

# Interpersonal Communication Style Between Nurses and Patients At West Purwokerto Community Health Center

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## ABSTRACT

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*This study aimed to analyze and discover the communication style of nurses and patients in health services at the West Purwokerto Health Center, as well as the barriers encountered in communication between nurses and patients and solutions to overcome communication barriers in health care. This study employs a qualitative descriptive approach, with data collected via observation, in-depth interviews, documentation, and literature reviews. The theory of social penetration was employed. According to the study's findings, the communication style between nurses and patients at the West Purwokerto Health Center was face-to-face with the stages of social penetration. The communication is started from ordinary to more intimate relations (self-disclosure). The communication style used by nurses and patients is patient-centered health care. Obstacles are encountered, such as the patient's character, which can be temperamental at times, and physical factors (patients with hearing loss), which can lead to misunderstandings. The nurse's solution is to re-explain in simpler language, provide patients with more understanding, and use non-verbal communication*

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## 1. INTRODUCTION

Communication is an essential part of human Communication. It allows individuals to connect daily, whether at home, work, or in society. Every person engages in communication in some form, whether through intrapersonal, interpersonal, group, or organizational communication. (Turistiati, 2019). Communication is required in the organizational and health spheres, including with health services such as health centers, hospitals, pharmacies, and clinics. Communication between doctors and nurses, nurses and patients, and patients and patients are examples of interactions within the scope of health or health centers (Turistiati, 2021).

Communication can create a sense of trust in a person's condition regarding illness. Thus, this influences the attitudes of community groups and individuals towards health (Maulida, 2020). Health communication does not only take place in large institutions such as hospitals but it can also be found in health services such as Community Health Centers (*Pusat Kesehatan Masyarakat*), one of which is the West Purwokerto Community Health Center.

West Purwokerto Community Health Center provides health services to patients from the time they arrive until the examination is completed. Patient satisfaction is one of the most important factors in providing high-quality public health services. Nurses' communication is very influential for patients because the nurse is the first person the patient meets before meeting the doctor. Nurses assist doctors by measuring blood pressure, weighing,

administering injections, and installing IVs. Nurses must communicate effectively with patients for patients to have complete trust in the nursing.

During their initial observations at the West Purwokerto Community Health Center, researchers noticed that nurses always greeted the patient first, followed by a question about the patient's complaints. This is evident when watching the interaction between nurses and patients in the nursing room. However, during the interview, researchers discovered that one of the patients was less comfortable with the nurse's treatment during the examination process and was disappointed with the service due to the difficulty in requesting a referral. Patients typically provide criticism and suggestions to West Purwokerto Community Health Center by writing them in the provided criticism and suggestion box. Patients are free to write about anything that they find unsatisfactory about the service.



Figure 1. Box of Critic and Suggestion  
(Resource: Researcher, 2023)

Patients who are dissatisfied with Community Health Center services may express their dissatisfaction on social media platforms such as Instagram, Google reviews, or directly to the health department. The following are some examples of social media patient complaints:

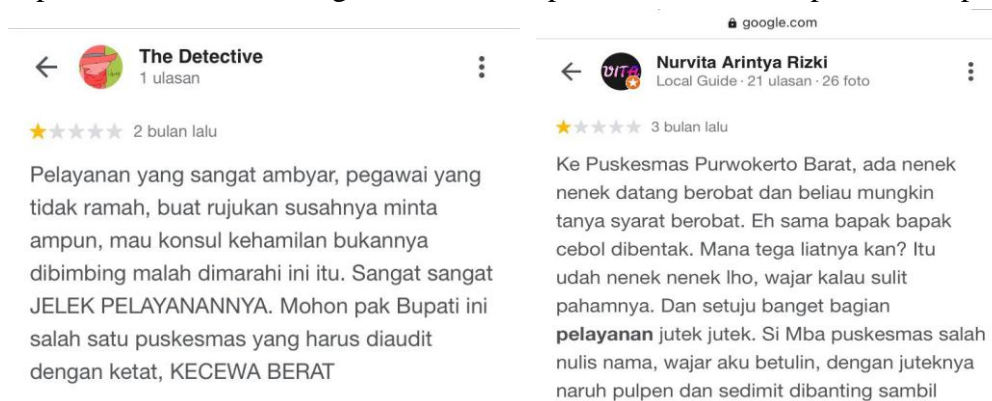


Figure 2 & 3 Negative Responses from Patients  
(Resource: Google Review, 2023)

Purwokerto Community Health Center service reviews are not always negative. The following is a comment from a patient who stated that the service was excellent.:



Figure 4. Positive Comment from Patients  
(Resource: Google Review, 2023)

Researchers are interested in highlighting the phenomenon of health services at the West Purwokerto Community Health Center based on data from initial observations and interviews, as well as observations on social media. The role of nurses in providing health services cannot be separated. Health services cannot be separated from the communicator's communication style, in this case the nurse and patient. As a result, the purpose of this study is to explore and identify the interpersonal communication styles of nurses and patients at the West Purwokerto Community Health Center.

## 2. LITERATURE REVIEW

### Health Communications

Health communication is a type of communication that involves people dealing with health-related problems. It helps to spread information about diseases, prevention, health promotion and ways to improve the quality of life in society while taking into account scientific and ethical aspects. The ultimate goal of health communication is to bring about positive changes in health behaviors that can lead to improved health status (Rahmadiana, 2012) and also changes in behavior towards society to make it better and improve the health of each individual (Alfarizi, 2019). Health communication is also often referred to as therapeutic communication.

In the field of psychology, specifically in psychotherapy, therapeutic communication involves utilizing healing techniques to facilitate an exchange of messages between the therapist and the patient. The goal of this communication is to foster beneficial social relationships and ultimately aid in the patient's healing process. This approach is considered a professional action and falls under the umbrella of interpersonal communication, with the intention of promoting mutual understanding between the therapist and patient (Rahman, 2016).

The benefit of therapeutic communication is to encourage cooperation between nurses and patients through a nurse-patient relationship. Then it helps patients clarify and reduce the burden of feelings and thoughts and can take effective action for the patient (Suciati, 2015).

### Interpersonal Communication

Interpersonal communication is face-to-face interaction between two or more people. It can be ongoing and allows for direct observation of verbal and nonverbal cues (Aesthetika, 2018). Put simply, the process of interpersonal communication happens when the sender uses both verbal and non-verbal methods to convey information to the recipient through spoken and written communication. This process involves various components of communication that

work together in harmony and are influenced by the characteristics of the individuals involved (Rochmawanti, 2012).

Previous research on interpersonal communication in the health sector indicates that interpersonal communication between medical staff begins with a positive and empathetic approach to create patient openness and provide support. Then communication barriers such as prejudice and language differences were discovered. Communication can be established well by utilizing aspects of a humanistic approach such as openness, empathy, supportive attitudes, positive attitudes, and equality (Firdausi & Nasionalita, 2022).

According to other research, this type of interpersonal communication is distinguished by five quality aspects: openness of information, empathy by feeling each other's situation, providing support in the form of motivation and material, positive attitude by expressing happiness, and equality in relationships. Relationship maintenance strategies such as sending photos or videos, openness of feelings and mutual respect, commitment to maintaining relationships, the existence of social networks, and the division of tasks from each role all contribute to this (Aldira & Agustin, 2022).

### Social Penetration Theory

Social penetration theory according to Altman and Dalmás Taylor in the book *Interpersonal Communication Concepts and Basic Theories* (Kurniawati, 2014) is a theory that can help people interact from ordinary things to more intimate things. Social penetration theory or what is also commonly called onion skin theory explains the process of social communication by forming a pattern of relationship development. This theory states that a human cannot establish a close relationship in a short time, but rather needs time as a special closeness to open up. Usually someone who has just interacted will start small talk as a formality. At first glance it doesn't seem important, but this is the first step in the next process of getting to know you better and establishing a more intimate relationship (Kustiawan et al., 2022).

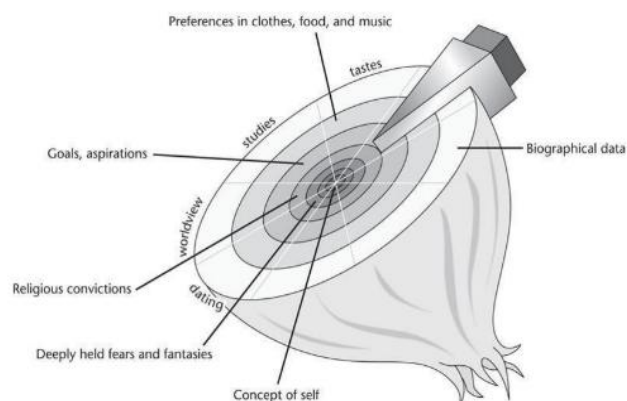


Figure 5. Analogy of onion Skin  
(Resource: Shanaz, 2021)

According to Altman and Tylor, social penetration does not just happen. It must go through several stages from a shallow relationship to more intimate relationship as follows: 1) the orientation stage, which is the initial stage of exchange information between individuals. Individuals can gradually open themselves up through introductions and sharing general information with other people. 2) the exploration active exchange stages, is the second stage which will experience a move to a deeper level of disclosure than the forts stage. Individuals have started to open up a little and tell other things. The find comfort or can ties if they find incompatibility with each other. 3) Affective stage is an advance stage where individuals will share information that is private or personal. In this stage, individuals have selected parties

with whom they can exchange information more deeply and have found compatibility and comfort. 4) stable exchange stage, the final stage of all core stages. This stage enters a very intimate phase, such as beliefs and ways of seeing things. This stage involves getting to know the individual very deeply.

The basic assumptions in the theory of social penetration according to Altman and Taylor in West & Tumer are: 1) Relationships progress from ordinary things to more intimate things. 2) In general, the development of the relationship is systematic and predictable. 3) Building relationships requires withdrawal and dissolution. 4) Self-disclosure is one of the important things in building a relationship. Non-intimate relationships move towards intimate relationships, because of self-disclosure (Wulandari, 2013).

### **Health Communication Style**

Communication style influences the communication process. Everyone has a different communication style. Communication style is a person's perspective on interacting verbally and non-verbally. Communication style is a window to understand how the world views a person with a unique personality. An ineffective communication process can affect the communication style, so that the communication message does not arrive due to an inability to convey the message.

In essence, communication carried out in interactions between nurses and patients can be oriented towards only one party, where only one person dominates the communication process. According to Bor & Llyord, in health communication there are two forms of communication orientation used, namely doctor/nurse oriented communication and patient oriented communication. A patient-oriented communication style is a form of communication based on what the patient experiences about his illness, which is a unique experience of the individual. The characteristics of this form of patient-oriented communication are as follows: 1) Doctors/nurses ask open questions. Open questions make patients feel involved in communication process, making them feel valued. Apart from that, patients can also express their thoughts and feelings about their health condition. 2) Doctors/nurses become active listeners. Active listeners are good facilitators so that patients can express their interests, desires and concerns openly and honestly. This helps the doctor determine the medical history, which is important information for diagnosis. 3) Doctors/nurses give patients the opportunity to express themselves, doctors give patients the opportunity to express their opinions, feelings and desires regarding the treatment of their disease (Vera & Turistiati, 2016).

The results of other research show that the interpersonal communication style between doctors and patients has two orientations (focus), namely oriented towards doctors with doctors and doctors with patients. Doctors are expected to not only be the ones who diagnose and treat illnesses but can also provide motivation, enthusiasm for patients and can psychologically calm down patients and have an empathetic attitude towards their surroundings. So, the role of doctors is not only as health workers but also motivators to encourage life. As a listener and give advice (motivator) (Turistiati & Poernomo, 2019).

In relation to nurses, the authority of nurses in statutory regulations (KEPMENKESRI No.1239/MENKES/SK/XI/2001) in carrying out nursing practices includes:

1. Carry out nursing care which includes reviewing the determination of nursing diagnoses, planning to carry out nursing actions and nursing evaluations.
2. Nursing actions as referred to in point a, include: nursing intervention, nursing observation, education and health counseling.
3. In carrying out nursing care as intended in number 1 and 2, it must be in accordance with the nursing care standards set by professional organizations.
4. Medical services can only be provided based on a written request from a doctor.
5. In carrying out the authority as intended, the nurse is obliged to:
6. Respect patient rights.

7. Refer cases that cannot be handled.
8. Keep secrets in accordance with applicable laws and regulations.
9. Provide information.
10. Request approval for the action to be taken.
11. Carry out nursing notes properly.

### 3. METHOD

This research uses a qualitative descriptive approach by describing the phenomenon being studied. Data collection techniques include observation, in-depth interviews and documentation. Observations were carried out by observing the communication style used by nurses with patients in doing out their work. The observations were done during working hours and breaks in order to obtain effective data. Interviews were conducted to obtain certain information regarding the interpersonal communication style between nurses and patients in health services at the West Purwokerto Community Health Center. The researcher asked directly regarding the data held by the West Purwokerto Community Health Center according to the researcher's study.

Researchers use data sources obtained from primary and secondary data. Primary data is data obtained directly, either written or orally (verbal) as well as through gestures or behavior carried out by research subjects/informants (non-verbal) (Arikunto, 2013). Secondary data is obtained indirectly by providing data to data collectors (Sugiyono, 2018). This research uses primary data consisting of observations and in-depth interviews. The number of informants was 12 people (4 nurses and 8 patients). Secondary data was obtained from archives and personnel documents for the 2023 West Purwokerto Health Center health profile, books and relevant articles from various journals.

In this study, researchers used source triangulation by obtaining data from various informant sources, namely nurses who were permanent nurses and patients who had received treatment at the West Purwokerto Community Health Center 3 or more times. After completing the research, the researcher confirmed with the research informants regarding the data they had previously provided. This is done to avoid misinterpretation.

### 4. RESULTS AND DISCUSSION

West Purwokerto Health Center (*Puskesmas*) is located on Jl. Mashuri No. 37B, Kalibogor, Rejasari, Kec. West Purwokerto, Banyumas Regency, Central Java. West Purwokerto Community Health Center is one of 40 Community Health Centers in Banyumas Regency and is part of the former Purwokerto Municipality area. This *Puskesmas* is the only *Puskesmas* in West Purwokerto District which oversees 7 sub-districts, namely Kedungwuluh, Kober, Pasir Muncang, Bantarsoka, Rejasari, Pasir Kidul, and Karanglewas Lor. The working area is approximately 739.72 Ha, with the largest area in Rejasari Village, namely 1.24 km (Resource: *Buku Panduan Profil Puskesmas Purwokerto Barat*, 2023).

#### **Interpersonal Communication Process Between Nurses and Patients**

A nurse who begins the communication process with patients has the desire to share information with the patients they treat. The communication process carried out by nurses to patients takes place as follows:

1. Nurse's desire to communicate

A nurse at the West Purwokerto Community Health Center started their communication with a light conversation with every patients who had received treatment at the West Purwokerto Community Health Center. The nurse tries to make patients comfortable first by asking for patients' name, addresses, and other light conversations that are not directly

related to their health condition such as daily activities, family and so on. This can create a good perception for patients when undergoing treatment at the West Purwokerto Community Health Center. Then, patients can open up more conversation with nurses.

## 2. Disclosure of messages by nurses

A medical personnel, especially a nurse, when they convey a message to a patient, will channel the contents of their thoughts using verbal and non-verbal communication. The information conveyed directly to the patient regarding health problems such as: 1) Carrying out well what the patient asks about health problems. However, nurses do not carelessly explain to patients. Nurses need to be careful, so the nurse will ask the doctor first, so that the message to be conveyed is not misunderstood. 2) Respond to the reactions of the patients they treat. Every patient who comes to West Purwokerto Community Health Center has a different character. Responses from patients will also vary. Nurses at the West Purwokerto Community Health Center are able to understand them. 3) Ask directly about the health of the patient they are treating regarding their health and health development. 4) Provide motivation to patients with the aim of recovering quickly and being enthusiastic about undergoing treatment. Such as reminders, taking medication regularly, maintaining diet and so on.

## 3. Sending messages by nurses

Messages are sent by selecting the channel that will be used by medical personnel to send messages. Researchers in the field discovered that interpersonal communication occurs directly because the treatment process provided by nurses at the West Purwokerto Community Health Center is direct and face-to-face. Because there are patients with serious illnesses who will come to that location more than once, communication can be done in stages.

Nurses communicate everything the patient requires by sending messages in the form of health information to patients. Because each patient's characteristics influence the process of conveying information, a nurse must understand the meaning being conveyed. Based on interviews, it was discovered that some patients struggled to communicate and did not function well with their hearing. Nurses at the West Purwokerto Community Health Center use facial expressions, show examples of disease complaints, and use the media to help convey the message smoothly. Nurses frequently use stationery as supplementary media.

## Communication Style Between Nurses and Patients

Nurses convey messages to patients using a direct or face-to-face communication style. Each nurse has a different style or way of communicating when interacting with patients. The communication carried out by nurses uses therapeutic communication which can create comfort for patients. Therapeutic communication is communication that can provide understanding between medical personnel and patients as a form of ability or skill to help patients adapt, therapeutic communication also includes interpersonal communication (Sukmanda & Maryani, 2015).

The communication style that occurs between nurses and patients at the West Purwokerto Community Health Center tends to be more patient-oriented. Patient-oriented communication style, such as nurses always listening to patient complaints until they are resolved. Nurses are also more communicative in providing open questions to patients by asking about their illness complaints, patients are given the opportunity to speak, and nurses listen without interrupting the patient's conversation. According to Bor & Llyord in the world of medicine, the characteristics of patient-oriented communication are a form of communication based on what the patient experiences about their illness, asking open questions by involving the patient and giving the patient the opportunity to express their opinions and wishes regarding the treatment of the disease. (Vera & Turistiati, 2016).

In this study, nurses always considered patients like their own friends and family. This aims to make it easier for nurses to communicate, not like patronizing patients. In this regard, the orientation between nurses, doctors and patients is different. Communication provided by nurses must foster an attitude that makes patients comfortable and feel appreciated. This has a

good impact and can be the first step for a nurse to find out more in-depth patient information or personal information. Finding out personal things about patients is not easy. This cannot happen if the patient has not found comfort and a sense of trust from the nurse, so it requires time and stages.

This is in accordance with the social penetration theory of communication, which is the process of social communication by forming a pattern of relationship development. A human being cannot establish a close relationship in a short time, but there needs to be time and stages to be able to create a special closeness to open oneself. Usually someone who has just interacted will start small talk as a formality before finally moving on to a more intimate or private relationship (Kustiawan et al., 2022).

In the research results, researchers found stages in the theory of social penetration.

#### 1. Orientation Stage

When nurses interact with patients from the start of arrival, for patients who have already had an examination or have just had an examination, the nurse always starts the initial conversation by asking the patient simple things starting from introductions, greeting the patient such as asking about today's news, asking for the patient's identity and share general information. Nurses also always treat patients like their own friends and family so that their delivery is more embracing and relaxed.

#### 2. Active Exploration Stage

Patients at the West Purwokerto Community Health Center do not hesitate to ask questions such as what healthy food is like, and the nurses are always willing to explain. On the other hand, some patients felt that the nurses did not act well, this could be seen from their curt attitudes and unfriendly facial expressions when interacting, so that patients felt unappreciated and did not want to ask the nurses again. This is the second stage, namely the stage of active exploratory exchange, where it can find a match or not, so that a patient can cut off the relationship or cannot be open, if they do not feel there is a match during communication.

#### 3. Affective Stage

Apart from health problems, nurses also do not hesitate to ask about the patient's family situation, background and activities and work as well. This makes patients more close and open. Provide motivation to patients to remain enthusiastic about undergoing treatment. Good service will also have a good impact on the interaction process carried out.

#### 4. Stable Exchange Stage

The final stage is called the stable exchange stage which is a very intimate phase such as growing trust and a way of looking at things. In this case, according to the research results, the trust that patients have in nurses or health centers occurs. This belief is like being compatible and feeling comfortable seeking treatment here, because there are some nurses whose family members always seek treatment at the West Purwokerto Community Health Center. So it is a form of trust that patients have in nurses or in the West Purwokerto Community Health Center.

### **Things that hinder successful communication between nurses and patients in health services**

There are points that hinder communication between nurses and patients. Patients who seek treatment at the West Purwokerto Community Health Center have different characters and vary in their communication skills. There are several patients who experience difficulties in communicating when telling the nurse about their complaints. Barriers that occur between nurses and patients are generally caused by several factors, including:



### 1. Differences in patient background and age

Patients who come for treatment at the West Purwokerto Community Health Center have different backgrounds. Differences in background can be a difficulty for nurses. So patients need more understanding and comprehension from a nurse. From the results of the research, researchers found that in patients who experienced language barriers, nurses sometimes still used health language or terms that were not understood by patients, especially elderly and elderly patients, resulting in a lack of understanding of the messages conveyed by nurses. Low level of education also influences an individual's ability to grasp.

Regarding the application of interpersonal communication carried out by nurses and patients in health services at the West Purwokerto Health Center, the researcher linked it with previous research as a reference, namely the journal entitled "Interpersonal Communication Between Medical Personnel and Patients (Study at the Balongsari Health Center, Tandés District, Surabaya) written by Ade Eka Rochmawanti in 2012. In this study, a similar thing was also found, namely that in elderly patients who needed more understanding, educational issues also influenced the message delivery process (Ade, 2012).

Language barriers are also called semantic disorders, namely communication disorders caused by errors in the language used in certain cases, such as words that use too much foreign language jargon that are difficult to understand, language that is not appropriate and cultural background is also one of the causes. misperception of the language symbols used (Alfi & Saputro, 2019).

### 2. Differences in patient temperament and character

A person's character influences how they respond to or receive ongoing communication. Researchers found that there were times when a patient acted arbitrarily when asking for a cover letter (referral letter) with an impolite speaking style. The patient also did not want to follow the procedures determined by the West Purwokerto Health Center. Some patients also do not want to be told by the nurse, so the message conveyed is mental/not accepted. This becomes an obstacle to communication built by nurses.

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### 3. Physical Barriers

Communication is sometimes not achieved well, considering that there is interference from both patients and nurses. There are several types of communication disorders, one of which is due to physical conditions. The existence of physical conditions or what is usually called physiological noise, according to De Vito, is an obstacle that exists in communications and communicators. For example, the sender has a visual impairment such as nearsightedness or a hearing impairment (Janadi & Putri, 2022). In this study, researchers found physical obstacles in a patient seeking treatment at the Pesien West Purwokerto Community Health Center with physical disorders such as hearing problems and difficulty speaking.

### **Solution to the obstacles that occur in communication between nurses and patients**

The solution to the communication barriers between nurses and patients at the West Purwokerto Community Health Center in serving patients is as follows:

1. Judging from the differences in patient background and age: Patients who come for treatment at the West Purwokerto Community Health Center have different backgrounds. Especially in the choice of language or terms used to convey the message. Moreover, elderly and elderly patients must be careful when communicating. Nurses at the Purwokerto Community Health Center are able to translate again using as simple language as possible. Then ask again whether you understand or not. Communication skills are really needed here and the nurses at the West Purwokerto Community Health Center are able to handle it.

2. Judging from the patient's disposition and character

Each patient also has a different character. Nurses usually find the character of patients who actively ask questions. However, there are also patients who are at their own discretion regarding the cover letter (referral). To deal with this, nurses at the West Purwokerto Community Health Center provide further explanations regarding procedures as clearly as possible to patients, so that patients do not act arbitrarily against the Community Health Center's policies. Explain in more detail.

3. Judging from physical condition

If we look at the physical condition of the communication carried out by nurses at the West Purwokerto Community Health Center, there are several patients who experience problems in communicating to consult the nurses about their complaints. The disturbance is in the sense of hearing and difficulty speaking becomes an obstacle. In this case, nurses dealing with patients with such conditions have their own way of handling them. Nurses use non-verbal communication such as demonstrating examples of complaints, then the patient interprets what they say or vice versa. Then with the help of facial expressions from the nurse you can clarify the message. Another solution to overcome this obstacle is to use stationery as a supporting medium. The nurse gives a piece of paper for the patient to write down his complaint or it is the patient who has brought a piece of paper from home that has his complaint written on it. This makes the patient examination process easier.

## 5. CONCLUSION

The interpersonal communication style between nurses and patients plays an important role in the health care process. Based on the research results, the researchers concluded as follows:

1. The communication style between nurses and patients at the West Purwokerto Community Health Center is more patient-oriented. In this case, the nurse provides questions and opportunities for patients to be more active in telling and explaining what they are feeling/complaining about and conveying the progress of health care results. Nurses always try to build closeness with patients so that patients are more comfortable in communicating with nurses. This makes the patient feel comfortable and able to open up. Nurses do not always discuss health problems only. However, nurses also sometimes, depending on the situation, ask questions regarding the patient's family and the patient's activities. To be able to have the patient's trust, nurses carry out several stages to build closeness from ordinary things to more intimate things. This stage is in the form of an initial stage or orientation by starting a light conversation with the patient. In the second stage, patients are more selective in finding matches with nurses. Some nurses are less friendly which makes patients feel less appreciated so they don't want to be open. In the third and fourth stages, patients feel that they have compatibility and trust in nurses, seen from patients who are more open about their personal life, patient activities and work, as

well as the trust of family members who always seek treatment at the West Purwokerto Community Health Center.

2. The communication process that occurs between nurses and patients at the West Purwokerto Community Health Center does not always run effectively. Barriers sometimes arise, including obstacles due to the patient's old age and lack of hearing, language barriers, lack of education, and emotional barriers. Patients feel that they do not understand the language of nurses who use health language or terms. There is a patient character who is difficult to communicate with because he has a tough attitude and wants his own way. Another obstacle in terms of physical condition, nurses found noise in the form of interference with the patient's sense of hearing and speaking. Barriers due to hearing loss are also called physiological noise. However, the obstacles that occur above can be handled well by nurses at the West Purwokerto Community Health Center. Each nurse has their own skills and ways of dealing with patients. So, interpersonal communication between nurses and patients can take place effectively.
3. The solution to overcome language barriers is usually for nurses to repeat their messages using simpler language and be more careful when explaining to elderly patients by maintaining intonation when speaking. Then the solution to dealing with patients with a strong character is usually for the nurse to explain the service procedures at the Puskesmas in detail and provide more understanding. The solution to physical conditions, namely hearing and speaking disorders, nurses use non-verbal communication. The nurse uses hand movements and facial expressions which the patient then interprets these movements. Another solution is to use stationery as a supporting medium.

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### **REFERENCES**

- [1] Ade N, E. R. (2012). *Komunikasi interpersonal antara tenaga medis dengan pasien (Studi pada Puskesmas Balongsari Kecamatan Tandes Surabaya)*. Skripsi. Surabaya: IAIN Sunan Ampel.
- [2] Aesthetika, N. M. (2018). *Buku ajar komunikasi interpersonal*. Sidoarjo: Umsida Press.
- [3] Aldira, N. P., dan Agustin, S. M. (2022). Komunikasi interpersonal jarak jauh ibu tenaga kesehatan dan anak di masa pandemi COVID-19. *Journal Ilmu Komunikasi*, 20(1), 70-87.
- [4] Alfarizi, M. (2019). Komunikasi efektif interprofesi kesehatan sebagai upaya peningkatkan kualitas pelayanan Rumah Sakit. *ETTISAL : Journal of Communication*, 4(2), 152-161.
- [5] Alfi, I., dan Saputro, D. R. (2019). Hambatan komunikasi pendamping sosial. *Journal Dakwah Dan Komunikasi*, 3(2), 193–210.
- [6] Arikunto, S. (2013). *Prosedur enelitian: suatu pendekatan praktik*. Jakarta: Rineka Cipta.
- [7] Fadly, M. (2018). *Komunikasi interpersonal perawat dan pasien dalam pelayanan rawat inap di Puskesmas Jumpandang Baru Makassar*. Skripsi. Makasar: UIN Alaudin Makasar.
- [8] Firdausi, M., dan Nasionalita, K. (2022). Komunikasi interpersonal perawat dan pasien Covid-19 di Wisma Atlet Kemayoran dalam pemulihan kesehatan. *eProccedins of Management*, 9(6), 3433–3438.

- [9] Janadi, H. A., dan Putri, Y. R. (2022). Analisis komunikasi interpersonal tenaga upahan bagian fasilitasi penganggaran dan pengawasan di kantor DPRD kota Madiun. *E-Proceeding of Management*, 9(4), 2355–2364.
- [10] Kurniawati, R. N. K. (2014). *Komunikasi antarpribadi konsep dan teori dasar*. Yogyakarta: Graha Ilmu.
- [11] Kustiawan, D. W., Lubis, I. Y., Natasya, I. S., Dewi, F. K., Supriadi, T., dan Anggianto, I. (2022). Teori penetrasi sosial. *Journal Edukasi Nonformal*, 3(2), 306-308.
- [12] Moleong, J. (2017). *Metode penelitian kualitatif*. Bandung: Remaja Rosdakarya.
- [13] Neuman, W. L. (2013). *Metodologi penelitian sosial: Pendekatan kualitatif dan kuantitatif*. Jakarta: Indeks.
- [14] Novitasari, I. (2016). *Studi deskriptif gaya komunikasi mertua perempuan dengan menantu perempuan yang tinggal dalam satu rumah di kelurahan Tanjung*. Skripsi. Purwokerto : Universitas Muhammadiyah Purwokerto.
- [15] Nugrahenti, M. (2020). Komunikasi kesehatan perilaku hidup sehat. *Journal Teras Kesehatan*, 3(2), 18–32.
- [16] Nugroho, A. W. (2009). *Komunikasi interpersonal antara perawat dan pasien (Studi deskriptif kualitatif aktivitas komunikasi terapeutik antara perawat terhadap pasien di Rumah Sakit Umum daerah Dr. Moewardi Surakarta)*. Skripsi. Surakarta: Universitas Sebelas Maret.
- [17] Nuryanto. (2011). Ilmu komunikasi dalam konstruksi pemikiran Wilbur Schramm. *Journal Komunikasi Masa*, 4(2), 1–16.
- [18] Rahmadiana, M. (2012). Komunikasi kesehatan: sebuah tinjauan\*. *Journal Psikogenesis*, 1(1), 88–94.
- [19] Rahman, N. (2016). *Komunikasi terapeutik antara perawat dan pasien di Puskesmas Antang Perumnas Makassar*. Skripsi. Makassar: Universitas Islam Negeri Alaudin Makassar.
- [20] Rilanto, V. M., dan Hermawati, T. (2021). *Peran komunikasi interpersonal dokter gigi dalam menangani kecemasan pasien anak (Studi deskriptif kualitatif komunikasi interpersonal dokter gigi dalam menangani kecemasan pasien anak di Klinik iDentist Pamulang Permai Kota Tangerang Selatan)*. Skripsi. Surakarta : Universitas Sebelas Maret Surakarta.
- [21] Roem, E. R., dan Sarmiati. (2019). *Komunikasi interpersonal*. Malang: IRDH.
- [22] Rokhman. (2021). *Purwokerto itu bukan kota, bukan kabupaten, lalu?*. Diambil dari <https://serayunews.com/purwokerto-itu-bukan-kota-kabupaten-lalu/>, diakses 08 Juli 2023.
- [23] Shanaz, N. V. (2021). Teori penetrasi sosial dalam pengungkapan diri homoseksual kepada keluarganya. *JRK (Journal riset komunikasi)*, 11(2), 188–203.
- [24] Suciati. (2015). *Psikologi komunikasi sebuah tinjauan teoritis dan perspektif islam*. Yogyakarta: Litera
- [25] Sugiyono. (2018). *Metode penelitian kuantitatif, kualitatif dan R&D*. Bandung: Alfabeta.
- [26] Sukmanda, A., dan Maryani, A. (2015). Kajian komunikasi terapeutik bidan dengan pasien. *Prosiding Manajemen Komunikasi*, dipresentasikan di Unisba Bandung, pada Agustus 2015.
- [27] Suranto AW. (2011). *Komunikasi interpersonal*. Yogyakarta: Graha Ilmu.
- [28] Turistiati, A. T. (2021). *Pengantar ilmu komunikasi*. Purwokerto : SIP Publishing
- [29] Turistiati, A. T., dan Poernomo, B. (2019). Interpersonal communication style between doctor and patient. Case study of XYZ Hospital Bogor, Indonesia. the 7<sup>th</sup> National and International Conference, dipresentasikan di Huachiew Chalermprakiet University Samutprakarn, Thailand, pada 12 juli 2019.
- [30] Vera, N., dan Turistiati, A. T. (2016). *Gaya komunikasi dokter terhadap pasien (Studi kasus di RSAU M . Hassan Toto, Bogor dan RS Premier Bintaro, Tangerang Selatan)*.

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*Prosiding Seminar Nasional Multidisiplin Ilmu*, dipresentasikan di Universitas Budi Luhur Jakarta, pada 30 Juli 2016.

- [31] Wulandari, T. A. (2013). Memahami pengembangan hubungan antarpribadi melalui teori penetrasi sosial. *Majalah Ilmiah UNIKOM*, 11(1), 105–106.