language, education, culture and place of origin. Dowd (2018) explains that if the receiver and the sender of a message speak a different language, either figuratively or literally, it could result to a miss in the interpersonal communication. It is possible to find not all members in an organization comprehend slang, jargon, acronyms and other terminologies used in the sector. There are those employees who might decide to act on their own guessing and assumptions on what the message meant instead of asking for clarifications.

In addition, misunderstanding can arise from employees who don't share the same primary language. Because of message and body language misinterpretation, others might be hurt emotionally. Dowd added that lack of cultural understanding, misperception, bias and stereotypical beliefs can affect interpersonal communication. Employees might lack the

appropriate skills or experience to communicate with individuals who share a different background. Most of the organizations offer their employees with training to equip them with knowledge on ways to effectively communicate with individuals of cross culture and those from different background. In addition, because gender hinderances affects interpersonal communication, if nurses are treated based on their gender it can result into interpersonal conflicts in the organization.

Williams (2018) identifies another class of interpersonal communication hindrances as attitudinal hindrances. These are hindrances related to peoples' attitudes towards the message or the organization as a whole. Wroblewski posits that attitudinal hindrances are those behaviors or perceptions that are *divisive* in nature – the ones that can lead to nagging doubt, disagreement or even conflict. Some of the more serious attitudal hindrances to interpersonal communication are mentioned as stereotyping. This is a process of ascribing particular behavioural traits to individuals on the basis of their connection or membership to a group or class. Closely to stereotyping is prejudice which leads to discrimination. When people discriminate they make decisions without getting all the necessary information about the people they are judging. There is also selective perception where a person can unconsciously filter information that ends up supporting someone's preconceived ideas. Also, when a source is viewed as untrustworthy, a troublemaker or someone who is careless with facts they will not be taken seriously most of the time (Williams, 2018).

There are other general hindrances that can also complicate interpersonal communication including speech, dress, values, gender, priorities and preferences. For example, there might be divide in generations and how members of the teams like to communicate with each other (Meier, 2018). Young employees might be in staff rooms and prefer to use social media as

their form of communication but this might exclude he older employees who might prefer to use face to face form of communication. Also, interpersonal divide can arise from wide generalization and stereotypes when an employee from an older generation considers themselves to be superior to the younger generation or vise-versa.

### 2.4.5 Performance

In order for an organization to excel and develop, the contribution of the employees plays the most significant part (Korkaew & Suthinee, 2012). Rich et al, (2010) mentioned two forms of performance of employees for an organization to be effective: task and contextual performance. Task performance is explained to be the behavior that has direct involvement with activities while providing indirect support to key technical processes in the organization (Borman & Motowidlo, 2008). Such behaviors have direct relationship with formal reward system in an organization. Contextual performance is explained as the effort of an individual that don't relate directly with their key tasks in the organization (Werner, 2010). Nonetheless, the behaviors are of great importance since they shape organizational, social, and psychological contexts and serve as critical catalyst for processes and tasks.

In order for an organization to succeed, there is need to have close coordination of employee performance in their various tasks (Macey & Schneider, 2008). Depending on organizational nature, employees perform various tasks. Some of the tasks they perform relate with production, manufacturing, storage, marketing, transportation, distribution, purchasing, business promotion, finance and accounting, HR, public relations and research (Borman & Motowidlo, 2008). There is a link between all those activities and they work towards achieving organization objectives. Employees should perform their tasks properly in order to get best output which will greatly affect productivity and progression of the organization.

There are various ways through which employees can be encouraged to work sincerely and give their best, they include: training, motivation, dedication, welfare, management policies, fringe benefits, salary and packages, promotion, communication etc. (Korkaew & Suthinee, 2012). Managers should understand the importance of employee performance in their organization and should direct their efforts towards that.

### 2.5 Empirical Review of Interpersonal Communication and Employee Performance

In a study by Cullen and Gordon (2014) on the relationship between leadership and communication skills of nurse managers and the organizational citizenship behaviours of medical-surgical nurses and nursing assistants, they used quantitative data, with a correlation design. The study used an online design to collect data. Findings of the study indicated that there was a moderate positive statistical significance between leadership and communication skills of nurse managers and organizational citizenship behaviours of the registered nurses and nursing assistants. Although the study was concerned with communication skills in general, this present study examines interpersonal communication in particular. In addition, the study looked at leadership as a second independent variable, while the present study does not.

Tabitha (2015) conducted a study to analyze the effectiveness of employee communication in public institutions in Nairobi with TSC as a case. The objectives of the study were: to analyze existing employee communication tools; to evaluate the effectiveness of employee communication tools; and to investigate the challenges facing employee communication at Teachers Service Commission. Theoretical foundation for this study was Systems Theory. The study adopted descriptive research design where qualitative and quantitative data was collected. Data was collected from 310 individuals using interview guides and

questionnaires. The findings showed that effectiveness of communication was affected significantly by existing communication of employees, effectiveness of communication by employees and challenges faced by employees during communication. The most effective form of communication was found to be memos and circulars. The main challenges that employees faced in their communication was lack of direct channel of communication from employee to their seniors. The study recommended inclusion of face-to-face communication in passing of information and use of telephone calls as effective channels of organizational communication. The present study adopts a descriptive research design which is similar to the study being reviewed. Further, the study under review was conducted on a public institution while the present study is conducted on a private institution, that is, MP Shah Hospital.

Kibe (2016) conducted a study to assess the impact of strategic communication management on stakeholders using corporate identity in public schools in Kenya. The study found out that Kenyan public schools perform better than private schools due to poor corporate image caused by poor communication both internal and external as well as poor publicity. He suggested that public schools need to embrace new communication technology like web pages, blogs and social media that will enable them reach their stakeholders and thus improve on their communication which in turn will enable them gain a competitive edge though improved reputation. He also concluded that modern schools should be run on the principles of a model corporation where communication becomes paramount in reaching out to key stakeholders both internal and external. The study was conducted in public schools in Kenya while the present study is conducted in private hospitals. Further the study examined

strategic communication management, while the present study looks at interpersonal communication among employees.

Sumeya (2016) researched on effects of internal communication channels on employee performance at Help Leads to Hope (HLH) Somalia. Adopted research design was descriptive and a sample 136 respondents was selected using stratified random sampling method. Tool for gathering data was questionnaire and the collected data was analyzed using both descriptive and correlation analysis. The study revealed that downward communication significantly related with performance of employees. Furthermore, downward communication existing in the organization was found to be ineffective in improving performance of its employees. The study revealed that managers in the organization didn't share information adequately with their employees. In addition, it was revealed that there was no significant relationship between performance of employees and upward communication. Furthermore, the organization had weak practices for upward communication which had no impact towards improving performance of employees. Some of the factors found to affect upward communication were lack of multichannel forms of communicating with superiors, lack of employee ability to share their opinion and suggestions with their supervisors, lack of ability by employees to share with management their attitude or outlook. The study concluded that both downward and peer to peer communication had significant and positive association with employee performance. The study was conducted in Somalia, while the present study is conducted in Kenya. The study examined internal communication in the organization, while the present study examines interpersonal communication in the organization and its impact on employee performance.

## 2.6 Research Gaps

Studies have been conducted on organizational communication in general, but not interpersonal communication between managers and employees in particular. For example, Cullen and Gordon (2014) examined the relationship between leadership and communication skills of nurse managers and the organizational citizenship behaviours of medical-surgical nurses and nursing assistants. Although the study was concerned with communication skills in general, they researchers did not examine interpersonal communication in particular. Tabitha (2015) conducted a study to analyze the effectiveness of employee communication in public institutions in Nairobi. The study examined employee communication in general but not the directional interpersonal communication between nurse managers and nursing staff in particular. Kibe (2016) conducted a study to assess the impact of strategic communication management on stakeholders using corporate identity in public schools in Kenya. The study examined strategic communication management and not interpersonal communication between employers and employees in private hospitals. Sumeya (2016) conducted a study to assess the effect of internal communication channels on employee performance at Help Leads to Hope (HLH) Somalia. The study examined internal communication in the organization, and did not focus on interpersonal communication in particular. Therefore, there is need to study how interpersonal communication of nurse managers with nurses' is influencing their performance in private hospitals in Nairobi, and that is what this present study is concerning itself with.

## 2.7 Summary

This chapter presented the literature review relating to interpersonal communication in organizations and the employee performance in the organizations. The theoretical and empirical literature in global, regional and local studies has been presented and discussed. Specifically, literature relating to interpersonal communication and it relates to employee performance has been presented.

# CHAPTER THREE

# RESEARCH METHODOLOGY

## 3.1 Introduction

This chapter focused on the methodology which was used in the study. It outlined the research design, target population, sample and sampling techniques, instruments of data collection, pilot study, reliability of instruments and data analysis plan.

## 3.2 Research Design

The study used a mixed method research. This is a methodology for conducting research that involves collecting, analyzing and integrating quantitative and qualitative research. This approach to research provides a better understanding of the research problem than either of each alone (Creswell, 2013).

Descriptive survey design was used in the study. Creswell (1994) explained that this type of research design is applied in gathering information about the current situation of a phenomenon. A descriptive survey is a method of collecting information from elements in a population with the aim of establishing current state of the population while considering one or more variables (Mugenda & Mugenda, 2003).

The method enables the researcher to describe a set of observations or the data collected. Jackson (2009) states that the survey research method involves participants answering questions administered through questionnaires and interviews. The researcher administers a questionnaire or conducts interviews with individuals in order to describe their opinion, attitude, behaviour and experiences (Creswell, 2005).

The researchers then describe the responses given. The survey method can also be used to investigate relationships between variables (Fraenkel et al., 2012). This research design was chosen because it helped to describe interpersonal communication between nurse managers and nurses and how it contributes to their performance in private hospitals in Nairobi. The descriptive design enabled the researcher to obtain numerical and descriptive data to assess the relationship between nurse managers and the performance of nurses in private hospitals in Nairobi, with focus on Mp Shah Hospital.

### 3.3 Research Population

Mugenda and Mugenda (2003) explained a population to be a set of individuals/elements sharing common characteristics that are observable and that differentiate them from other populations. The population of this study comprises of the staff of MP Shah Hospital located in Parklands in Nairobi. There are 300 nursing staff working in the institution and the study targeted nurse managers and nurses in order to gather reliable and accurate information on the influence of interpersonal communication on organizational performance. The study hence targeted, 6 nurse managers and 300 nurses in MP Shah Hospital.

### 3.4 Sample Frame

The sample frame of nursing staff in MP Shah Hospital was drawn from a list provided by the Human Resource Department at MP Shah Hospital in Nairobi.

### 3.5 Sampling Techniques

Sampling is the process where a small group of elements or subjects are selected from target population, and are to be studied with the aim of generalizing the findings for the entire population (Kothari, 2004). However, since the research design of this study is descriptive survey, the sample size for both the qualitative (interview) and quantitative data collection

process was not the same. The data for the qualitative aspect was smaller than that for the quantitative aspect. This is because the aim for qualitative data is to gather extensive information from a small sample (Creswell, 2014).

For the quantitative aspect of this study, the stratified random sampling technique was used. This ensured that every member of the study population an equal chance of being selected (Creswell, 2014). Therefore, both male and female nurses had an equal chance of being selected for the study.

In stratified random sampling, set of strata are identified and their proportion of population corresponding to each stratum are determined. Then a sample is drawn randomly from each stratum so that proportions in the sample exactly match proportions in overall population (Brase & Brase, 2009). Therefore, since both male and female nurses are employees at MP Shah Hospital, it was relevant to apply the stratified random sampling technique so that no gender is left out.

Mugenda and Mugenda (2003) advocate for a sample of 30 percent of the population for a quantitative data collection. Therefore, a sample size of 90 nurses was collected, which represents 30 percent of the total nursing population of 300 nurses at MP Shah Hospital.

**Table 3.1: Sample size of nursing employees in MP Shah Hospital**

| **Category** | **No. of employees** | **Sample size (30%)** |
|---|---|---|
| Male nurses | 50 | 15 |
| Female nurses | 250 | 75 |
| **Total** | **300** | **90** |

**Source: Author (2019)**

For the qualitative aspect, a sample of nursing managers from MP Shah Hospital was selected using the purposive sampling method. This method is used to select the membership of the sample based on research goals. This sampling method is based on the judgment of the researcher as to who are the key informants who can provide the best information to answer the research questions (Etikan & Bala, 2017). According to Creswell (as cited in Mason, 2010), a sample size of around 20 is enough to reach saturation. Considering the limited number of nurse managers at MP Shah Hospital, a sample of 6 nursing managers will be selected for interviews in the study.

### 3.6 Research Instruments

Primary data was obtained through two questionnaires and face to face interviews.

#### 3.6.1 Questionnaires

Questionnaires targeted nurses who run the day to day operations at MP Shah Hospital (see Appendix 2). The questionnaire was guided by the objectives of the study. It contained close ended and open-ended questions. The questionnaire was used because all the respondents were literate and therefore can read, interpret the questions, and answer them appropriately. Questionnaires also enable easy and cheap collection of data, save time, ensure confidentiality, are free from bias of the interviewer hence results are made more dependable and reliable (Mugenda & Mugenda, 2003).

#### 3.6.2 Interview Guides

On the other hand, interview guides were used to collect information from nursing managers at MP Shah Hospital (see Appendix 3). Interview guide helped the researcher to collect detailed and in-depth information from nurse managers. Unstructured interview guide was

used and was structured in line with the research objectives. Through interviews, the researcher was able to enhance, clarify and verify information that had been provided by the nurses through the questionnaires (Mugenda & Mugenda, 2003).

### 3.7 Reliability and Validity of the Research Instruments

In order to ensure reliability and validity of the data and to ensure whether a research instrument is adequately designed, it was important to conduct a pilot study. In this study, test-retest reliability measure was employed. For the purpose of testing, "a small sample was considered so that it can be determined whether the study approach was correct and to help refine the questions in the questionnaire" (Wimmer & Dominick, 2011, p.200). The sample for the test was taken from the nurses who did not participate in the study. As Wimmer and Dominick (2011, p.200) argue that "self-administered questionnaire should be pre-tested with the type of respondent who participated in the actual study". A pilot test for the questionnaire was done on five nurse employees of MP Shah Hospital. The selected nurses were not allowed to participate in the main study because of maturation.

### 3.8 Data Collection Procedure

During the first phase, the researcher issued out questionnaires to nurses at MP Shah Hospital, and where possible used a research assistant to help in the issuing and collection of questionnaires, since they are self-administration tools. The administration of the questionnaires was conducted within a period of one month.

In the second phase, the researcher conducted interviews with purposefully selected nursing managers at MP Shah Hospital within a period of one month. Documentation of the interview will be done in written form using the note-taking technique, as well as in audio form using a tape recorder. The audio information was transcribed for analysis.

### 3.9 Data Analysis

Descriptive statistics were used to analyse quantitative data collected using the questionnaires. Analysis of the data was done in line with research questions and objectives. The findings were presented in tables and graphs to show how the dependent and the independent variables relate with each other. Qualitative data collected from interviewing nurse managers was transcribed then grouped into meaningful analytical units. Grouping of the units into various categories was then done and coded for content analysis. Steps followed in qualitative analysis are: (1) preliminary exploration of the data by reading the transcripts; (2) coding the data through segmentation and text labelling; (3) use of codes to develop themes and aggregate same codes together; (4) connect and interrelate themes; and (5) construct a narrative (Creswell, 2002).

### 3.10 Ethical Issues

The research study adhered to all the ethical issues required in conducting a research study. The study sought permission from the management of the organization to undertake the research in the organization and all activities pertaining the study was disclosed to the organization top management staff and all other participants of the research activity. The main intention for the study was to fulfill academic requirements and therefore all the information that was provided was kept private and confidential and was not exposed to any other party apart from the management of the university and the hospital. The study also obtained a letter of permission from the university which acted as an evidence for the intention and purpose of the study.

### 3.11 Conclusion

Finally, the researcher proceeded to summarise and interpret quantitative results, as well as qualitative results. The researcher discussed the extent to which and in what ways the qualitative results helped to explain the quantitative results.

# CHAPTER FOUR

# DATA ANALYSIS, PRESENTATION, INTERPRETATION AND DISCUSSION

## 4.1 Introduction

In this chapter, data analysis, presentation, interpretation, and discussion of findings from data collected from the field are discussed. Specifically, the chapter covers the general information of the respondents, and findings based on study's objectives. To facilitate discussion of the research findings, the study computed both descriptive and inferential statistics. The study aimed to collect data from 90 nurses using questionnaires and 6 nurse managers using interview guides. The study was able to interview all the nurse managers and therefore attained a response rate of 100%. On the other hand not all nurses issued with questionnaires dully filled and returned their questionnaires since the researcher was able to receive back only 76 of them; this translated to a response rate of 84.4%. According to Mugenda and Mugenda (2003), a response rate of 50% and above is considered suitable for analysis and drawing inference and that the rate is even excellent if its 70% and above. Therefore based on Mugenda's assertion, our response rate was considered excellent.

## 4.2 Reliability Analysis

The study conducted a pilot test with the aim of determining the reliability of the questionnaire and test-retest reliability measure was applied. The study determined the reliability of the measures using Cronbach alpha where the acceptable threshold value for alpha was 0.7. According to Gliem and Gliem (2003) acceptable threshold alpha value is 0.7. From the findings presented in Table 4.1, forms of interpersonal communication had Cronbach alpha value of 0.851, patterns of interpersonal communication had 0.873, communication skills competence had 0.865, hindrances to effective interpersonal

communication had 0.852, and employee performance had 0.874. The findings show that all the variables had Cronbach alpha value greater than the selected threshold value of 0.7 hence it was concluded that all measures of the variables were reliable and suitable to be used in the study.

**Table 4.1: Reliability Analysis**

| Scale | Cronbach's Alpha | Number of Items |
|---|---|---|
| Forms of interpersonal communication | 0.851 | 11 |
| Patterns of interpersonal communication | 0.873 | 5 |
| Communication skills competence | 0.865 | 6 |
| Hindrances to effective interpersonal communication | 0.852 | 6 |
| Employee performance | 0.874 | 7 |

### 4.3 Demographic Information

In this section the study presents the findings on general information of the participants used in the study.

#### 4.3.1 Respondents Length Of Service In The Organization

Respondents were requested to indicate the length of time they have served in their organization. The results were as presented in Figure 4.1.

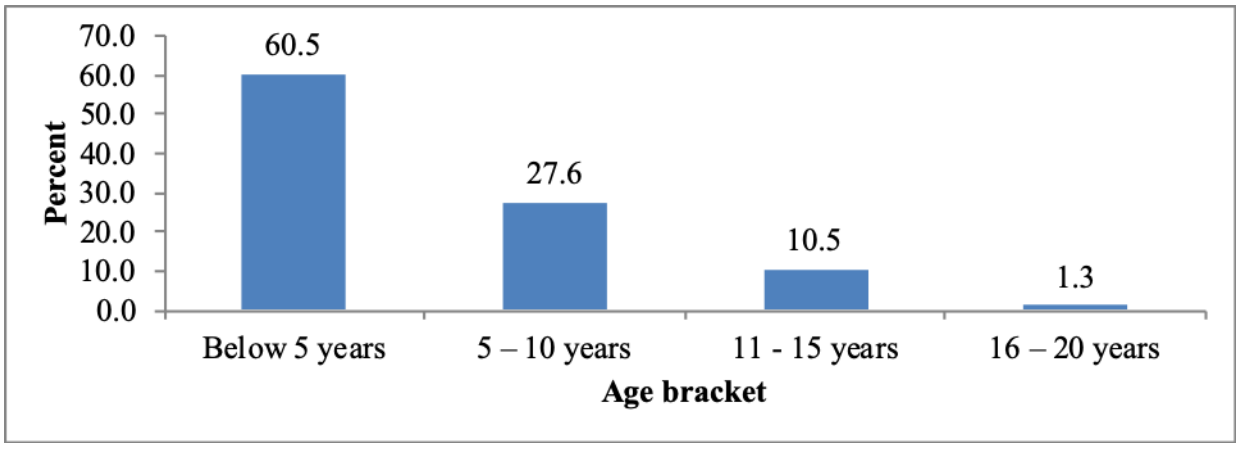


**Figure 4.1: Respondents Length of Service in the Organization**

The findings show that 46(60.5%) of the nurses had served in their organization for less than 5 years, 21(27.6%) for 5 to 10 years, 8(10.5%) for a period of 11 to 15 years and only 1(1.3%) had served for a period of 10 to 20 years. The findings show a clear indication that majority of the nurses used in the study had served in the organization for less than 5 years this is as shown by 46(60.5%) of the respondents. Very few nurses had served for longer period of time.

From the interviewed nurse managers (n=6) it was established that 4(66.7%) of them had worked in the organization for more than 14 years while the other 2(33.3%) had worked for more than 5 years. This is an indication that nurse managers in the private hospitals in Nairobi County had worked in the organization longer than the nurses in middle and low level management positions.

### 4.3.2 Age Category of the Respondents

The respondents were requested to indicate their age category. The results were as shown in Figure 4.2.

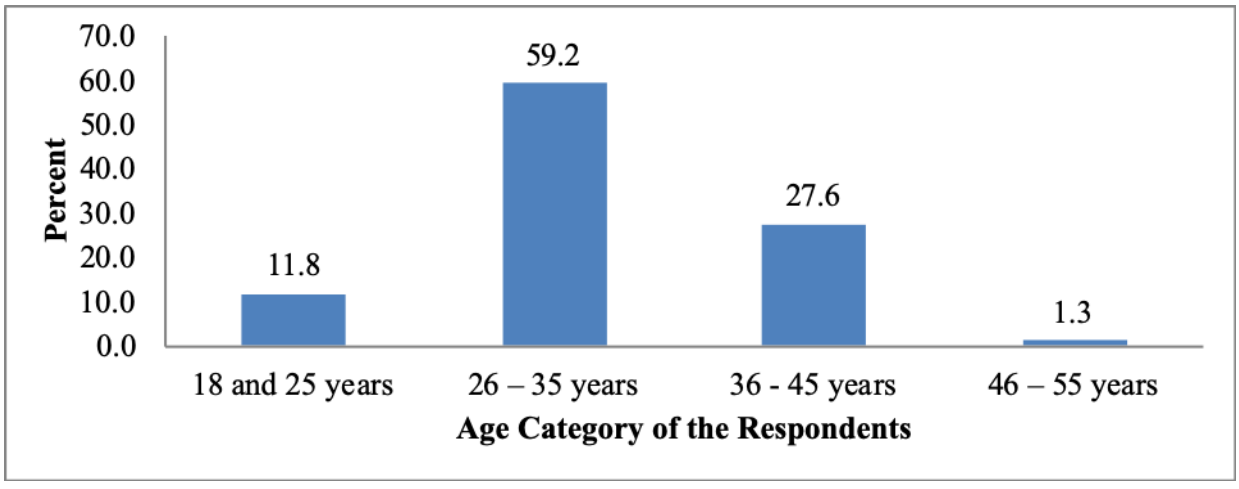



**Figure 4.2: Age of the Respondents**

From the findings presented in Figure 4.2 majority 45(59.2%) of the respondents used in the study were aged 26 to 35 years, 21(27.6%) were aged 36 to 45 years, 9(11.8%) were aged 18 to 25 years while only 1(1.3%) of the nurses were aged 46 to 55 years. From the findings it is evident that most of the nurses are still young (26-35 years), very few nurses are old (46-55 years) as shown by 1(1.3%) of the respondents.

From the nurse managers (n=6) that were interviewed 5(83.3%) indicated that they were aged above 40 years while only 1(16.7%) was aged between 35 and 40 years. This is an indication that nurses in management positions are older compared to nurses in the middle and low management levels in the private hospitals in Nairobi County.

### 4.3.3 Respondents Highest Level of Education

Respondents were requested to indicate their highest level of education. The results were as presented in Figure 4.3.

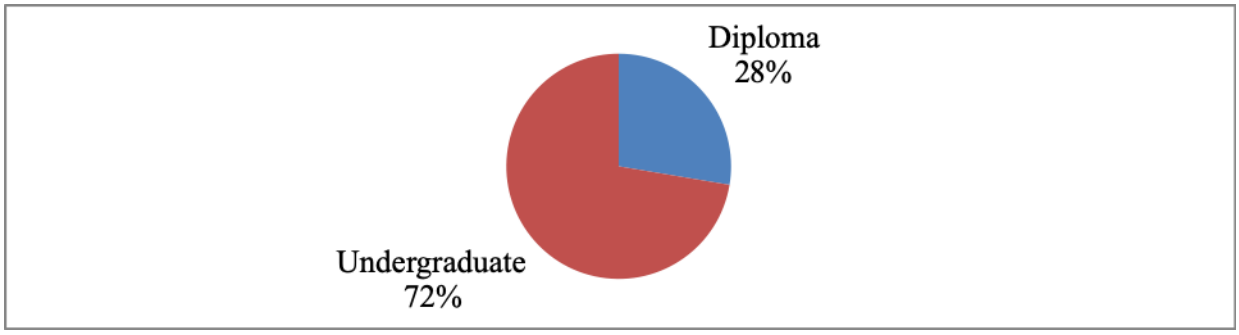



**Figure 4.3: Respondents Highest Level of Education**

The findings show that majority (72%) of the nurses had attained undergraduate as their highest level of education while 28% had diploma as their highest educational level. This is an indication that the nurses had acquired skills at different educational level that enabled them to perform their roles in the organization.

From interviews with nurse managers (n=6) it was established that 3(50%) had post graduate level of education, 2(33%) held diploma educational level and 1(17%) held undergraduate. This is an indication that nurse managers in the private hospitals in Nairobi County had various educational level and therefore it can be concluded that level of education does not determine the position held by a nurse in the organization.

### 4.3.4 Respondents Management Position

Respondents were requested to indicate their management level in the organization. The results were as shown in Figure 4.4.

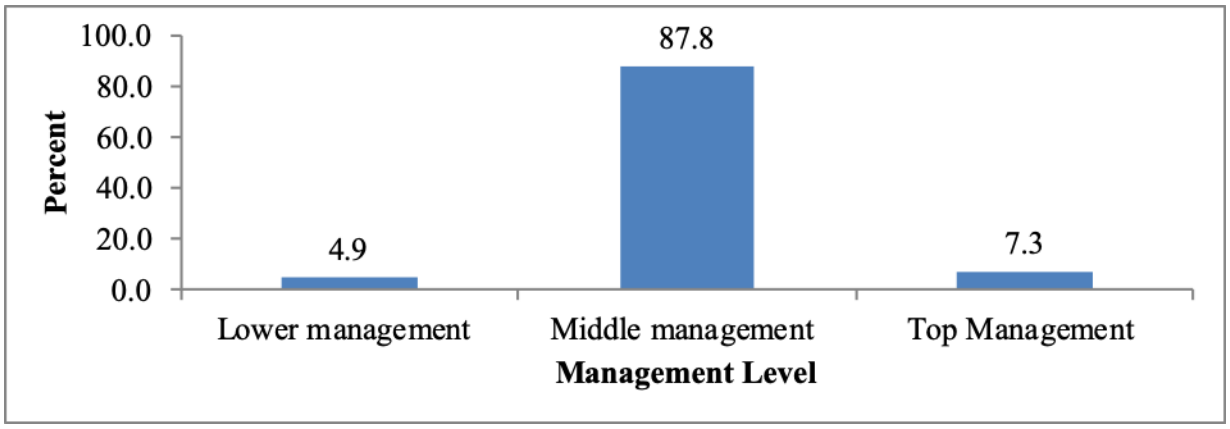



**Figure 4.4: Management Position of the Respondents in the Organization**

From the findings presented in Figure 4.4, majority (94.7%) of the respondents held middle management positions in the organization while 5.3% held lower management positions. 7.3% of the respondents were the 6 nurse managers who were interviewed. This is an indication that the study used respondents from different management positions in the organization and was therefore able to collect their opinion on the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi.

### 4.4 Forms of Interpersonal Communication

Respondents were requested to indicate their level of agreement with the following statements regarding the level of use of the following forms of interpersonal communication at their organization. They were requested to use Likert scale of 1=Always, **2**=Very Often, **3**=Sometimes, 4=Rarely, and 5=Never used. The results were as presented in Table 4.2.

**Table 4.2: Level of Use of Forms of Interpersonal Communication**

| | N | Min. | Max. | Mean | Std. Dev. |
|---|---|---|---|---|---|
| Oral communication media (face-to-face, phone, and meetings) | 76 | 1.00 | 3.00 | 1.7237 | .80992 |
| Written/print media (memo/letter, publications, and bulletin) | 76 | 1.00 | 4.00 | 1.7895 | .83771 |
| Electronic media (email, intranet, and social media) | 76 | 1.00 | 4.00 | 1.7895 | .99754 |

The means of 1-1.49 were interpreted as always, 1.5-2.49 were interpreted as very often, 2.5-3.49 as sometimes, 3.5-4.49 as rarely and 4.5-5 as never used. The results showed that oral communication media (face-to-face, phone, and meetings) was used very often as shown by a mean value of 1.7237 and so was written/print media (memo/letter, publications, and bulletin) as shown by a mean value of 1.7895. The findings also showed that electronic media (email, intranet, and social media) was used often by the nurses in private hospitals in Nairobi this was shown by a mean value of 1.7895.

These findings agree with Mangal and Mangal (2009) who according to them, the three common types of communication used in organization by managers are written, oral and non-verbal communication.

Manager Nurses in private hospitals do not use non-formal means of communication when communicating with nurses in their organizations. Manager Nurses in the private hospitals in Nairobi Count use formal means of communication when communicating with their juniors. Nurse Managers use interpersonal communication to communicate with nurses in their organization. To achieve this they usually use face to face verbal communication. Some of the avenues that facilitate face to face communication are meetings which in some

organization are held daily while in others they are held regularly. Nurses Managers also use nonverbal forms of communication when passing information to nurses in their organization. Some of these nonverbal communications are the use of gestures, eye gaze and sometimes they just make an appearance and the nurses get the message.

Respondents were requested to indicate the level of effectiveness of the communication medium in terms of delivering accurate, complete, clear, relevant, and timely information. They were requested to use a likert scale of 1=Very effective, 2=Effective, 3=Neutral , 4=Ineffective, and 5=Very ineffective. The results were as presented in Table 4.3.

**Table 4.3: Effectiveness of Communication Medium**

| | N | Min. | Max. | Mean | Std. Dev. |
|---|---|---|---|---|---|
| Oral communication media (face-to-face, phone, and meetings) | 76 | 1.00 | 5.00 | 1.9737 | 1.22173 |
| Written/print media (memo/letter, publications, and bulletin) | 76 | 1.00 | 3.00 | 1.4868 | .55362 |
| Electronic media (email, intranet, and social media) | 76 | 1.00 | 5.00 | 2.0000 | .80000 |

The means of 1-1.49 were interpreted as very effective, 1.5-2.49 were interpreted as effective, 2.5-3.49 as neutral, 3.5-4.49 as ineffective and 4.5-5 as very ineffective. The findings presented in table 4.3 showed that written/print media (memo/letter, publications, and bulletin) were very effective forms of communication as shown by a mean of 1.4868 while oral communication media (face-to-face, phone, and meetings) and electronic media (email, intranet, and social media) were seen to be effective as shown by mean value of 1.9737 and 2.0000 respectively.

The findings do not fully agree with those of Tabitha (2015) who conducted a study to analyze existing employee communication tools, their (tools) effectiveness and the communication challenges faced by employees at Teachers Service Commission and revealed that the most effective and convenient forms of communication used in the organization are circulars and memos.

Nurse Managers in the private hospitals consider their forms of communication to be effective. This is because they observed that nurses respect to a very great extent the information they pass to them. The nurses level of respect is measured by their level of response and their adherence to the instructions they are given and delivering as is expected of them.

Respondents were requested to indicate their level of agreement with the statements about forms of interpersonal communication in their organization using a likert scale of 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree and 5=Strongly Disagree. The results were as presented in Table 4.4.

**Table 4.4: Forms of Interpersonal Communication**

| | N | Min. | Max. | Mean(M) | Std. Dev. |
|---|---|---|---|---|---|
| Face to face communication with supervisors is valued at my organization. | 76 | 1.00 | 4.00 | 1.8684 | 1.07508 |
| My supervisor's nonverbal communication is important | 76 | 1.00 | 5.00 | 3.1842 | 1.44877 |
| Visual communication is valued at my organization | 76 | 1.00 | 4.00 | 2.6711 | .85461 |
| My supervisors listen to me when I speak | 76 | 1.00 | 4.00 | 2.0658 | 1.08733 |
| My supervisor maintains eye contact when they speak to me | 76 | 1.00 | 4.00 | 2.0000 | 1.10755 |

The study interpreted the mean values of 1-1.49 as strongly agree, 1.5-2.49 as agree, 2.5-3.49 as neutral, 3.5-4.49 as disagree and 4.5-5 as strongly disagree. The respondents were in agreement that face to face communication with supervisors is valued at their organization (M=1.8684), their supervisor maintains eye contact when they speak to them (M=2.0000), and that their supervisors listen to them when they speak (M=2.0658). On the other hand, nurses had neutral feelings regarding visual communication being valued at their organization (M= 2.6711) and about their supervisor's nonverbal communication being important (M=3.1842).

The findings agree with Kukule's (2012) explanation on various forms of communication where oral communication was explained to be verbal communication that tales place between two or more people in an institution. It's a form of face to face communication that's used most of the time to pass information in conferences, meetings, seminars, interviews, etc. This form of communication is rich in content since it involves high levels of interactions between the receiver and the sender.

### 4.5 Patterns of Interpersonal Communication

Respondents were requested to indicate their level of agreement with the statements about patterns of interpersonal communication at their organization. They were requested to use the likert scale of 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree and 5=Strongly Disagree. The results were as presented in Table 4.5.

**Table 4.5: Patterns of Interpersonal Communication**

| | N | Min. | Max. | Mean (M) | Std. Dev. |
|---|---|---|---|---|---|
| My suggestions, opinions, and thoughts listened to and acted on by my supervisor. | 76 | 1.00 | 5.00 | 2.7368 | 1.36008 |
| The communication structure of the organization is clear and well structured. | 76 | 1.00 | 4.00 | 2.3289 | .82281 |
| The organization encourages two-way communication between upper level and lower level employees | 76 | 1.00 | 5.00 | 2.7368 | .88496 |
| I counter my supervisors when they assign tasks to me | 76 | 1.00 | 5.00 | 2.6316 | 1.31496 |
| I listen my supervisor even when I know they are wrong | 76 | 1.00 | 5.00 | 2.7632 | 1.51322 |

The mean values of 1-1.49 were interpreted as strongly agree, 1.5-2.49 as agree, 2.5-3.49 as neutral, 3.5-4.49 as disagree and 4.5-5 as strongly disagree. From the findings, the respondents agreed that the communication structure of the organization is clear and well-structured as indicated by a mean value of 2.3289. The findings also showed that the respondents did not agree or disagree but rather held neutral feeling on the ideas that they counter their supervisors when they assign tasks to them (M=2.6316), that the organization encourages two-way communication between upper level and lower level employees (M=2.7368), that their suggestions, opinions, and thoughts listened to and acted on by their supervisor (M=2.7368) and on the idea that they listen to their supervisors even when they know they are wrong (M=2.7632).

The study findings concur with those of Sumeya (2016) who researched on effects of internal communication channels on employee performance at Help Leads to Hope (HLH) Somalia and revealed that downward communication significantly related with performance of employees. Furthermore, downward communication existing in the organization was found to be ineffective in improving performance of its employees. The study revealed that managers in the organization didn't share information adequately with their employees. The

study concluded that both downward and peer to peer communication had significant and positive association with employee performance.

Majority of the nurses communicate freely with their supervisors. This is because the organization has a clear and well-structured communication that facilitates two-way communication between upper level and lower level employees i.e. between managers and their juniors. Nurse Managers are able to receive feedback from nurses through various forms of communication. These include verbal and written communication. Some of the verbal communications include face to face communication. In some cases they receive information from nurses through emails and phone calls. In case there are professional errors and mistakes they encourage written forms of communication.

These findings agree with Walker (2017) a doctor in Psychology posits that in healthy symmetrical communications, the parties communicating mirror each other and one person's success gets celebrated, hence motivating the other person to work hard and be equally success full. Unhealthy symmetry is when the two parties are brutally competitive with each other and would even do unethical things to win.

### 4.6 Communication Skills Competence

Respondents were requested to indicate their level of agreement with statements about communication skills competence in their organization. They were requested to use the likert scale of 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree and 5=Strongly Disagree. The results were as presented in Table 4.6.

**Table 4.6: Communication Skills Competence**

| | N | Min. | Max. | Mean (M) | Std. Dev. |
|---|---|---|---|---|---|
| My supervisor is concerned about improving communication with employees | 76 | 1.00 | 4.00 | 2.2895 | .86125 |
| In my organization my superiors are frank and candid with employees | 76 | 1.00 | 4.00 | 2.6053 | .84977 |
| My organization respects peoples differences in terms of their culture, personality and education | 76 | 1.00 | 5.00 | 2.5921 | 1.03509 |
| In my organization we work as teams to solve issues, we collaborate and share information | 76 | 1.00 | 5.00 | 2.3947 | .96718 |
| Nurses can freely communicate with the nurse managers in my organization | 76 | 1.00 | 4.00 | 2.0921 | .98221 |
| Nurses in my organization have the ability to give their suggestions and opinions to managers on issues relating to work | 76 | 1.00 | 4.00 | 1.9737 | 1.05797 |

The mean values of 1-1.49 were interpreted as strongly agree, 1.5-2.49 as agree, 2.5-3.49 as neutral, 3.5-4.49 as disagree and 4.5-5 as strongly disagree. From the findings the respondents agreed that in their organization: nurses in have the ability to give their suggestions and opinions to managers on issues relating to work (M=1.9737), nurses can freely communicate with the nurse managers (M=2.0921), their supervisor is concerned about improving communication with employees (M=2.2895) and they work as teams to solve issues, they collaborate and share information (M=2.3947). The findings also showed that the respondents held neutral opinion regarding their organization respecting peoples differences in terms of their culture, personality and education (M=2.5921) and their superiors being frank and candid with employees (M=2.6053).

The findings concur with those of Tabitha (2015) who conducted a study to analyze the effectiveness of employee communication in public institutions in Nairobi with TSC as a case and revealed that effectiveness of communication was affected significantly by existing

communication of employees, effectiveness of communication by employees and challenges faced by employees during communication.

Nurses are able to make decisions concerning their work and once they do so, they communicate them to their managers/supervisors. Nurses communicate their decisions through written reports, emails, and daily meetings. In other cases they communicate them verbally through telephone calls or face to face. Nurse Managers consider their communication skill competence to range from good to excellent. They attributed their great communication skills to training programmes they attend. Most of the nurse managers attend training twice a year while other receive training quarterly.

### 4.7 Hindrance to Communication

Respondents were requested to indicate their level of agreement with statements about hindrances to interpersonal communication in their organization using Likert scale of 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree and 5=Strongly Disagree. The results were as presented in Table 4.7.

**Table 4.7: Hindrance to Communication**

| | N | Min. | Max. | Mean(M) | Std. Dev. |
|---|---|---|---|---|---|
| There are effective methods of feedback from employees in my organization | 76 | 1.00 | 5.00 | 2.7632 | 1.00490 |
| It's possible to address the hindrances to communication by analysing feedback from employees | 76 | 1.00 | 3.00 | 1.9079 | .43750 |
| Poor interpersonal communication that exist between managers and nurses causes nurses to be stressed | 76 | 1.00 | 5.00 | 2.0132 | 1.03915 |
| Employee feedback can be gathered by through direct contact with managers | 76 | 1.00 | 5.00 | 2.7763 | 1.44774 |
| I often can't do my job because of delay in getting information from my supervisors | 76 | 1.00 | 5.00 | 3.2632 | 1.22603 |
| Effective sharing of information among workers leads to improved performance of employees. | 76 | 1.00 | 5.00 | 1.7105 | .92110 |

The mean values of 1-1.49 were interpreted as strongly agree, 1.5-2.49 as agree, 2.5-3.49 as neutral, 3.5-4.49 as disagree and 4.5-5 as strongly disagree. The respondents agreed that effective sharing of information among workers leads to improved performance of employees (M=1.7105). They also agreed that it's possible to address the hindrances to communication by analyzing feedback from employees (M=1.9079), and that poor interpersonal communication that exist between managers and nurses causes nurses to be stressed (M=2.0132). The findings also showed that the respondents neither agreed nor disagreed with the idea that there is effective method of feedback from employees in their organization (M=2.7632) neither did they agree with the idea that employee feedback can be gathered best through direct contact with managers (M=2.7763), they further held neutral opinion regarding the idea that they often can't do their job because of delay in getting information from their supervisors (M=3.2632).

The findings concur with those of Tabitha (2015) that the main challenges that employees faced in their communication was lack of direct channel of communication from employee to their seniors. The study recommended inclusion of face-to-face communication in passing of information and use of telephone calls as effective channels of organizational communication.

There are several hindrances to effective communication between nurse managers and nurses. One of the hindrances is wrong perception of information by both parties and convergence of or passing of information with wrong motives. Nurse Managers and nurses also have poor interpersonal relationships i.e. poor manager-staff relationship and therefore affecting communication. Change in technology and use of poor technology are some of the

technological factors that affect effectiveness of communication in private hospitals in Nairobi.

The structure of the organization also poses a barrier to effective communication; this is because the structure favours one way communication i.e. communication from nurse managers to the nurses and therefore the nurses lack opportunities to communicate and open up. Because of these poor communication tools, there is the challenge of timely feedback. There are psychological barriers that prevent nurses from freely communicating because they fear that if they do so they will be victimized because there is no confidentiality policy in place. Employees varied educational level poses another challenge in effectiveness of communication because most learned nurses develop bad attitude to the less earned ones.

The findings agree with Dowd (2018) who explains that if the receiver and the sender of a message speak a different language, either figuratively or literally, it could result to a miss in the interpersonal communication. It is possible to find not all members in an organization comprehend slang, jargon, acronyms and other terminologies used in the sector. There are those employees who might decide to act on their own guessing and assumptions on what the message meant instead of asking for clarifications. In addition misunderstanding can arise from employees who don't share the same primary language. Because of message and body language misinterpretation, others might be hurt emotionally.

### 4.8 Employee Performance

Respondents were requested to rate their performance in their organisation. The results were as shown in Figure 4.5.

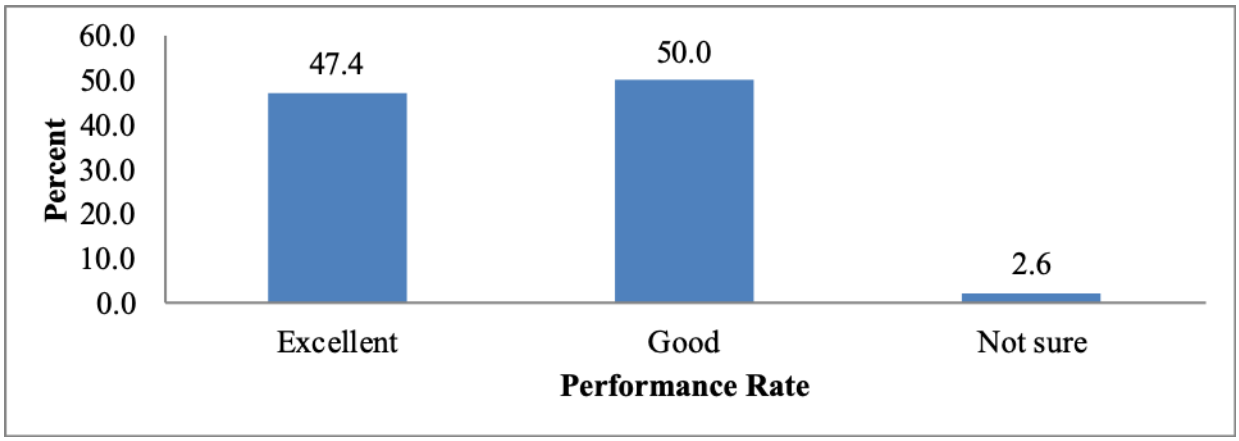



**Figure 4.5: Rate of Employee Performance**

The results showed that 50% of the nurses considered their rate performance as good, 47.3% rated their as excellent while 2.6% were not sure of their rate of performance. From the fining it is an indication that nurses consider their rate of performance in the organization to rate from good to excellent. This was because they considered themselves to be well trained in their professional field and were therefore equipped with knowledge and skills for their profession. Some of the nurses were awarded with awards like the nurse of the month because they worked tirelessly to achieve their objectives.

Nurses also received a lot of positive feedback from patient and clients regarding the services they provided and this made them consider their performance to be good. Nurses also try to give their best in service delivery; this is made possible by the organization providing them with conducive working environment and support from their supervisors and fellow employees. The employees are therefore able to attain organizational goal and improve the performance of the organization. When the organization realized that an employee is working tirelessly to meet their objectives, they appraise them and entrusts them with more challenging duties. Other nurses were newly employees and therefore had not undertaken any performance appraisal tests making it difficult to rate their performance.

Respondents were requested to indicate their level of agreement with the statements about employee performance in their organization using a likert scale of 1=Strongly Agree, 2=Agree, 3=Neutral, 4=Disagree and 5=Strongly Disagree. The results were as presented in Table 4.8.

**Table 4.8: Employee Performance**

| | N | Min. | Max. | Mean(M) | Std. Dev. |
|---|---|---|---|---|---|
| Performance of employees in my organization is well because managers and employees share information | 76 | 1.00 | 5.00 | 2.7368 | .95734 |
| I am satisfied with the level at which my supervisor shares important information about my duties with me | 76 | 1.00 | 5.00 | 2.7895 | 1.26824 |
| I send information to my supervisors not only reports but also new ideas and suggestions | 76 | 1.00 | 4.00 | 2.4342 | 1.09952 |
| I receive good responses to the information I sent to upper level employees | 76 | 1.00 | 4.00 | 2.6447 | .96200 |
| In my organization employees can approach managers for help and they work collaboratively. | 76 | 1.00 | 5.00 | 2.5526 | .77278 |
| Employees in my organization adhere to organizational policies | 76 | 1.00 | 5.00 | 2.0132 | .73925 |
| Employees in my organization are frequently absent from work | 76 | 1.00 | 5.00 | 4.1867 | .91080 |

The mean values of 1-1.49 were interpreted as strongly agree, 1.5-2.49 as agree, 2.5-3.49 as neutral, 3.5-4.49 as disagree and 4.5-5 as strongly disagree. The respondents agreed that in their organization employees adhere to organizational policies (M=2.0132) and that they send information to their supervisors not only reports but also new ideas and suggestions (M=2.4342). The results also showed that the respondents showed neutrality regarding the ideas that in their organization; employees can approach managers for help and they work collaboratively (M=2.5526), they receive good responses to the information they sent to upper level employees (M=2.6447), performance of employees in my organization is well because managers and employees share information (M=2.7368) and that employees are

satisfied with the level at which their supervisor shares important information about their duties with them (M=2.7895). Finally, it was revealed that respondents disagreed that they are frequently absent from work (M=4.1867).

Nurse Managers ensure that nurses adhere to organizational goals by sending them memos, reminders and providing them with regular training programs and refresher courses. Holding frequent meeting also helps nurses to continue adhering to the policies of the organization; this is because in these meeting they are reminded and warned of the things they are doing wrong and how they can rectify them. Daily nurses also hold meeting when they are handing shifts and they are reminded of what is expected of them. Regularly nurse managers conduct skill checking of the nurses and also question them. Teamwork is highly valued in hospitals because it ensures good service delivery. Teamwork also increases employee synergy and therefore reducing the level of challenges that relate with poor employee relations. Through teamwork, tasks are performed better and efficiently and also work is made easy. Generally, teamwork is advantageous because it helps the organization to achieve its objectives.

### 4.9 Correlation Analysis

The study computed Pearson correlation analysis with the aim of establishing the relationship existing between the response and the predictor variables. Correlation coefficient values ranges between -1 and +1. The values of ±1 suggest that the variables being considered are perfectly related. If the correlation values $r = \pm 0.1$ to $\pm 0.29$ the relationship is considered small, when $r = \pm 0.3$ to $\pm 0.49$ the relationship is considered medium and when $r = \pm 0.5$ and above, the relationship will be considered strong. The study selected a significance level of 0.01. I.e. correlation is significant at the 0.01 level (2-Tailed).

**Table 4.9: Correlations**

| | | Employee Performance | Forms Of Interpersonal Communication | Patterns Of Interpersonal Communication | Communication Skills Competence | Hindrances To Communication |
|---|---|---|---|---|---|---|
| **Employee Performance** | Pearson Correlation | 1 | | | | |
| | Sig. (2-Tailed) | | | | | |
| | N | 76 | | | | |
| **Forms Of Interpersonal Communication** | Pearson Correlation | .646** | 1 | | | |
| | Sig. (2-Tailed) | .008 | | | | |
| | N | 76 | 76 | | | |
| **Patterns Of Interpersonal Communication** | Pearson Correlation | .665** | .368** | 1 | | |
| | Sig. (2-Tailed) | .005 | .001 | | | |
| | N | 76 | 76 | 76 | | |
| **Communication Skills Competence** | Pearson Correlation | .612** | .398** | .423** | 1 | |
| | Sig. (2-Tailed) | .000 | .000 | .000 | | |
| | N | 76 | 76 | 76 | 76 | |
| **Hindrances To Communication** | Pearson Correlation | -.603** | .354** | .515** | .393** | 1 |
| | Sig. (2-Tailed) | .002 | .002 | .000 | .000 | |
| | N | 76 | 76 | 76 | 76 | 76 |

**. Correlation Is Significant At The 0.01 Level (2-Tailed).

The findings revealed that forms of interpersonal communication and nurses' performance in private hospitals in Nairobi had strong, positive and significant relationship (r=0.646, p=0.008). Patterns of interpersonal communication was found to have strong, positive and significant relationship with nurses' performance in private hospitals in Nairobi (r=0.665, p=0.005). The findings further revealed that communication skills competence had strong, positive and significant relationship with nurses' performance in private hospitals in Nairobi (r=0.612, p=0.000). Finally it was found that hindrances to effective interpersonal communication had strong, significant but negative relationship with nurses' performance in

private hospitals in Nairobi (r=-0.665, p=0.002). The results show that the independent variables (forms of interpersonal communication, patterns of interpersonal communication, communication skills competence, and hindrances to effective interpersonal communication) had strong and significant relationship with nurses' performance in private hospitals in Nairobi.

### 4.10 Multiple Regression Analysis

The study computed multiple regression analysis with the aim of examining the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi. The findings were presented in three tables.

#### 4.10.1 Model Summary

Model summary is used in analysing the variation of the dependent variable because of changes in the predictor variables. In this study, variation of nurses' performance in private hospitals in Nairobi as a result of changes in forms of interpersonal communication, patterns of interpersonal communication, communication skills competence, and hindrances to effective interpersonal communication was examined.

**Table 4.10: Model Summary**

| Model | R | R Square | Adjusted R Square | Std. Error of the Estimate |
|---|---|---|---|---|
| 1 | .710[a] | .517 | .504 | .39978 |

a. Predictors: (Constant), hindrances to communication, forms of interpersonal communication, communication skills competence, patterns of interpersonal communication

The value of adjusted $R^2$ (0.504) suggest that 50.4% variation in nurses' performance in private hospitals in Nairobi can be attributed to changes in forms of interpersonal communication, patterns of interpersonal communication, communication skills competence,

and hindrances to effective interpersonal communication was examined. The remaining 49.6% suggest that there are other factors that affect nurses' performance in private hospitals in Nairobi that were not part of this model. R is correlation coefficient, it show the strength of relationship between the study variables. The relationship was considered small if r≤±0.29, it's medium if r≤±0.49, and if r≥±0.5 it's strong. The study variables were strongly related as shown by R value is 0.710.

### 4.10.2 Analysis of Variance

Analysis of variance is used in determining whether the data used in the study is significant. 0.05was the selected level of significance used in this study.

**Table 4.11: ANOVA[a]**

| | Model | Sum of Squares | df | Mean Square | F | Sig. |
|---|---|---|---|---|---|---|
| 1 | Regression | 6.713 | 4 | 1.678 | 10.501 | .000[b] |
| | Residual | 11.348 | 71 | .160 | | |
| | **Total** | **18.061** | **75** | | | |

a. Dependent Variable: employee performance
b. Predictors: (Constant), hindrances to communication, forms of interpersonal communication, communication skills competence, patterns of interpersonal communication

If the F-calculated value is greater than the F-critical value, obtained from the F-distribution table, then the dependent variable is considered to have significant influence on the independent variable. On the other hand, the relationship is considered to be significant if the p value obtained from the ANOVA table is less or equal to (≤) 0.05. From the findings, the F-calculated value was greater than the F-critical value (10.501>2.501) and the p-value was 0.000 which was less than 0.05. This was an indication that forms of interpersonal communication, patterns of interpersonal communication, communication skills competence,

and hindrances to effective interpersonal communication had a significant influence on nurses' performance in private hospitals in Nairobi.

### 4.10.3 Coefficients of the Study Variables

**Table 4.12: Coefficients[a]**

| Model | | Unstandardized Coefficients | | Standardized Coefficients | t | Sig. |
|---|---|---|---|---|---|---|
| | | B | Std. Error | Beta | | |
| 1 | (Constant) | 0.713 | 0.171 | | 4.170 | 0.000 |
| | Forms of Interpersonal Communication | 0.148 | 0.042 | 0.141 | 3.524 | 0.023 |
| | Patterns of Interpersonal Communication | 0.337 | 0.076 | 0.515 | 4.434 | 0.001 |
| | Communication Skills Competence | 0.213 | 0.062 | 0.254 | 3.435 | 0.014 |
| | Hindrances To Communication | -0.212 | 0.049 | -0.192 | -4.327 | 0.017 |

a. Dependent Variable: employee performance

From Table 4.12 above the following regression equation was extracted:

$$Y = 0.713 + 0.148 X_1 + 0.337 X_2 + 0.213 X_3 - 0.212 X_4 + \varepsilon$$

Where Y is Nurses performance, $X_1$ is forms of interpersonal communication, $X_2$ is patterns of interpersonal communication, $X_3$ is communication skills competence, and $X_4$ is hindrances to effective interpersonal communication.

The above equation reveals that holding the variables, forms of interpersonal communication, patterns of interpersonal communication, communication skills competence, and hindrances to effective interpersonal communication to a constant zero, they will significantly influence nurses' performance in private hospitals in Nairobi by 0.713 units.

Forms of interpersonal communication is statistically significant in explaining nurses' performance in private hospitals in Nairobi ($\beta = 0.148$, $P = 0.023$). This is an indication that

forms of interpersonal communication had a positive relationship with nurses' performance in private hospitals in Nairobi. This shows that a unit increase in forms of interpersonal communication will result to an increase in nurses' performance in private hospitals in Nairobi by 0.148 units.

Patterns of interpersonal communication is statistically significant in explaining nurses' performance in private hospitals in Nairobi ($\beta = 0.337$, $P = 0.001$). This is an indication that patterns of interpersonal communication had a positive relationship with nurses' performance in private hospitals in Nairobi. This shows that a unit increase in patterns of interpersonal communication will result to an increase in nurses' performance in private hospitals in Nairobi by 0.337 units.

Communication skills competence is statistically significant in explaining nurses' performance in private hospitals in Nairobi ($\beta = 0.213$, $P = 0.014$). This is an indication that communication skills competence had a positive relationship with nurses' performance in private hospitals in Nairobi. This shows that a unit increase in communication skills competence will result to an increase in nurses' performance in private hospitals in Nairobi by 0.213 units.

Hindrances to effective interpersonal communication is statistically significant in explaining nurses' performance in private hospitals in Nairobi ($\beta = -0.212$, $P = 0.017$). This is an indication that hindrances to effective interpersonal communication had a negative relationship with nurses' performance in private hospitals in Nairobi. This shows that a unit increase in hindrances to effective interpersonal communication will result to a decrease in nurses' performance in private hospitals in Nairobi by 0.212 units.

# CHAPTER FIVE

# SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

## 5.1 Introduction

This chapter presented summary of key finding, conclusions and recommendations made there-to. Objectives of the study were addressed by conclusion and recommendations made. The main objective of the study was to examine the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi

## 5.2 Summary of the Findings

In this section the study presents the summary of the findings based on the objectives of the study which were: To establish the forms of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi; To examine the patterns of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi; To evaluate communication skills competence of nurse managers and its influence on nurses' performance in private hospitals in Nairobi and to highlight the hindrances to communication by nurse managers and their influence on nurses' performance in private hospitals in Nairobi.

### 5.2.1 Forms of Interpersonal Communication

The study found out that oral communication media (face-to-face, phone, and meetings) was used very often and so was written/print media (memo/letter, publications, and bulletin). The findings also showed that electronic media (email, intranet, and social media) was used but its use was not very often. These findings agree with Mangal and Mangal (2009) who according to them, the three common types of communication used in organization by managers are written, oral and non-verbal communication.

The study further revealed that out of the forms of communication used in the organization, written/print media (memo/letter, publications, and bulletin) were very effective while oral communication media (face-to-face, phone, and meetings) and electronic media (email, intranet, and social media) were seen to be effective.

The findings do not fully agree with those of Tabitha (2015) who conducted a study to analyze existing employee communication tools; to evaluate the effectiveness of employee communication tools; and to investigate the challenges facing employee communication at Teachers Service Commission and found that employees found circulars and memos more convenient and effective modes of communication compared to the other modes.

The study also revealed that Nurses Managers in private hospitals do not use non formal means of communication when communicating with nurses in their organizations. Manager Nurses in the private hospitals in Nairobi County use formal means of communication when communicating with their juniors. Nurse Managers use interpersonal communication to communicate with nurses in their organization. To achieve this they usually use face to face verbal communication. Some of the avenues that facilitate face to face communication are meetings which in some organization are held daily while in others they are held regularly. Nurses Managers also use nonverbal forms of communication when passing information to nurses in their organization. Some of these nonverbal communications are the use of gestures, eye gaze and sometimes they just make an appearance and the nurses get the message.

Regarding interpersonal relations between nurses and their managers it was established that face to face communication with supervisors is valued, supervisor maintains eye contact when they speak their juniors, and that supervisors listen to employees when they speak. On

the other hand, nurses had neutral feelings regarding visual communication being valued at their organization and about their supervisor's nonverbal communication being important. In addition, the study found that Nurse Managers in the private hospitals consider their forms of communication to be effective. This is because they observed that nurses respect to a very great extent the information they pass to them. The nurses level of respect is measured by their level of response and their adherence to the instructions they are given and delivering as is expected of them.

The findings agree with Kukule's (2012) explanation on various forms of communication where oral communication was explained to be verbal communication that tales place between two or more people in an institution. It's a form of face to face communication that's used most of the time to pass information in conferences, meetings, seminars, interviews, etc. This form of communication is rich in content since it involves high levels of interactions between the receiver and the sender.

### 5.2.2 Patterns of Interpersonal Communication

The study found that the communication structure of the organization is clear and well-structured as indicated. The findings also showed that the respondents held neutral feelings on the ideas that they counter their supervisors when they assign tasks to them, that the organization encourages two-way communication between upper level and lower level employees, that their suggestions, opinions, and thoughts are listened to and acted on by their supervisors and on the idea that they listen to their supervisors even when they know they are wrong. These findings agree with Walker (2017) a doctor in Psychology posits that in healthy symmetrical communications, the parties communicating mirror each other and one person's success gets celebrated, hence motivating the other person to work hard and be

equally success full. Unhealthy symmetry is when the two parties are brutally competitive with each other and would even do unethical things to win.

The study also found that majority of the nurses communicates freely with their supervisors. This is because the organization has a clear and well-structured communication that facilitates two-way communication between upper level and lower level employees i.e. between managers and their juniors. Nurse Managers are able to receive feedback from nurses through various forms of communication. These include verbal and written communication. Some of the verbal communications include face to face communication. In some cases they receive information from nurses through emails and phone calls. In case there are professional errors and mistakes they encourage written forms of communication. The study findings concur with those of Sumeya (2016) who researched on effects of internal communication channels on employee performance at Help Leads to Hope (HLH) Somalia and revealed that downward communication significantly related with performance of employees.

### 5.2.3 Communication Skills Competence

The study revealed that respondents agreed that in their organization: nurses are able to provide opinions and suggestion to nurse managers on work related issues, nurses can freely communicate with the nurse managers, their supervisor is concerned about improving communication with employees and that employees are able to share information, collaborate and solve problems in. The findings also showed that the respondents held neutral opinion regarding their organization respecting individual differences (personality, culture, education) and their superiors being frank and candid with employees.

Furthermore, nurses are able to make decisions concerning their work and once they do so, they communicate them to their managers/supervisors. Nurses communicate their decisions through written reports, emails, and daily meetings. In other cases they communicate them verbally through telephone calls or face to face. Nurse Managers consider their communication skill competence to range from good to excellent. They attributed their great communication skills to training programmes they attend. Most of the nurse managers attend training twice a year while others receive training quarterly. The findings concur with those of Tabitha (2015) who conducted a study to analyze the effectiveness of employee communication in public institutions in Nairobi with TSC as a case and revealed that effectiveness of communication was affected significantly by existing communication of employees, effectiveness of communication by employees and challenges faced by employees during communication.

### 5.2.4 Hindrance to Communication

The study found that effective information sharing amongst employees result to better employee performance, communication hindrances at their hospital could be addressed by analysing employee and that poor interpersonal communication between nurse managers and nurses is a source of stress for nurses. However, respondent were neutral on that the current methods of feedback from employees at their hospitals are effective, feedback from employees is best gathered by direct contact with supervisors and that they often can't do their job because of delay in getting information from their supervisors. The study established that there were hindrances to effective communication between nurse managers and nurses, they include; wrong perception of information by both parties and convergence of or passing of information with wrong motives, poor interpersonal relationships i.e. poor

manager-staff relationship. Change in technology and use of poor technology are the technological factors that affect effectiveness of communication in private hospitals in Nairobi.

The findings concur with those of Tabitha (2015) that the main challenges that employees faced in their communication was lack of direct channel of communication from employee to their seniors. The study recommended inclusion of face-to-face communication in passing of information and use of telephone calls as effective channels of organizational communication.

The study revealed that structure of the organization poses a barrier to effective communication; this is because the structure favours one-way communication i.e. communication from nurse managers to the nurses and therefore nurses lack opportunities to communicate and open up. Because of these poor communication tools, there is the challenge of timely feedback. There are psychological barriers that prevent nurses from freely communicating because of the fear that if they do so they will be victimized because there is no confidentiality policy. Employees' varied educational level poses another challenge because most learned nurses develop bad attitude to the less learned ones. The findings agree with Dowd (2018) who explains that if the receiver and the sender of a message speak a different language, either figuratively or literally, it could result to a miss in the interpersonal communication.

The findings of this study can be further understood through the Social Penetration Theory.

Altman and Taylor (1973) indicated that there is a close link between steady change in communication and relationship development. Generally, any relationship begins with exchanging superficial information and gradually advances to conversations that have more meaning. Intimate relationship can only be developed by increasing breadth and depth of conversations. Breadth means widening the topics being discussed and depth is the significance of the topics to an individual. This is evident in the findings where at first the nurses peel the first layer as they interact with the nurse managers, but with time their relationship deepen to an extent of being allowed to make some decisions on their own.

## 5.3 Conclusion

The first research question was: *What is the influence of interpersonal communication used by nurse managers on nurses' performance in private hospitals in Nairobi?*

The study found that forms of interpersonal communication are statistically significant in explaining nurses' performance in private hospitals in Nairobi. Furthermore, forms of interpersonal communication positively relate with nurses' performance in private hospitals in Nairobi. The study therefore concludes that a unit increase in forms of interpersonal communication will result to an increase in nurses' performance in private hospitals in Nairobi.

The second research question was: *What are the patterns of interpersonal communication used by nurse managers and their influence on nurses' performance in private hospitals in Nairobi?*

The findings reveled that patterns of interpersonal communication is statistically significant in explaining nurses' performance in private hospitals in Nairobi. The findings also showed that is patterns of interpersonal communication had a positive relationship with nurses' performance in private hospitals in Nairobi. Therefore, the study concludes that a unit increase in patterns of interpersonal communication will result to an increase in nurses' performance in private hospitals in Nairobi.

The third research question was: *How does the level of communication skills competence of nurse managers influence nurses' performance in private hospitals in Nairobi?*

From the finding, it was established that Communication skills competence is statistically significant in explaining nurses' performance in private hospitals in Nairobi. The study further found that communication skills competence had a positive relationship with nurses' performance in private hospitals in Nairobi. From the findings, the study concludes that a unit increase in communication skills competence will result to an increase in nurses' performance in private hospitals in Nairobi.

Finally the study sought to establish: *What are the hindrances to communication by nurse managers on nurses' performance in private hospitals in Nairobi?*

The study found out that Hindrances to effective interpersonal communication are statistically significant in explaining nurses' performance in private hospitals in Nairobi. The study further established that hindrances to effective interpersonal communication had a negative relationship with nurses' performance in private hospitals in Nairobi. Based on the findings, the study concludes that a unit increase in hindrances to effective interpersonal

communication will result to a decrease in nurses' performance in private hospitals in Nairobi.

### 5.4 Recommendations

It was found that increasing forms and patterns of communication will lead to an increase in performance of nurses in private hospitals. The study therefore recommends that management of the hospitals to have an organizational structure that favors all patterns of communication. This will ensure that nurses are able to communicate with their supervisors freely and be heard. Nurses should be encouraged on communicating their mind, this will ensure sufficient information is available and will aid in decision making and therefore improving performance

Nurse Managers should be trained more often on communication skill. Improves communication skills by managers will ensure that they are able to deal and handle those employees who have different personalities and attitudes and therefore improving work environment creating cohesion between the nurses and their managers.

The technology used in the organization might be a challenge to effective communication; it is therefore the responsibility of the management of the organization to ensure that the technology used is up to date and is user friendly. Some of the nurse's fear communicating their mind because they fear they will be victimized, it is therefore important for the hospitals management to ensure that information confidentiality and anonymity is maintained.

Hospitals management should conduct an in-depth research on the challenges faced by their employees and come up with solutions for mitigating them and therefore create a favorable working environment for its employees. This will improve their morale in work and therefore increase organizational and employee performance.

## 5.5 Suggestions for Further Research

The main objective of this study was to examine the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi. The study only focused on MP Shah Private Hospital; the study recommends replication of the research study in other private hospitals in Nairobi. Further research can be conducted in public hospitals within Nairobi to facilitate comparison of the research findings. The study also recommends further research study to be conducted on interpersonal communication of maternal health care managers and performance of maternal health care doctors in referral hospitals in the country.

## REFERENCES


Ada, N., Alver, İ. ve A. Fatma, (2008). "Örgütsel İletişimin Örgütsel Bağlılık Üzerine Etkisi: Manisa Organize Sanayi Bölgesinde Yer Alan ve İmalat Sektörü Çalışanları Üzerinde Yapılan Bir Araştırma", *Ege Akademik Bakış / Ege Academic Review* 8 (2): 487-518

Altman, I., & Taylor, D. A. (1973). *Social penetration: The development of interpersonal relationships*. New York: Holt, Rinehart & Winston.

Annual Career-Builder Survey (2017).Conducted by Harris Poll on behalf of Care-Builder, 2017.

Association to Advance Collegiate Schools of Business (AACSB) International. (2010). Eligibility procedures and accreditation standards for business accreditation

Barrett, D. J. (2002). Change Communication: Using Strategic Employee Communication to Facilitate Major Change. *Corporate Communications: An International Journal*, 7(4), 219-231. Retrieved from http://dx.doi.org/10.1108/13563280210449804

Borman, W. C. & Motowidlo, S. J. (1997). Task performance and contextual performance: The meaning for personnel selection research. *Human Performance*, 10(2): 99-109.

Brase, C. H. & Brase, C. P. (2009). *Understandable Statistics: Concepts and methods* (9th ed.). New York: Houghton Mifflin Company.

Brun, J. P. (2010). *Missing pieces: 7 ways to improve employee well-being and Organizational effectiveness*. New York, NY: Palgrave Macmillan.

Businesstopia (2018). Semantic Hinderances to Communication. Retrieved from: https://www.businesstopia.net/communication/semantic-hinderances-communication

Busolo, D. M. (2013). Assessing Sustainability of Rural Community Radio in Kenya Case Study of Radio Mang'elete. Master's Thesis, University of Nairobi.

Chan, Z. C. (2012). Role-playing in the problem-based learning class. Nurse Education in Practice, 12(1), 21-27

Creswell, J. W. (1994). *Research design: Qualitative & quantitative approaches*. Thousand Oaks, CA, US: Sage.

Creswell, J. W. (2002). *Educational research: Planning, conducting, and evaluating quantitative and qualitative approaches to research.* Upper Saddle River, NJ: Pearson Education.

Creswell, J. W. (2005). *Educational research: Planning, conducting, and evaluating quantitative and qualitative research*. Upper Saddle River, New Jersey: Pearson Education.

Creswell, J. W. (2014). *Research design: Qualitative, quantitative, and mixed method approach* (4th ed.). USA: SAGE Publications India Pvt. Ltd.

Cullen, C. B., & Gordon, P. A. (2014). The relationship between leadership and communication skills of nurse managers and the organizational citizenship behaviors of medical-surgical nurses and nursing assistants. *Management and Organizational Studies*, 1(2), 23-29.

Davis, B., Ward, C., Woodall, M., Shultz, S., & Davis, H. (2007). Comparison of job satisfaction between experienced medical-surgical nurses and experienced critical care nurses. *MEDSURG Nursing,* 16(5), 311-316.

Dowd, M. (2018, July). *Hinderances to Interpersonal Communication*. Chron. Retrieved from: https://work.chron.com/hinderances-interpersonal-communication-7445.html

Etikan, I. & Bala K. (2017). Sampling and sampling methods. *Biometrics & Biostatistics International Journal. Vol. 6* (5), 1-3, DOI: 10.15406/bbij.2017.05.00149

Fraenkel, J. R., Wallen, N. E., & Hyun, H. H. (2012). *How to design and evaluate research In education* (8th ed.). New York: Mc Graw Hill.

Githaiga, G. (eds), Minnie, J. & Bussienek, H. (2011). Public Broadcasting in Africa. A survey. *University Journal of Social Sciences, Humanities, and Arts*, 12 (2): 115-127.

Haiemann, T. (2011) Oxford University Press, New York, p. 142. Retrieved fromhttp://www.cultsock.ndirect.co.uk/

Irimu G, Wamae A, Wasunna A, Were F, Ntoburi S, et al. (2012) Developing and introducing evidence based clinical practice guidelines for serious illness in Kenya. Archives of Disease in Childhood 93: 799–804.

Jackson, S. L. (2009). Research Methods and Statistics: A Critical Thinking Approach (3rd ed.) Belmont, CA: Wadsworth

Job Outlook 2016: The Attributes Employers Want to See on New College Graduates'Resumes, National Association of Colleges and Employers (NACE). 2016.

Johnson, K. S. (2018). *Psychological Hinderances in communication*. Chron. https://work.chron.com/psychological-hinderances-communication-8309.html

Keith, D. (2014). *Personnel management* (5th ed). Tokyo: McGraw Hill.

Kibe, P. N. (2016). Assessing the impact of strategic communication management on stakeholders using corporate identity in public schools in Kenya. Master's Thesis, Jomo Kenyatta University of Agriculture and Technology.

Korkaew J. and Suthinee R. (2012), Factors Affecting Job Performance: A Review of Literature.

Kothari, C. R. (2004). *Research methodology* (2nd ed.). New Delhi: New Age International Ltd. Publishers.

Kukule, I. (2012). *Internal communication crisis and its impact on Organization's Performance. Caucasian Economic Triangle*, 2.2012 ISSN:2233-3231.

Macey, W. H. and Schneider, B. (2008): The meaning of employee engagement. *Industrial and Organizational Psychology,* 1(1):3-30.

Mangal, S.K & Mangal, U. (2009). *Essentials of Educational Technology*. New Delhi: PHI Learning Private Ltd

Mason, M. (2010). Sample size and saturation in Ph.D studies using qualitative interviews. *Forum: Qualitative Social Research.* 11(3), Art.8

Meier, K. S. (2018). *Gender Hinderances to Communic*ation. Chron. Retrieved from: https://work.chron.com/gender-hinderances-communication-6858.html

Mugenda, O. M., & Mugenda, A.G. (2003). *Research methods: Quantitative and qualitative approaches*. Nairobi: Act Press.

Muscato, C. (2018). *Comparing Symmetrical & Complimentary Interpersonal communication.Study.com.* Retrieved from: *https://study.com/academy/lesson/comparing-symmetrical*-complimentary-interpersonal-communication.html

Neves, P. & Eisenberger, R. (2012). Management communication and employee performance: the contribution of perceived organizational support. *Human Performance,* 25(5), 452-464

Ojwang, O. & Matu, M. (2010). *Nurses' impoliteness as an impediment to patients' rights in selected Kenyan hospitals*. Health and Human Rights Journal. Retrieved from: https://www.hhrjournal.org/2013/08/nurses-impoliteness-as-an-impediment-to-patients-rights-in-selected-kenyan-hospitals/

Okoye, J.C (2004). *Communication Effectiveness in Public and Private Organisation*. Enugu: HRV publishers.

Peter, L.(2015). *Effective Business Communication*. New york. McGrawhill.

Rajashree, K. C. (2011). *Training Programs in Communication Skills for Health Care Professionals and Volunteers*. Indian Journal of Palliative Care. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3140080

Rich, B. L., LePine, J. A., & Crawford, E. R. (2010). Job engagement: Antecedents and effects on job performance. Academy of Management Journal, 53, 617-635.

Satir, V. (2013). *Introduction to Interpersonal Communication*. Pearson Hingered. Retrieved from https://www.pearsonhighered.com/assets/samplechapter/0/2/0/5/0205953654.pdf

Singh, A. K. (2014). Role of Interpersonal Communication in Organizational Effectiveness. *International Journal of Research in Management and Business Studies*, 1(4), 36-39.

Stremlau, N. (2013). Towards a diagnostic approach to media in fragile states: Examples from the Somali territories SAGE Publications. United Kingdom. *Media, War & Conflict,* 6(3), 279–293.

Sumeya, A. A. (2016). The influence of internal communication channels on employee performance in nonprofit organizations in Somalia. Master's Thesis, United States International University-Africa

Tabitha, M. W. (2015). An analysis of effectiveness of employee communication in public institutions in Nairobi: the case of Teachers Service Commission. Master's Thesis, University of Nairobi.

Thao, L. T. L. & Hwang, C.J. (2015). Factors affecting employee performance: Evidence from petro Vietnam engineering consultancy J.S.C. *Journal of Management Studies*, 51(17), 27 –52.

Tolstedt, Betsy E.; Joseph P. Stokes (1984). "Self-disclosure, Intimacy, and the Depenetration Process". *Journal of Personality and Social Psychology*, 46 (1): 84–90

Von Holdt K & Maseramule B (2005) After apartheid: Decay or reconstruction in a public hospital? In: Webster E and Von Holdt K (eds) Beyond the Apartheid Workplace: Studies in Transition. Scottsville: University of KwaZulu-Natal Press, pp. 435–459.

Walker, M. H. (2017). Symmetrical and Complementary Relationships. PsychCentral. Retrieved from: https://pro.psychcentral.com/symmetrical-and-complementary-relationships/

Watson Wyatt. (2004). *Connecting organizational communication to financial performance-2003/2004.* Washington, US: communication ROI Study

Weiner, D. (2006). The Workplace. Crisis Communications: Managing Corporate Reputation in the Court of Public Opinion.

Williams, E. (2018). *The Relationship Between an Effective Nurse Manager & Nursing Retention*. Chron. Retrieved from: https://work.chron.com/relationship-between-effective-nurse-manager-nursing-retention-25791.html

Williams, C. (2007) Management 4th edition. USA: Thomas Higher Education

Wimmer, D. & Dominick, R., (2011). *Mass media research: An Introduction* (9th ed.). USA: Wadsworth Cengage Learning. https://www.staffconnectapp.com/wp-content/uploads/Part-1-Internal-Communications-E-Book.pdf

Zhang, X. & Venkatesh, V. (2013). Explaining employee job performance: the role of online and offline workplace communication networks. *MIS Quarterly*, 37(3), 695-722.

# APPENDICES

## Appendix A: Letter to Respondents

Dear Respondent,

My name is Pauline Vinaywa Sekah. I am formally writing to request your participation in an academic research that I am carrying out.

I am student pursuing my postgraduate studies at St. Paul's University, undertaking a Master of Arts course in Communication. The findings of this academic research will be presented as a final project for my master's degree to St. Paul's University.

The study topic assesses interpersonal communication of nurse managers and its influence on nurses' performance in private hospitals in Nairobi. Kindly fill the attached questionnaire as truthfully as possible to enable this research to be successful. The information purely for academic research and will be treated as confidential and anonymous.

Your support and cooperation is highly appreciated. Feel free to contact me, I'm available on cell phone number 0721-542940 or email address vinaywake@gmail.com, to answer queries you may have, regarding my research. I hope that you will make the time to contribute.

Yours faithfully,

**Pauline Vinaywa Sekah**
**Graduate Student - St. Paul's University**

## Appendix B: Questionnaire

This Questionnaire is aimed at seeking views and opinions on the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi. You have been selected to participate in the study. Please answer the questions by ticking on the space provided.

### SECTION A: GENERAL INFORMATION

1. Please indicate how long you have worked in this organization.
   - Below 5 years [ ]
   - 5 – 10 years [ ]
   - 11 - 15 years [ ]
   - 16 – 20 years [ ]
   - Above 20 years [ ]
2. Please indicate your age category.
   - 18 and 25 years [ ]
   - 26 – 35 years [ ]
   - 36 - 45 years [ ]
   - 46 – 55 years [ ]
   - Above 55 years [ ]
3. Please indicate your highest educational qualification.
   - Secondary [ ]
   - Certificate [ ]
   - Diploma [ ]
   - Undergraduate [ ]
   - Post graduate [ ]
4. Please indicate your management level in the organization.
   - Non-management [ ]
   - Lower management [ ]
   - Middle management [ ]
   - Top Management [ ]

## SECTION B: FORMS OF INTERPERSONAL COMMUNICATION

5. Please indicate your level of agreement with the following statements regarding the level of use of the following forms of interpersonal communication at your organization. Tick (√ ) what you think is the most appropriate answer. The rating is as follows:

   **A**=Always **VO**=Very Often **S**=Sometimes **R**=Rarely **NU**=Never used

| | **Statement** | **A** | **VO** | **S** | **R** | **NU** |
|---|---|---|---|---|---|---|
| 1 | Oral communication media (face-to-face, phone, and meetings) | | | | | |
| 2 | Written/print media (memo/letter, publications, and bulletin) | | | | | |
| 3 | Electronic media (email, intranet, and social media) | | | | | |

6. Indicate the level of effectiveness of the communication medium in terms of delivering accurate, complete, clear, relevant, and timely information. Using the following Likert scale, tick (√ ) what you think is the most appropriate answer.

   **VE**=Very effective **E**=Effective **N**=Neutral **I**=Ineffective **VI**=Very ineffective

| | **Statement** | **VE** | **E** | **N** | **I** | **VI** |
|---|---|---|---|---|---|---|
| 1 | Oral communication media (face-to-face, phone, and meetings) | | | | | |
| 2 | Written/print media (memo/letter, publications, and bulletin) | | | | | |
| 3 | Electronic media (email, intranet, and social media) | | | | | |

7. Please indicate your level of agreement with the statements in the table below about forms of interpersonal communication at this organization. Tick (√ ) what you think is the most appropriate answer. The rating is as follows:

   **SA**=Strongly Agree **A**=Agree **N**=Neutral **D**=Disagree **SD**=Strongly Disagree

| | **Statement** | **SA** | **A** | **N** | **D** | **SD** |
|---|---|---|---|---|---|---|
| 1 | Face to face communication with supervisors is valued at my organization. | | | | | |
| 2 | My supervisor's nonverbal communication is important | | | | | |
| 3 | Visual communication is valued at my organization | | | | | |
| 4 | My supervisors listen to me when I speak | | | | | |
| 5 | My supervisor maintains eye contact when they speak to me | | | | | |

## SECTION C: PATTERNS OF INTERPERSONAL COMMUNICATION

8. Please indicate your level of agreement with the statements in the table below about patterns of interpersonal communication at this organization. Tick (√ ) what you think is the most appropriate answer. The rating is as follows:

   **SA**=Strongly Agree **A**=Agree **N**=Neutral **D**=Disagree **SD**=Strongly Disagree

| | **Statement** | **SA** | **A** | **N** | **D** | **SD** |
|---|---|---|---|---|---|---|

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | My suggestions, opinions, and thoughts listened to and acted on by my supervisor. | | | | | |
| 2 | The communication structure of the organization is clear and well structured. | | | | | |
| 3 | The organization encourages two-way communication between upper level and lower level employees | | | | | |
| 4 | I counter my supervisors when they assign tasks to me | | | | | |
| 5 | I listen my supervisor even when I know they are wrong | | | | | |

**SECTION D: COMMUNICATION SKILLS COMPETENCE**

9. Please indicate your level of agreement with the statements in the table below about communication skills competence this organization. Tick (√ ) what you think is the most appropriate answer. The rating is as follows:

**SA**=Strongly Agree **A**=Agree **N**=Neutral **D**=Disagree **SD**=Strongly Disagree

| | **Statement** | **SA** | **A** | **N** | **D** | **SD** |
|---|---|---|---|---|---|---|
| 1 | My supervisor is concerned about improving communication with employees | | | | | |
| 2 | In my organization my superiors are frank and candid with employees | | | | | |
| 3 | My organization respects peoples differences in terms of their culture, personality and education | | | | | |
| 4 | In my organization we work as teams to solve issues, we collaborate and share information | | | | | |
| 5 | Nurses can freely communicate with the nurse managers in my organization | | | | | |
| 6 | Nurses in my organization have the ability to give their suggestions and opinions to managers on issues relating to work | | | | | |

**SECTION E: HINDERANCES TO COMMUNICATION**

10. Please indicate your level of agreement with the statements in the table below about hinderances to interpersonal communication at this organization. Tick (√ ) what you think is the most appropriate answer. The rating is as follows:

**SA**=Strongly Agree **A**=Agree **N**=Neutral **D**=Disagree **SD**=Strongly Disagree

| | **Statement** | **SA** | **A** | **N** | **D** | **SD** |
|---|---|---|---|---|---|---|
| 1 | There are effective methods of feedback from employees in my organization | | | | | |
| 2 | It's possible to address the hindrances to communication by analyzing feedback from employees | | | | | |
| 3 | Poor interpersonal communication that exist between managers | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | and nurses causes nurses to be stressed | | | | | |
| 4 | Employee feedback can be gathered by through direct contact with managers | | | | | |
| 5 | I often can't do my job because of delay in getting information from my supervisors | | | | | |
| 6 | Effective sharing of information among workers leads to improved performance of employees. | | | | | |

11. List down hinderances to effective communication between nurse managers and nurses

_____

_____

_____

_____

**SECTION E: EMPLOYEE PERFORMANCE**

12. How would you rate your performance in the organization?

Excellent [ ]

Good [ ]

Not sure [ ]

Weak [ ]

Very weak [ ]

Give reasons for your answer

_____

_____

_____

_____

_____

13. Please indicate your level of agreement with the statements in the table below about employee performance at this organization. Tick (√) what you think is the most appropriate answer. The rating is as follows:

**SA**=Strongly Agree **A**=Agree **N**=Neutral **D**=Disagree **SD**=Strongly Disagree

| | **Statement** | **SA** | **A** | **N** | **D** | **SD** |
|---|---|---|---|---|---|---|
| 1 | Performance of employees in my organization is well because managers and employees share information | | | | | |
| 2 | I am satisfied with the level at which my supervisor shares important information about my duties with me | | | | | |
| 3 | I send information to my supervisors not only reports but also new ideas and suggestions | | | | | |
| 4 | I receive good responses to the information I sent to upper level | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| | employees | | | | | |
| 5 | In my organization employees can approach managers for help and they work collaboratively. | | | | | |
| 6 | Employees in my organization adhere to organizational policies | | | | | |
| 7 | Employees in my organization are frequently absent from work | | | | | |

## Appendix C: Interview Guide for Nurse Managers

### Introduction

The purpose of this interview is to collect data purely for academic purposes. All information will be treated with strict confidence. The interview seeks to find out the influence of interpersonal communication of nurse managers on nurses' performance in private hospitals in Nairobi.

1. What is your age bracket?
2. What is your highest level of formal education completed?
3. How long have you worked in this organization?
4. Do you use non-formal means to communicate to nurses in your organization?
5. Explain how you use interpersonal communication to communicate to nurses in your organization.
6. Do you use nonverbal forms to pass information to nurses in your organization?
7. To what extent do nurse respect the information you pass on to them as their supervisor?
8. Do nurses freely communicate to you as their supervisors?
9. How do you receive feedback from the nurses?
10. Are nurses able to make decisions concerning their work? If yes how do they communicate their decisions to you?
11. How do you rate your communication skills competence?
12. How often do you go for training on communication skills?
13. How do you ensure that nurses in your organization adhere to organizational policies?
14. To what extent do you value team work in your organization?
15. Explain the hindrances to communication between nurse managers and nurses in your organization.
16. What is the level of nurses' absenteeism in your organization?

## Appendix D: University Authorization

## Appendix E: Research Authorization - NACOSTI

## Appendix F: Research Permit -NACOSTI