

Implementation of Therapeutic Communication Nurse to Patient at the wards of Ernaldi Bahar Hospital in South Sumatra Province

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Abstract - Therapeutic communication is an important process in the treatment process for ODGJ, at this time mental illness sufferers are increasing, but there are some obstacles in the implementation of therapeutic communication. This study aims to determine the implementation of therapeutic communication by nurses at Ernaldi Bahar Hospital in South Sumatra Province in 2019. This research was conducted on 9 February-18 July 2019, using descriptive methods. a sample of 40 nurses using a questionnaire. The results obtained by the data that the implementation of therapeutic communication in the good category (62.5%) with details (1) nurses need to prepare themselves before communicating (63%), nurses have made an interaction plan (97%), (3) say hello when starting communication (70%), (4) introducing themselves to patients (67%), (5) asking the patient's condition (70%), (6) asking the patient's name (67%), (7) listening to communication actively and fully attention (67%), (8) summarizing the results of communication (67%), (9) asking the patient's feelings after interacting (67%), (10) making further interaction contracts (60%). Based on the results of the study it can be concluded that the implementation of therapeutic communication by nurses to patients is in the good category, but there needs to be an increase again especially in the final stages of interaction. That is, by contracting further activities so that therapeutic communication can be carried out continuously throughout the patient nurse process while in the hospital. It is recommended to use therapeutic communication in accordance with the stages in order to establish a trusting relationship between nurses and mental patients and facilitate nurses in handling, caring for, and fostering mental patients.

Keywords - Therapeutic communication, nursing process, mental disorders

I. INTRODUCTION

Mental health problems are still one of the significant health problems in the world, including in Indonesia. According to World Health Organization data there are around 35 million people affected by depression, 60 million people affected by bipolar disorder, 21 million affected by schizophrenia, and 47.5 million affected by dementia. Based on the 2013 Riskesdas Data, the prevalence of mental emotional disorders as indicated by symptoms of depression and anxiety for the age of 15 years and over reached around 14 million people or 6% of the total population of Indonesia. While the prevalence

of severe mental disorders, such as schizophrenia reaches around 400,000 people or as much as 1.7 per 1,000 population [1].

According to Rosdahi, the definition of mental health is a condition where a person who continues to grow and maintain harmony in self-control, and limited from serious stress [2]. Mental Health is a condition where an individual can develop physically, mentally, spiritually, and socially so that the individual is aware of his own abilities, can deal with pressure, can work productively, and is able to contribute to his community [3].

Therapeutic communication is the basic modality of the main intervention consisting of verbal and non verbal techniques that are used to form relationships between nurses and clients in meeting needs [4]. Therapeutic communication is important in the implementation of the mental nursing process, especially in the assessment process where at this stage effective communication skills are needed from nurses, which literally triggers the nursing process in relation to collecting data directly on individuals and other sources [5].

Based on the results of research conducted Angkestareni in his research the implementation of nurses' therapeutic communication in the pre-reaction phase with the results of 58 people 89.2% doing very well, in the orientation phase with the results of 55 people 84.6% categorized very well, in the work phase with results 64 98.5% of people are categorized very well, and in the last phase of termination with the results of 62 people 95.4% are categorized very well [6].

Based on the results of research conducted by Putri, V.S, the results showed that there was a significant effect of therapeutic communication therapy in overcoming the problem of violent behavior in schizophrenic patients with a p-value of 0.013 (p-value <0.05) [7].

According to Meliza, C.P and Anisah, N in their research During the application of therapeutic communication nurses use verbal and non verbal communication as well as several techniques to achieve their goals. Nurses also experience internal and external barriers in implementing therapeutic communication originating from the

patient, namely resistance or refusal to interact and deny, from the nurse's self that is mood, multi-role and language [8].

Based on preliminary studies conducted by researchers in 6 inpatient rooms (cempaka room, cananga room, pigeon room, asoka room, stork room, and paradise room) at Dr. Hospital. Ernaldi Bahar obtained information that nurses said thev understood the importance of therapeutic communication, nurses' attitudes in conducting therapeutic communication, there were some differences, especially in dealing with certain patients in each room, and the techniques used were still not done or there were differences affecting the implementation of therapeutic communication. from every nurse.

Based on the description of the problems above, researchers intend to conduct research on the implementation of therapeutic communication in six inpatient hospitals. Ernaldi Bahar, South Sumatra Province 2019.

A. Work Related

Angkestareni, in her research the implementation of nurse therapeutic communication in the pre-interaction phase with the results of 58 people 89.2% did very well, in the orientation phase with the results of 55 people 84.6% were categorized very well, in the work phase with the results of 64 people 98.5% is categorized as very good, and in the last phase namely termination with the results of 62 people 95.4% are categorized as very good [6]. Based on the results of research conducted by Putri, V.S, et al, the results showed that there was a significant effect of therapeutic communication therapy in overcoming the problem of violent behavior in schizophrenic patients with a p-value of 0.013 (p-value <0.05) [7].

Other studies conducted by Meliza, C.P and Anisah, in their research During the application of therapeutic communication nurses use verbal and non verbal communication as well as several techniques to achieve their goals. Nurses also experience internal and external barriers in implementing therapeutic communication originating from the patient, namely resistance or refusal to interact and deny, from the nurse's self that is mood, multi-role and language [8].

B. Our Contribution

This paper presents the implementation of nurses' therapeutic communication in the inpatient room of the Ernaldi Bahar Hospital in the Province of South Sumatra to the patients detailed in the analysis of each question used. The implementation of therapeutic communication is the most important thing for nurses to handle and treat mental patients in the healing process.

Interpersonal communication that is done by nurses in handling and treating mental patients using therapeutic communication.

Communication is very necessary in carrying out a job from an agency or institution.

One of them is the hospital, where in the hospital communication is very necessary to provide information or convey a message made by the medical in the hospital. Communication at the hospital is also needed by Nurses and Patients in recovering and caring for Patients. Communication plays an integral role. in the nursing profession. Communication is also a vehicle for nurses to realize the goal of providing quality care services to patients. Therefore, the hospital must know the extent to which the application of communication carried out by nurses to patients can be done through measurement methods using questionnaires that we have done through descriptive methods and analysis of each question measured. After conducting research, we were disseminated at the hospital which is the location of the study. Then, the hospital management gets input for improvement in measuring nurse performance

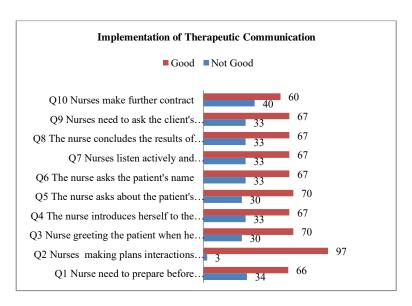
II. METHOD

The remainder of this paper is organized as follows. Part 1 is an introduction to the background that explains the importance of therapeutic communication as well as some problems in the implementation of therapeutic communication from the results of the analysis of several research results and preliminary studies which are interesting topics to be discussed. Part 1 also covers work related to our contributions, and the structure of the paper. Then Part 2 explains the results and analysis of this study. We use descriptive analysis. Next, Section 3 discusses conclusions and the last section contains references that we use.

III. RESULTS AND DISCUSSION

A. Univariate Analysis

Implementation of therapeutic communication	Frequency (f	Percent(%)
Nor Good	15	37.5
Well	25	62.5
Total	40	100.0



Based on the results of research on the implementation of therapeutic communication variables most respondents were respondents with a good therapeutic communication implementation, amounting to 25 respondents (62.5%), while 15 respondents (37.5%) with therapeutic communication implementation were less good than 40 respondents. The results of the analysis of each question related to the implementation of therapeutic communication show that only interaction planning is best done by the nurse while the implementation process until the next contract is still not optimal.

According to Kusimawati & Hartono in his book entitled Textbook on mental nursing the implementation of therapeutic communication or the nurse-client therapeutic relationship can be divided into four phases, namely preaction phase, orientation phase, work phase and termination phase [2].

Based on the research of Umairoh and Nurbaiti, the preinteraction stage is the stage where the nurse prepares before the nurse meets the patient, the orientation phase is the stage where the nurse meets the patient to interact, then the work phase is where the nurse performs actions in accordance with the nursing plan for the patient's own healing, and the termination stage is the stage of separation or the final stage where the nurse ends the interaction and meeting temporarily and meets again at the agreed time between the nurse and the client [9].

Based on the results of the research, supporting theory and related research researchers argue that the better the structured stages of each communication process used, the more effective communication will be so that it facilitates the implementation of therapeutic communication by nurses to patients.

IV. CONCLUSIONS

The implementation of therapeutic communication by nurses to patients in the inpatient room at the Ernaldi Bahar Hospital is in the good category (62.5%). However, it is necessary to optimize each communication phase in the orientation phase, work phase, and termination, especially in the final stages of interaction, namely by contracting further activities so that therapeutic communication can be carried out on an ongoing basis during the patient nurse process while in the hospital.

REFERENCES

- [1] Kementerian Kesehatan Republik Indonesia. 2016. Peran Keluarga Dukung Kesehatan Jiwa Masyarakat. http://www.depkes.go.id/article/print/16100700005/peran-keluarga-dukung-kesehatan-jiwa-masyarakat.html
- [2] Kusumawati F & Hartono Y. 2012. Buku Ajar Keperawatan Jiwa. Salemba Medika: Jakarta.
- [3] Undang-undang RI Nomor 18 Tahun 2014. Tentang Kesehatan Jiwa. yankes.kemenkes. go.id/assets/downloads/UU%20No.%2018%20Th%202014%20ttg %20Kesehatan%20Jiwa.pdf
- [4] Setyoadi & Kushariyadi. 2011. Terapi Modalitas Keperawatan pada Klien Psikogeriatrik. Salemba Medika: Jakarta.
- [5] Damaiyanti, M & Iskandar. 2012. Asuhan Keperawatan Jiwa. PT. Refika Aditama: Bandung.

- [6] Angkestareni, dkk. 2016. Gambaran Pelaksanaan Komunikasi Terapeutik Perawat pada Klien Halusinasi. http://an.ac.id/index.php/jksi/article/view/28
- [7] Putri, V. S. 2018. Pengaruh Strategi Pelaksanaan Komunikasi Terapeutik Terhadap Resiko Perilaku Kekerasan pada Pasien Gangguan Jiwa di Rumah Sakit Jiwa Provinsi Jambi. Jurnal Akademika. Vol.7 No2,(http://jab.stikba.ac.id/index.php/jab/article/view/77.
- [8] Meliza, C. P. & Anisah, N. 2017. Analisis Komunikasi Terapeutik Perawat dalam Pemulihan Pasien Gangguan Jiwa di Rumah Sakit Jiwa Aceh. Jurnal Ilmiah, Vol 2, Nomor 2:151-170, (http://www.jim.unsyiah.ac.id/FISIP/article/view/2572
- [9] Ayuningtyas VK, 2017. Komunikasi Terapeutik Perawat denganPenderita Kusta di Rumah Sakit Kusta Bagansiapiapi Rokan Hilir. Jurnal Online Mahasiswa (JOM) Vol.4 No.1 –februari 2017. https://www.neliti.com/publications/134767/komunikasi-terapeutik-perawat-dengan-penderita-kusta-di-rumah-kusta-bagansiapiap