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*Call for Paper – 3<sup>rd</sup> International Seminar on Accounting Society  
“The Review and Outlook of The Economy after Covid 19 Pandemic”*

**THE EFFECT OF THERAPEUTIC COMMUNICATION ON  
PATIENT SATISFACTION OF RAJA AHMAD TABIB  
HOSPITAL IN RIAU ISLANDS PROVINCE DURING THE  
COVID-19 PERIOD**

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**ABSTRACT**

*This study was conducted to test whether there is an influence between therapeutic communication and the level of satisfaction of Covid-19 patients at the Raja Ahmad Tabib Hospital, Riau Islands Province. In this study, the sampling method used is the purposive sampling method by looking at the number of patients in the previous year, and the slovin formula is used. The data was obtained directly from the Raja Ahmad Tabib Hospital, which was collected from inpatient patient data, and separated again into only patients staying in the room which is a special room for patients with Covid-19. A total population of 552 patients with COVID-19 at the RSUD will be sampled. The data quality test was carried out by testing the validity and reliability as well as the classical assumption test, namely the normality test, heteroscedasticity test and multicollinearity test. The analytical technique used is multiple linear regression and hypothesis testing using F arithmetic, and t arithmetic to test the significance of the effect together with a level of significance of 5%. As well as correlation and determination tests. Based on the results of the deepening of the theory, it is hoped that the results of the research show that the results of the test or t count, Therapeutic Communication are proven to have a significant effect on the level of Satisfaction of Covid-19 Patients. While partially, aspects of Therapeutic Communication also significantly affect the level of satisfaction of Covid-19 patients at the level of significance of less than 5%.*

*Keywords: Therapeutic Communication, Patients Satisfaction*

**1. INTRODUCTION**

Communication is one that can affect patient satisfaction. Patient satisfaction is the responsibility of the health service. Health facilities and services that are in accordance with patient expectations, do not rule out the possibility that these patients will always come and seek treatment at these health services. Patients will always seek health services that match their expectations. If it is not as expected, the patient will look for a better health service facility or it will not disappoint (Imbalo, 2016).

Raja Ahmad Tabib Hospital is one of the Regional Government Hospitals located in Tanjungpinang City, Riau Islands. Currently, Raja Ahmad Tabib Hospital continues to make improvements and improvements, especially in terms of services, especially when the Covid 19 pandemic is ongoing. The increase in the number of patients makes the service of course be affected. Patient satisfaction is certainly greatly influenced by the competence of nurses, especially when communicating with patients.

Based on the results of previous research (Community Satisfaction Survey, 2020) it can be seen that patient dissatisfaction with health services at the Raja Ahmad Tabib Hospital

is influenced by nurse therapeutic communication factors such as the lack of a smile in providing nursing care. Many think or argue that therapeutic communication is synonymous with smiling and speaking gently. This is not wrong but oversimplifies the meaning of Therapeutic Communication itself, because the essence of Therapeutic Communication is communication that is carried out for therapy (Suryani, 2016).

The results of the study (Huda, 2019), regarding the relationship between therapeutic communication of nurses and the level of patient satisfaction at the Bunda Margonda Hospital, Depok, that the level of patient satisfaction is strongly influenced by the therapeutic communication of nurses on duty at the hospital. Communication is a process of exchanging information or processes that generate and transmit meaning or meaning (Sarlim & Rivai, n.d.). On the other hand, patients rarely try to consider whether the service provided is an effective and efficient effort in terms of time, effort and resources used (Mustofa, 2017).

## **2. LITERATURE REVIEW**

### **Therapeutic Communication**

Therapeutic communication is communication that encourages and helps the patient's healing process (Depkes RI, 1997). Therapeutic communication is interpersonal communication, meaning that face-to-face communication between people allows each participant to capture the reactions of others directly, both verbally and nonverbally (Astutik, 2018).

Therapeutic communication is communication that is consciously planned, aims and its activities are centered on the patient's recovery (Imbalo, 2016). While the patient's perception of the nurse's Therapeutic Communication skills is the patient's perspective in assessing the ability of nurses to communicate with patients in providing each nursing care service as a whole, both verbally and non-verbally.

### **Benefits of Therapeutic Communication**

The benefit of Therapeutic Communication is to encourage and teach collaboration between nurses and patients through the nurse-patient relationship. identify, express feelings and examine problems and evaluate actions taken by nurses.

Communication is a process that has the following elements: (Depkes RI, 1997).

#### **1. Message sender**

Communicator (message giver), usually also means the source of the message. Nurses are a source of messages or communicators for patients.

#### **2. Sign language (coding)**

Messages or news conveyed by nurses through speech, limb movements and so on. At the hospital, this message is usually in the form of advice from a doctor or nurse to a patient, the results of a consultation on the patient's status, reports, and so on. The content of this message is also decisive for the patient to respond and change his behavior.

#### **3. Media**

Media or means used by nurses to communicate with patients, usually using the five senses. Media that can be used also include telephone, radio, TV, microphone, memo, letter, computer, photo, bulletin board, workshop meeting, work meeting and so on.

#### **4. Interpret sign language**

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After the message is received through the senses (ears, eyes, and so on) then the recipient of the message must be able to interpret the symbols and forms of the message in question.

### 5. Message recipient

The communicant is the recipient of the message or the target object of communication activities. In the nursing process, the patient is the recipient of the message or communicant.

### 6. Feedback

Feedback is feedback or response, and is the patient's response to the message conveyed by the nurse.

### 7. Disturbance

Distractions are things that hinder or hinder communication and which impair or break concentration of attention so that the recipient misinterprets. Try to understand and be understood and be a good listener.

Therapeutic communication is communication that is designed and planned for therapeutic purposes, in order to build a relationship between nurses and patients so that they can adapt to stress, overcome psychological disorders, so that they can relieve and make patients feel comfortable, which in turn accelerates the patient's recovery process.

Therapeutic communication is interpersonal communication with the starting point of providing mutual understanding between nurses and patients. The goals of a therapeutic relationship directed at the patient's growth include: self-realization, self-acceptance and increased self-respect. So that Therapeutic Communication itself is one form of various kinds of communication that is carried out in a planned and carried out to assist the patient's healing process. (Murniaty, 2018)

Therapeutic communication is communication that is consciously planned, aims and whose activities are centered on healing patients and fostering a therapeutic relationship between nurses and clients. Therapeutic communication can also be perceived as a process of interaction between the client and the nurse that helps the client overcome temporary stress to live in harmony with others, adjust to something that cannot be changed and overcome psychological barriers that hinder self-realization.

The following is the definition and understanding of Therapeutic Communication from several book sources:

According to (Chriswardani, Suryawati & Dharminto & Zahroh, 2006), Therapeutic Communication is communication that is well established, communicative and aims to heal or at least can relieve and can make patients feel comfortable and finally get satisfaction. According to (Mustofa, 2017) 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.

According to (Ariani, 2016) Therapeutic communication is communication that is consciously planned, aims and whose activities are centered on the patient's recovery. According to (Achmad, 2019) Therapeutic Communication is a way to foster a therapeutic relationship where there is the delivery of information and the exchange of feelings and thoughts with the intention of influencing other people. According to Suryani (2015), Therapeutic Communication is communication that is carried out or designed for therapeutic purposes. A helper or nurse can help clients overcome the problems they face through communication..

## **Therapeutic Communication Function**

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Therapeutic communication can be used as therapy to reduce the patient's level of anxiety or increase the patient's confidence in the nurse. With the provision of Therapeutic Communication, it is expected to reduce the patient's level of anxiety because the patient feels that his interaction with the nurse is an opportunity to share knowledge, feelings and information in order to achieve optimal treatment goals, so that the healing process will be faster.

According to Ahmad (2019), the functions of Therapeutic Communication are as follows:

1. Increase the client's level of independence through the process of self-realization, self-acceptance and self-respect.
2. A clear self-identity and a high sense of integrity.
3. Ability to foster intimate and interdependent and loving interpersonal relationships.
4. Improve client's well-being by increasing function and ability to satisfy needs and achieve realistic personal goals.
5. The provision of Therapeutic Communication given by nurses to their patients contains the diagnosis of disease, benefits, urgency of medical action, risks, complications that may occur, alternative procedures that can be carried out, consequences that can occur if no medical action is taken, disease prognosis, impacts. of medical action and the success or failure of such medical action.

### **Purpose of Therapeutic Communication**

Implementation of Therapeutic Communication aims to help patients clarify the illness they are experiencing, as well as reduce the burden of thoughts and feelings for the basis of action to change into a better situation. Therapeutic communication is expected to reduce doubts and help take effective actions, strengthen the interaction of both parties, namely between patients and nurses in a professional and proportional manner in order to help solve patient problems.

According to (Kusumo, 2017), the purpose of Therapeutic Communication is to help patients clarify and reduce the burden of feelings and thoughts, help take effective action for patients, help influence others, the physical environment and themselves. Meanwhile, according to Ahmad (2019), the goals of Therapeutic Communication are self-awareness, self-acceptance, and increased self-respect, clear personal identity and increased personal integrity, the ability to form an intimacy, interdependence, interpersonal relationships, with the capacity to give and receive love, promote function and increase the ability to satisfy needs and achieve realistic personal goals.

### **Characteristics of Therapeutic Communication**

According to (Ariani, 2016) there are three characteristics that characterize and distinguish Therapeutic Communication from other communications, namely:

#### **a. Sincerity (genuineness)**

Nurses must be aware of the values, attitudes and feelings they have towards the client's situation. Nurses who are able to show their sincerity have an awareness of the attitude they have towards clients so that they are able to learn to communicate appropriately.

#### **b. Empathy (empathy)**

Empathy is a feeling of understanding and acceptance by nurses of the feelings experienced by clients and the ability to feel the client's personal world. Empathy is something that is honest, sensitive and not artificial (objective) based on what other

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people experience. Empathy tends to depend on shared experiences between people involved in communication.

### **c. Warmth**

With warmth, nurses will encourage clients to express ideas and put them into action without fear of being scolded or confronted. A warm, permissive and non-threatening atmosphere shows the nurse's sense of acceptance of the client. So that the client will express his feelings more deeply.

In addition, according to Ariani, (2016) states that there are several characteristics in nurse Therapeutic Communication, such as:

1. Openness, a reaction to the regulation of self-disclosure in others through thoughts and feelings.
2. Empathy, feeling like other people feel
3. Supportiveness, explaining and flattering or supporting
4. Positiveness, self-expression in assessing positive behavior towards self, other people and situations.
5. Equality, recognition, between sections (communicator-communicant) in dividing the communication function, there is a change of function (simultaneous).

This indicator will be used in the research, as an indicator that represents Therapeutic Communication.

## **Patient Satisfaction**

Satisfaction is a match between the patient's expectations about the services available and the perception of the service received. If expectations are exceeded then the service is as an extraordinary and very satisfying quality, if expectations are not met then the service quality is considered less or unsatisfactory, and if the expectations are in accordance with reality or the service received, the service quality is satisfactory (Mustofa, 2017).

Patient Satisfaction is the level of patient service satisfaction from the perception of the patient or closest family. Patient satisfaction will be achieved, if optimal results are obtained for each patient and health services pay attention to the ability of the patient / family, there is attention to complaints, physical environmental conditions and responsive to / prioritizing patient needs, so that a good balance is achieved between the level of satisfaction or results and the sufferings and toils that have to be experienced in order to obtain these results.

The level of satisfaction is highly dependent on the quality of a product or service. Quality in health services is multidimensional, so that each patient will assess the quality of service depending on their respective backgrounds and interests. Satisfaction with hospital services is also a multidimensional concept, so to talk about this will be difficult if it is not put in the context of improving quality and patient-oriented hospital services. According to Suyanto in (Astutik, 2018) Patient Satisfaction in this study includes four aspects as follows:

### **1. Convenience Aspect**

Part of the comfort aspect in the form of: hospital location, hospital cleanliness, room comfort, food and room equipment.

### **2. Aspects of Patient Relationships with Hospital Officers**

Part of this aspect is: friendliness, communication, responsiveness, support, and agility.

### **3. Aspect of Officer Technical Competition**

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Part of this aspect is in the form of: courage to act, experience, degrees, fame and courses.

#### 4. Cost Aspect

Part of this aspect is in the form of: the high cost of services, comparable to those obtained, affordable or not, the existence of waivers or not and the ease of obtaining health services.

### 3. DATA AND RESEARCH TECHNIQUE ANALISYS

#### Research Technique

In this study, the author uses a quantitative verification type of research. Quantitative Research is a research method based on the philosophy of positivism, used to examine certain populations or samples, data collection using research instruments, data analysis is quantitative/statistical with the aim of testing established hypotheses (Chriswardani, Suryawati & Dharminto & Zahroh, 2006 ). The total population in this study were all patients at the Raja Ahmad Tabib Hospital, during the year 2020 when the Covid 19 hit, there were 8301 patients. For this reason, samples taken from the population must be truly representative (representative) and the Slovin formula with an error rate of 5% is used to determine the number of samples and 382 patients are obtained, as the main sample.

#### Definition of Variables

Table 1 : Definition of Variables

<i>Variable</i>	<i>Definition</i>	<i>Indicators</i>
Therapeutic Communication (X)	Therapeutic communication is communication that is consciously planned, has a purpose and its activities are centered on the patient's recovery (Ariani, 2016)	1. Openness 2. Empathy 3. Supportiveness 4. Positiveness 5. Equality (Ariani, 2016)
Patient Satisfaction (Y)	Satisfaction is a match between the patient's expectations about the services available and the perception of the service received. If expectations are exceeded then the service is perceived as extraordinary quality and very satisfying, if expectations are not met then the service quality is considered less or unsatisfactory, and if expectations are in accordance with reality or the service received then the service quality is satisfactory (Mustofa, 2017)	1. Convenience Aspect 2. Aspects of Patient Relations with Hospital Staff 3. Aspects of Officer Technical Competence 4. Cost Aspect (Mustofa, 2017)

Source : Self Proceed (2021)

In quantitative research, data analysis is an activity after all respondents' data or other data sources have been collected. Activities in data analysis are grouping data based on

variables and types of respondents, tabulating data based on all respondents' variables, presenting data for each variable studied, performing calculations to answer the problem formulation, and performing calculations to test hypotheses that have been proposed. For research that does not formulate a hypothesis, the last step is not carried out (Suryani, 2016).

### **Linear Regression Analysis**

Regression analysis was used to predict the effect of the independent variable on the dependent variable. If the score of the independent variable is known, then the score of the dependent variable can be predicted. Regression analysis can also be carried out to determine the linearity of the dependent variable with the independent variable, because in conducting parametric correlation analysis it must first be known whether the variables to be correlated are linear regression or nonlinear regression because it will determine which correlation analysis technique will be used in analyzing data, regression analysis can also show the presence or absence of outlier data or extreme data. Simple linear regression analysis is used to determine the influence or linear relationship between one independent variable and one dependent variable (Kusumawardhany, 2018).

$$Y = a + bX$$

Explanation :

- Y : Predicted value of dependent variable.  
a : Constant, that is the value of Y if X = 0  
b : Regression coefficient, namely the value of the increase or decrease in the variable Y based on the variable X.  
x : Independent variable.

### **Hypothesis testing**

#### **T-test**

The t-test is a statistical test used to determine whether or not there is a significant (convincing) difference between the two sample means (two comparative variables).

The use of the t test can be distinguished:

1. T-test for correlated small and large samples.
2. T-test for small samples and large uncorrelated samples
3. If  $\text{sig} < 0.05$  or  $t \text{ count} > t \text{ table}$  or  $t \text{ count} < t \text{ table}$  at a significance level of 0.05 then  $H_a$  is accepted.
4. If  $\text{sig} > 0.05$  or  $t \text{ count} < t \text{ table}$  or  $t \text{ count} > t \text{ table}$  at a significance level of 0.05, then  $H_0$  is accepted. In the t test, the probability value can be seen from the results of SPSS processing in the sig column coefficient table or significance (Handayani, 2017).

## **4. RESULT AND DISCUSSION**

### **Respondent Profile Data**

Characteristics of Respondents in the research The Effect of Therapeutic Communication on Patient Satisfaction includes several variables, namely: a) Gender, b) Age, c) Education level, and d) Occupation. The next explanation is about the characteristics based on the six variables, along with the results of the validity test which shows that all statements can be considered valid because the Corrected Item Correlation values of all statements are more than the t table value, while the reliability test results show that the reliability coefficient value is greater than 0,70 so that the statement instrument used is declared reliable. The objects in this study were inpatients at the Raja Ahmad Tabib Hospital, Riau Islands in 2020, amounting to 382 people. The following are

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the results of the presentation of the validity and reliability tests for the 27 statement items contained in the research questionnaire, with data free from classical assumptions.

*Table 2 : Characteristics of Respondents*

<b>Characteristics</b>	<b>Total</b>	<b>Percentage (%)</b>
<b>Gender</b>		
<b>Male</b>	144	38%
<b>Female</b>	238	62%
<b>Age</b>		
<b>&lt;18</b>	14	4%
<b>19-28</b>	71	19%
<b>29-38</b>	98	26%
<b>39-48</b>	78	20%
<b>&gt;49</b>	121	32%
<b>Education</b>		
<b>&lt;High School</b>	280	73%
<b>Diploma</b>	32	8%
<b>Bachelor</b>	66	17%
<b>Master</b>	4	1%
<b>Doctoral</b>	0	0%
<b>Work</b>		
<b>Civil Servant</b>	31	8%
<b>Police</b>	1	0%
<b>Private Sector</b>	0	0%
<b>Entrepreneur</b>	63	16%
<b>Army</b>	7	2%
<b>Others</b>	280	73%

Source : Self Proceed (2021)

*Table 3 : Validity and Reliability Test*

<b>Testing</b>	<b>t-table</b>	<b>t-count</b>	<b>Description</b>
Validity			
Item 1	0.1962	0.5696	Valid
Item 2	0.1962	0.6212	Valid



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Item 3	0.1962	0.6218	Valid
Item 4	0.1962	0.5712	Valid
Item 5	0.1962	0.4643	Valid
Item 6	0.1962	0.6218	Valid
Item 7	0.1962	0.4633	Valid
Item 8	0.1962	0.6205	Valid
Item 9	0.1962	0.5702	Valid
Item 10	0.1962	0.6174	Valid
Item 11	0.1962	0.6165	Valid
Item 12	0.1962	0.4589	Valid
Item 13	0.1962	0.5659	Valid
Item 14	0.1962	0.5662	Valid
Item 15	0.1962	0.4605	Valid
Item 16	0.1962	0.4621	Valid
Item 17	0.1962	0.6206	Valid
Item 18	0.1962	0.753	Valid
Item 19	0.1962	0.4111	Valid
Item 20	0.1962	0.6733	Valid
Item 21	0.1962	0.7853	Valid
Item 22	0.1962	0.832	Valid
Item 23	0.1962	0.7632	Valid
Item 24	0.1962	0.5423	Valid
Item 25	0.1962	0.7631	Valid
Item 26	0.1962	0.4843	Valid
Item 27	0.1962	0.7532	Valid
Reliability			
X Variable	0.7	0.786	Reliable
Y Variable	0.7	0.734	Reliable

Source : Self Proceed (2021)

Table 4 : Regression Equation and t Test (Hypothesis Test)

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Coefficients <sup>a</sup>								
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95,0% Confidence Interval for B	
		B	Std. Error	Beta			Lower Bound	Upper Bound
		1	(Constant)	44.988			5.331	
	Therapeutic	.450	.063	.050	4.47	.000	-.154	.095

a. Dependent Variable: Satisfaction

Source : Self Proceed (2021)

Based on the table above, it can be seen that the form of the regression equation is obtained as follows :

$$Y = a + B X$$

$$Y = 44.988 + 0.450 X$$

The constant (a) is 44,988, meaning that if there is no Therapeutic Communication or the value is 0, then the Patient Satisfaction at Raja Ahmad Tabib Hospital is 44,988. The regression coefficient of the Therapeutic Communication variable (X) is 0.450, meaning that if the Therapeutic Communication is increased by 1 unit, then Patient Satisfaction at the Raja Ahmad Tabib Hospital has a significant increase, which is 0.450 units. The positive coefficient means that there is a unidirectional relationship between Therapeutic Communication and Patient Satisfaction. If Therapeutic Communication is improved, the Patient Satisfaction of the Raja Ahmad Tabib Hospital will increase.

Furthermore, it can be seen in the table as well, that because the value of t count > t table (4.470 > 1.98397) with a significance < 0.05 and the regression coefficient has a positive value in the Therapeutic Communication orientation stage, the hypothesis that states there is an effect of Therapeutic Communication on Outpatient Satisfaction Raja Ahmad Tabib Hospital stay is acceptable.

Table 5 : R Square

Model Summary <sup>b</sup>							
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics		
					R Square Change	F Change	Sig. F Change
1	.080 <sup>a</sup>	.736	.799	3.75263	.003	.225	.637

a. Predictors: (Constant), Therapeutic

b. Dependent Variable: Satisfaction

Source : Self Proceed (2021)

To find out how big the percentage of the influence of Therapeutic Communication on the Satisfaction of inpatients at the Raja Ahmad Tabib Hospital, it can be seen in the table above, which is 73.6%, while the rest is influenced by other factors outside the variables studied.

**5. CONCLUSION**

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From the results of the study, it was found that the influence of Therapeutic Communication at the orientation stage, work stage and termination stage on inpatient satisfaction at Raja Ahmad Tabib Hospital can be seen in the table which is 73.6% and the rest is influenced by other factors outside of the variables studied. . In the t test, it was found that the t count > t table (4.470 > 1.98397) with a significance of < 0.05 (0.000), which means that there is an effect of nurse therapeutic communication on inpatient satisfaction at Raja Ahmad Tabib Hospital.

This is in accordance with the research conducted by (Kusomo, 2019) on the effect of nurse therapeutic communication on patient satisfaction in outpatient hospitals in Jogja, which found that there was an effect of nurse therapeutic communication on satisfaction of outpatients and emergency rooms at RSUD Jogja. Also another study conducted by (Huda, 2019) whose results also stated that there was a significant relationship between nurse therapeutic communication and patient satisfaction, at RSUD X in Indonesia.

According to (Handayani, 2017) regarding "Factors related to the application of therapeutic communication by nurses to patients in the inpatient ward of the Raden Mattaher Jambi Regional General Hospital" states that there are several factors that influence nurses' education, length of service of nurses, knowledge of nurses, attitudes of nurses, and gender. The higher the education of nurses, the more skilled they will be in carrying out therapeutic communication. The longer the working period, the therapeutic communication can be carried out procedurally. The higher the knowledge of nurses also affects in conducting therapeutic communication with patients. A good attitude will be able to make nurses able to carry out therapeutic communication and in some respondents nurses apply therapeutic communication with patients less well. These factors can affect the process of therapeutic communication between nurses and patients in supporting the success of nursing care.

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