



Therapeutic Communication of Nurses in the Surgical Treatment Room of RSUD Arifin Nu'mang

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Abstract. The quality of health services is what refers to the level of perfection of health services in causing satisfaction in each patient. The more perfect the satisfaction felt, the better the quality of health services. In organizing efforts to maintain the quality of health services in hospitals, it is inseparable from the nursing profession which plays an important role because nursing services ensure the existence of high-quality nursing care in quality control programs in hospitals, considering that nursing services take place continuously for 24 hours a day. The nursing service team provides services to clients in accordance with professional beliefs and established standards, this shows that the nursing services provided are always safe services and can meet the needs and expectations of clients. The purpose of this study was to determine the relationship between educational background with the implementation of therapeutic communication of nurses in the surgical treatment room of Arifin Nu'mang Hospital Sidenreng Rappang. This research methodology is a non-experimental research with descriptive research type, with observational research form. The research design in this study is Cross Sectional. Data in this study were obtained by finding respondents who fit the inclusion criteria then giving or distributing questionnaires to respondents. From the univariate analysis, the results obtained between verbal therapeutic communication as much as 63.5% who perceived well and non-verbal nurses as much as 85% who perceived well. The conclusion in this study is that the client's perception of the nurse's therapeutic communication shows quite good results.

Keywords: Therapeutic Communication, Nurse, Surgical Care, Education, Hospital.





1. Introduction

Many problems are faced by nurses in carrying out their lives and duties. Where nurses are required not to make the slightest mistake in carrying out their duties. Violence is a high risk that will be experienced by nurses when carrying out their duties, this often arises by clients who experience sadness, stress due to their illness or client dissatisfaction with medical and nursing services and other services related to the scope of health services. In addition, not a few nurses experience stress due to limited staff and salaries that are too low, so many nurses have part-time jobs in order to make ends meet, sacrificing rest time to work overtime. This will have implications for the quality of nursing services provided including the therapeutic attitude that should be given to patients is sometimes ignored.

Burroughs (1999) cited by Nurrahmah (2009) suggests that nurses are expected to be able to involve a caring attitude to their clients in the form of using expertise, gentle words, touch, giving hope, always being beside the client and being caring.

Communication is a very special and meaningful process in human relations. In the nursing profession, communication becomes more meaningful because it is the main method in implementing the nursing process. In nursing care, communication is aimed at changing behavior in achieving an optimal level of consciousness, because it aims to therapy then communication in nursing is called therapeutic communication. Stuart, G.W (1998) cited (Suryani, 2009).

Therapeutic communication is the ability or skill of nurses to help clients adapt to stress, overcome psychological disorders and learn how to relate to others.

2. Research Method

This research is a non-experimental research with descriptive research type, with exploratory research form. The research design in this study is Cross Sectional. The data in this study were obtained by finding respondents who fit the inclusion criteria then giving or distributing questionnaires to respondents with the following steps: Before the questionnaire was handed over to the respondent, the researcher first explained to the respondent about the purpose and benefits of the study. After the respondent understands the purpose and benefits of the study, the respondent is asked for his willingness to sign an informed consent sheet. If the respondent has expressed his willingness, then the questionnaire is given and the respondent is asked to learn in advance about how to fill out the questionnaire.

3. Results And Discussions

a. Result

Characteristics of respondents based on variables.

1. Verbal Therapeutic Communication of Nurses.

The frequency distribution of client perceptions about the use of Verbal therapeutic communication techniques by nurses when interacting with clients. can be seen in table 1 below.





Table. 1

Frequency distribution of client perceptions about verbal therapeutic communication of nurses

verbal therapeutic communication	Total	%
Good	27	67,5%
Not good	13	32,5%
Total	40	100%

Based on table 1 above, it can be seen that there are more than half of the respondents, namely 27 respondents (67.5%) who perceive good verbal therapeutic communication techniques of nurses and there are 13 respondents (32.5%) who perceive poor verbal therapeutic communication techniques of nurses when interacting with clients.

2. Nurse Non-Verbal Therapeutic Communication.

a. Personal appearance.

The frequency distribution of client perceptions about the personal appearance of nurses when interacting with clients can be seen in table 2 below:

Table. 2

Frequency distribution of client perceptions about Personal appearance of the nurse

Personal appearance	Total	%
Good	34	85%
Not good	6	15%
Total	40	100%

Based on the table above, it can be seen that almost all respondents, namely 34 respondents (85%) who perceive good and there are only 6 respondents (15%) who perceive poorly about the personal appearance of nurses when interacting with clients.

b. Intonation

The frequency distribution of client perceptions about the use of intonation by nurses when interacting with clients can be seen in table 3 below:

Table. 3

Frequency distribution of client perceptions about the use of nurse intonation

Intonation	Total	%
Good	31	77,5%
Not good	9	22,5 %
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents there were 31 respondents (77.5%) who perceived well and only 9 respondents (22.5%) who





perceived poorly about the use of intonation by nurses when interacting with clients.

c. Facial expressions

The frequency distribution of client perceptions of nurses' facial expressions when interacting with clients can be seen in table 4 below:

Table. 4
Frequency distribution of client perceptions about
Nurse's facial expressions

Facial expressions	Total	%
Good	30	75%
Not good	10	25%
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents there were 30 respondents (75%) who perceived good and 10 respondents (25%) who perceived unfavorable facial expressions of nurses when interacting with clients.

d. Body Attitude

The frequency distribution of client perceptions of nurses' body posture when interacting with clients can be seen in table 5 below:

Table. 5
Frequency distribution of client perception
About Body Attitude

Body Attitude	Total	%
Good	22	55%
Not good	18	45%
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents there were 22 respondents (55%) who perceived well and there were 18 respondents (45%) who perceived poorly about the nurse's body attitude when interacting with clients.

e. Distance

The frequency distribution of client perceptions about the use of therapeutic distance when interacting with clients can be seen in table 6 below:

Table. 6
Frequency distribution of client perceptions about
the use of Therapeutic distance

Therapeutic distance	Total	%
Good	17	42,5%
Not good	23	57,5%
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents, there were 17





respondents (42.5%) who perceived well and there were 23 respondents (57.5%) who perceived poorly about the use of distance by nurses when interacting with clients.

f. Touch

The frequency distribution of client perceptions about the provision of touch by nurses when interacting with clients can be seen in table 7 below:

Table. 7
Frequency distribution of client perceptions about the use of therapeutic touch by nurses

Therapeutic touch	Total	%
Good	29	72,5%
Not good	11	27,5%
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents there were 29 respondents (72.5%) who perceived it well and there were 11 respondents (27.5%) who perceived it poorly about giving therapeutic touch to nurses when interacting with clients.

Based on the frequency distribution table above, the client's perception of non-verbal therapeutic communication as a whole can be seen in table 8 below:

Table. 8
Frequency distribution about communication Non-verbal therapeutic communication of nurses

Non-verbal therapeutic communication	Total	%
Good	34	85%
Not good	6	15%
Total	40	100%

Based on the table above, it can be seen that out of 40 respondents there were 34 respondents (85%) who perceived well and there were 6 respondents (15%) who perceived poorly about the non-verbal therapeutic communication of nurses when interacting with clients.

g. Discussion

Therapeutic communication plays an important role in helping to solve problems faced by clients where the quality of nursing care provided to clients is greatly influenced by the relationship between nurses and therapeutic clients. Therapeutic communication consists of two parts, namely therapeutic verbal communication and therapeutic non-verbal communication.

1) Therapeutic verbal communication

The results of the research conducted by the nurse's verbal therapeutic





communication showed that of the 40 respondents there were 27 respondents (67.5%) who rated it as good and 13 respondents (32.5%) who rated it as poor. Effective nurse verbal therapeutic communication should use sentences that are clear, concise and easy to understand, relevant to client needs, use words that are easy to understand, the right time and interspersed with humor to entertain clients or reduce the tension faced by clients.

The results showed that the techniques of using verbal therapeutic communication of nurses were efficient, but some of the techniques of verbal therapeutic communication of nurses had not been applied by nurses properly such as: timeliness in conveying information to clients about their health, vocabulary owned by nurses was still lacking where nurses still often used medical terms when interacting with clients so that clients did not understand what the nurse meant and the lack of interest of nurses to interact with clients if only to entertain, make clients laugh or feel relaxed about the surgery that would be experienced or the impact of surgery experienced by clients.

2) Therapeutic non-verbal communication.

a) Personal appearance

The results showed that out of 40 respondents there were 34 respondents (85%) who rated well and 6 respondents (15%) who rated poorly about the personal appearance of nurses. In interacting with clients, nurses must pay attention to their appearance to create a positive self-image and professional, which nurses must pay attention to regarding their personal appearance, including the type of clothing, makeup, jewelry, neatness and cleanliness of the nurse. However, out of 40 respondents, there are still 6 respondents (15%) who perceive the personal appearance of nurses to be poor, this may be due to the fact that there are still some nurses who use jewelry made of rubber or similar metals, do not use official uniforms, especially at night and there are still nurses who use footwear other than shoes in the client care room even though the room is not a sterile room.

b) Facial expressions

The results of the research conducted showed that out of 40 respondents, 30 respondents (75%) rated it favorably and 10 respondents (25%) rated it unfavorably about the placement of nurses' facial expressions when interacting with clients. In this case nurses are required to be able to show expressions of acceptance, friendliness or attention to clients which can be shown through eye contact or smiling when interacting with clients. However, out of 40 respondents, there are still 10 (25%) respondents who perceive less well about nurses' facial expressions when interacting with clients. This is because there are still several techniques for using therapeutic facial expressions that nurses have not applied properly, including the lack of nurses' attention in maintaining eye contact when communicating with clients.





c) Body posture.

The results of the research conducted showed that out of 40 respondents there were 22 respondents (55%) who rated well and 18 respondents (45%) who rated poorly about the nurse's body attitude when interacting with clients. The nurse's body attitude in therapeutic communication must be able to show an open, caring, confrontational attitude, and a ready attitude always in helping clients. In the study there were almost the same respondents between respondents who perceived well and respondents who perceived poorly. The use of nurses' body attitudes in interacting with clients is enough to show a therapeutic attitude, but there are several things that must be considered in order to be better, such as the attitude of the nurse not showing an attitude of acceptance or acting as a good listener for the client, this can be seen in the attitude of the nurse's body when listening to client complaints that are not accompanied by a nod of the head or an attitude of bending towards the client. other things regarding the position of the nurse when communicating with the client, Another thing about the position of the nurse when communicating with the client should be in a sitting position so as not to show a dominant or controlling attitude, but this may be due to the rather crowded room conditions that do not allow the nurse to sit, this condition is influenced by the number of beds in each room too much accompanied by the number of client visitors who are usually quite large in number.

d) Distance

The results of the research conducted showed that out of 40 respondents there were 17 respondents (42.5%) who rated well and 23 respondents (57.5%) who rated poorly about the use of distance by nurses when interacting with clients. This study shows that the distance used by nurses when communicating with clients is not a therapeutic intimate distance, where nurses tend to use a distance of more than 45 cm while the distance that should be used by nurses is a distance of 0 cm to 45 cm, even though distance greatly affects the smoothness of communication. 0 cm means the nurse's interaction with the client where the nurse talks to the client while touching the client with the nurse's hand as an expression of the nurse's caring for the client..

e) Touch

The results of the research conducted showed that out of 40 respondents there were 29 respondents (72.5%) who rated well and 11 respondents (27.5%) who rated poorly about the use of touch by nurses when interacting with clients. In this study, it shows that the nurse's therapeutic touch is well received by clients where by touching, clients feel cared for and accepted. the nurse's touch shows the nurse's understanding, support, attention and affection for the client, but of the 40 respondents there were still 11 respondents who perceived poorly, they felt rarely touched by nurses even though therapeutic touch is not only an expression of





attention but also increases physical recovery from the impact of surgery experienced.

4. Conclusion

- a) Clients' perceptions of nurses' verbal therapeutic communication when interacting with clients show quite good results, but there are 32.5% of respondents who perceive less well. This is because there are several therapeutic communication techniques that have not been applied properly such as vocabulary, timeliness of information delivery and humor.
- b) Client perceptions of non-verbal therapeutic communication techniques show quite good results, but there are 15% of respondents who still perceive less well. This is because there are still non-verbal communication techniques that have not been fully applied properly by nurses, such as the use of communication distance, body posture when communicating and giving touch to clients.

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