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## The Interpersonal Communication Strategy between Doctors and Patients

Karisma Erikson Tarigan<sup>1</sup> ✉ and Margaret Stevani<sup>2</sup>

<sup>1,2</sup>Fakultas Pendidikan Bahasa Inggris, Universitas Katolik Santo Thomas Sumatera Utara, Indonesia

✉ **Corresponding Author:** Karisma Erikson Tarigan, **E-mail:** [erick\\_tarigan2006@yahoo.com](mailto:erick_tarigan2006@yahoo.com)

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### ABSTRACT

Communication was a social process in which people used symbols to create and interpret meanings in their environment. The ability to communicate between doctors and patients determined the success of solving a patient's health problems. This study discussed what kind of interpersonal communication that the doctors used on multicultural patients at Mitra Sejati Hospital in North Sumatra, Indonesia. The methods used in this study were qualitative methods by using ethnography study. According to the study results, it was found that the multicultural communication process of doctors and patients initially proceeded in the form of verbal and non-verbal communication. Second, the barriers that occur in intercultural communication were language, perception, and cultural barriers. Third, the doctors used some techniques to make a successful communication, such as recognizing and naming the patient, greeting the patient, shaking hands or touching the patient, explaining the medical action taken, understanding the patient's condition through communication, and giving an opportunity to explain their conditions, gave a silent for a moment, and asked appropriate questions at the level of interpersonal communication with the patient.

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### 1. Introduction

Humans are social beings who live and perform all activities as individuals in social groups, communities, organizations, and societies. In everyday life, everyone interacts with each other. Therefore, humans cannot avoid the act of communication. Communication is an interpersonal interaction that uses a system of linguistic signs, such as linguistic "word" systems, verbal and non-verbal systems. This system can be socialized in-person/face-to-face or through other media (written, oral and visual). The success or failure of communication is knowing and studying the elements included in the communication process. These elements are sources, messages, channels, recipients, influences, and feedback. This communication process includes exchanging opinions, providing information, and changing attitudes and behaviors (Jenicek, 2018). In the process of communication, they also strive for the effectiveness of communication. The effectiveness of the problem is the recipient's change occurs as a result of the fact that the message was received, either directly or indirectly, depending on the sender's wishes.

Intercultural communication can be understood as a relationship or relationship between people of different cultures such as ethnicity, ethnicity, race, language, and society. (Regar et. al, 2014). Since most of the communication that occurs is verbal, the ideas are more direct and real communication makes more sense. In communication, there are important factors that underpin the success of communication, namely language. language is an integral part of sociocultural (Fauzia, 2015). Under certain conditions, language can influence and shape the behavior and attitudes of society, particularly in terms of ways of thinking, perception, perspective, and lifestyle. A cultural system belonging to a society is reflected in that language, creating kinds of languages that characterize speech. Over time, the diversity of this language will affect their communication, especially interpersonal communication with cultural backgrounds and different languages (Venus et. al, 2019).

At Mitra Sejati Hospital, the doctors are medical staff who play an important role in solving the health problems of the patients. Communication is an important basis in the process of diagnosis, treatment, and prevention. An intercultural communication becomes an emergency in this healing process. The problem is a relationship that happens between a doctor and a patient that does not always work in harmony. Conflicts and misunderstandings or communication problems often occur due to differences in

perception. This perception often arises due to differences in cultural background and different educational levels giving a rise to different interpretations of communication. On the other hand, the language used in daily life is not always successful due to the conflicts in the interpersonal communication culture between doctors and patients at Mitra Sejati Hospital.

In the context of patient-to-cultural communicators, the doctors as communicators, often do not understand the meaning of the messages conveyed by the patient. This problem is always happened due to the patient's cultural and linguistic differences. At this level, the doctors lack the right advice and the right strategies to communicate with patients from different cultural backgrounds. The strategy used by the doctors is to interpret and predict the attitude of patients toward their acceptance. One of the references used is information related to the patient's age and education as well as the patient in which area it comes from.

At this level, it is necessary to think about communication strategies or methods between doctors and patients based on an understanding of cross-cultural communication. The goal is to build a common understanding of communication between doctors and patients, to reduce uncertainty in communication. Based on this, the topic of the proper formulation of the question is "What is the form of interpersonal communication between doctors and patients in the process of providing medical care at Mitra Sejati Hospital?".

## **2. Literature Review**

### **2.1 Cultural Identity**

Etymologically, the word identity comes from the word identity, which means (1) condition or wealth about the same thing, a similar situation one another; (2) a condition or fact about something that is there between two people or two things; (3) a condition or fact that describes something that the same between two people (individuality) or two groups or thing (Darmastuti, 2013). Cultural identity is a feeling (emotional significance) of someone to join have (sense of belonging) affiliation with a certain culture which is formed in the life of a society. This will affect each person's self-perception members in society. How do they look at themselves, how they behave and behave, strongly influenced by identity their own culture (Slee & Skrzypiec, 2016).

Validation of identity is essential for psychosocial well-being. In order to form an identity, an individual must make a choice, that was fidelity, ideology, and occupation. Fidelity means a commitment to a group of people and a set of ideas. Ideologies mediate the choices of commitment, and the choice of an occupation is integral to the coherence and the continuity of a person's identity (Deters, 2011). In the practice of the concept of cultural identity can be used in two ways : (a) in training professional practitioners to see people as more than belonging to ethnic minorities, were focusing on other aspects, such as age and gender, gives the practitioner the possibility to be conscious of their cultural presuppositions of the client; and (b) in training practitioners to be conscious of their own cultural identity in interaction: when does the nurse actualize her gender identity? When does she use her professional identity? In relation to professional practitioners, their professional identity is of obvious interest (Titley, 2004).

### **2.2 The Symbolic Interactionism**

Symbolic interactionism is a movement in sociology that focuses on the structure, meaning, and ways of humans in society through conversation. According to Littlejohn (2012), the rationale of symbolic interaction is summarized as follows :

1. People make decisions and act according to their subjective understanding.
2. Social life is made up of interactive processes, not arrangements, so it is always changing.
3. People understand their experience through the meanings found in the symbols of their primary group, and language is an important part of social life.
4. The world is made up of social objects with defined social names and meanings.
5. People's actions are based on their mutual interpretation, in which objects and actions are related in the considered situation and it is explained.
6. Ego is a meaningful object and, like all social objects, is introduced through social interactions with others.

The meaning in symbolic interactionism is formed in the context of social interaction and is delivered by the person from that interaction. Meaning created by a person is not merely an application of the meaning at hand because these perspectives fail to appreciate the usage of meanings by the individual in his or her actions involving a specific process of interpretation (Brake, 2019). According to symbolic interactionism, the three main concepts are based on social actions, including the three-part relationship of an individual's initial physical movements, the reaction of others to movements, and the consequences. The result is, which is the meaning of action for the communicator. What is important is related to all three, not just all of these. There are 3 main principles contained in the theory of symbolic interactionism, namely meaning, language, and thought (Griffin, 2003). Meaning in interactionism symbolic can be understood in a concentrated way on 3 main premises, namely:

1. People act on the importance of something they have.

2. Meaning arises as a result of social interaction with other people.
3. Meaning is refined in the process of social interaction (Soeprapto, 2002).

### **2.3 The Strategy of Communication**

A communication strategy is the combination of communication planning and management to achieve goals. To achieve this, a communication strategy must be able to demonstrate how an operation should be conducted tactically in the sense that it is appropriate to the situation (Effendy, 2004). As with any communication strategy in any field, a communication strategy must be supported by theory, as it is knowledge based on past experience and has been tested to be true. For a reliable communication strategy, everything must be connected with the component that is the answer to the question (Gorin, 2014) :

1. Who? (Who is the communicator)
2. Say what? (which message is being used)
3. Which channel? (what environment are you using)
4. To whom (who is involved)
5. What is the effect? (The effect he expected)

The purpose of the communication strategy is to motivate, educate, disseminate information, and support decision-making (Naidoo & Wills, 2016). The factors to influence the communication strategy according to Liliweri (2011), are:

1. Identify the communication goals  
Before planning the communication, it is best to understand who the communicator will be the first of the communication goals. The factors that need to be considered in communication are the factor reference system, the reference frame formed from the results of experience, education, lifestyle, the standard of living, social status, and other factors. The second factor is the circumstances and conditions when the communicator received the message delivered and the physical and psychological condition of the communicator when the message was received.
2. Media selection  
There are many types of media, such as: written or printed media, images, audio and audiovisual. To achieve the communication objectives, the communicator can choose the appropriate medium depending on the goal achieved, the message will be conveyed and the techniques to be used.
3. Evaluating the purpose of a message  
A communication message has a specific purpose, A communication message consists of the message content and symbols. The communication of the message body can be unique but the symbols used can be different, such as language, images, colors, gestures, etc. The most used symbol in communication is language because language can express thoughts and feelings, events, and an opinion.
4. The communicator's role in communication  
The important factors that exist in the communicator are the attractiveness of the source and the reliability of the source. Communicators will succeed in communication if the communicator believes that there are similarities between the communicators, so that communicator is willing to follow the message initiated by the communicator.

### **3. Methodology**

This study uses qualitative research methods with an ethnographic approach. Qualitative research is research carried out in a certain setting that exists in real life with the aim of investigating and understanding phenomena what happened, why it happened and did how it happened (Fitrah & Luthfiyah, 2017). While ethnography is a work of knowledge that includes research techniques, ethnographic theory, and different descriptions of culture (Spradley, 1997). Ethnographic research begins with the selection of an ethnographic project, ethnographic data collection, ethnographic records, and ethnographic data analysis (Spadley, 1997).

This study begins with the selection of an ethnographic project made from direct observation at Mitra Sejati General Hospital which is located on A. H. Nasution Street Number 7, Pangkalan Mansyur, North Sumatra, Indonesia. The people who provide resources for this study are medical staff including 1 doctor specialist, 2 nurses, and 2 patients. The data collection techniques in this study are using direct observation and in-depth interviews. In this study, the writers directly observe Mitra Sejati Hospital and interviewed key people in depth, namely doctors and patients.

The data analysis technique used by the writers in this study is a qualitative data analysis proposed by Sugiyono (2012). There are four steps in data analysis, namely domain analysis, classification, component analysis, and cultural subject analysis. In the first step, the writers perform an analysis of domains. At this point, the writers try to get insight into the intercultural communication that occurs between doctor and patient at Mitra Sejati Hospital. At the analysis stage of classifications, the writers start the analysis by focusing on doctor-patient communication focusing on cross-cultural communication. Next, the writer begins to analyze the

intercultural communication that occurs between physicians and patients of different cultures, languages, and educations and to explore barriers for communication between these cultures. Based on the results of this analysis of data performed at multiple levels, the writers attempt to develop a communication strategy between doctors and patients of Mitra Sejati Hospital.

#### **4. Results and Discussion**

##### **4.1 Doctors as Continuity Communicator Medical Services**

The act of communication that occurs between the doctor and the patient at Mitra Sejati Hospital occurs in two forms of communication, namely verbal and non-verbal communication. Verbal communication is deep communication that conveys the message by using oral and written (Effendy, 1998). Verbal communication occurs between doctor and patient, beginning with the doctor saying hello, asking how you are, and checking the patient's condition.

*Example 1: Usually, when I visit a room, I am the first person who greets someone like "Hello or good afternoon sir/madam?" "How's everything?" Then check on the patient and then talk about it. "How is his health progressing?" I usually use Indonesian, I do not speak Batak or Karo language, but sometimes I slip a few basic words.*

The analysis of example 1 shows that verbal communication in communication intercultural activities are: 'What we do with a patient is to pay attention to say hello, and to use Indonesian interspersed with batak or karo, even though this is just the base language.' The goal is to establish rapport with the patient. This step is done to create intimacy and make the patient feel comfortable. The doctors in Mitra Sejati Hospital use the Indonesian language and this is the same as the study stated in the results of the study done by (Hadi, 2017), who states that people who communicate between cultures must always develop attitudes tolerance, and positive thinking for others.

*Example 2: "When I greet a patient, I always smile to make the patient feel appreciated. Then things you should not miss is eye contact, because at that point, indirectly, we are building patients' trust in us. I also often use hand movements so that the patient can understand, especially many patients who cannot speak, to facilitate they can understand what I say. Or the patients can just nod their head as a sign of understanding."*

The analysis in example 2 shows that the second form of communication between doctor and patient at Mitra Sejati Hospital is non-verbal communication. non-communication. Verbal communication is the communication using symptoms related to movement, attitudes, facial expressions, and symbolic signs, with symptoms resembling non-verbal spoken and written (Effendy, 2004).

*Example 3: "When you see a patient, you must be in a happy, smiling mood, especially when you are in charge, the patients will be your responsibility. Especially after the patient has undergone surgery, so you must be happy, we as medical staff have to give them positive energy. In addition, I often touch as lightly as when checking the patient's temperature, as well as giving words of encouragement to when patting the patient's shoulder."*

The analysis in example 3 shows that in cross-cultural communication between physicians and patients, non-verbal communication is used to build patient trust, motivate patients, give spiritual gifts even as a form of reward. Feedback in a communicative act has the main role or influence determines whether a communication is good or not (Subandi, 1982).

##### **4.2 Language Barriers between Doctor and Patient**

In the process of intercultural communication, negative reactions and personal judgments about culture can create barriers to communication. Therefore, understanding other cultures is held by communicators when we communicate in intercultural communication becomes very important. The knowledge that we have about intercultural communication, as well as the ability to effectively use intercultural communication, which can help bridge cultural differences, reduce problems, and help build more harmonious and productive relationships (Ridwan, 2016). The language barrier, which occurs because the sender of the message (sender) and the receiver of the message (recipient) use a different language or use words that the recipient of the message does not understand (Chaney & Martin, 2004).

*Example 4: "When I was an intern at Mitra Sejati Hospital, the most common problem is the differentiation of language. The majority of patients who come here are from the countryside and there are a lot of them who cannot speak the Indonesia language and only speak the regional language, while we are the medical team here also the majority from outside the area and we cannot speak Batak or Karo language too."*

Based on the analysis of example 4, if communication does not achieve the same in the meaning of the message, then language may be an obstacle to communication. As a result, the medical department doctor's health the process of serving the patient is a bit difficult when is sending information. This is because the majority of doctors calling are immigrants rather than the residents.

Example 5: *"It is hard to say go straight to the doctor, sometimes language the doctor's language. It is very difficult to understand, especially I do not speak Indonesian fluently, and usually, I just nod."*

Based on the analysis of example 5, people understand their experiences through the meanings found in the symbols that belong to their main group and the languages that are an important part of social life (Littlejohn, 2012). Based on this theory, languages are a very important part of social life, including communication intercultural relationships between doctors and patients. When language cannot be the medium of connection between the communicator and the communicator, what will happen is the end of the communication that is taking place.

#### **4.3 Perception Barriers**

Perceptual barriers related to listener motivation level (motivation). That is, the listener receiving the message has no desire to receive the message or the motivation to become a communication barrier (Chaney, 2004). Awareness is the observation of an object, event, or relationship obtained in order to infer information and interpret a message (Grace, 2007).

Example 6: *"Patients know that when they go to the hospital they think they get better in a few days, and it takes a short time to recover from a medical point of view. However, there is an impact on the case. For example, if it's already been 3 or 4 days and you can't go home, finally the patient or his/her family member asks, "When are you going home?", "Why does not the get better, and so on. He comforts them by saying that he will definitely be better."*

Based on the analysis of example 6, it can be summarized into the actions taken by patients receiving treatment at Mitra Sejati Hospital cannot be separated from the understanding and interpretation of the hospital, treatment, and recovery process. Their understanding and interpretation are closely related to their knowledge. Individual behavior is based on interpretation and on consideration and interpretation of objects and related behaviors in situations (Littlejohn, 2012).

Example 7: *The patient says: "There are good, boring. Because I followed these whatever they (doctor) say, like taking off the medicine they give, I also eat it for food. But until now I am still there (Mitra Sejati Hospital). It has been my four days here. The doctor said in time it will heal, it will heal quickly, but the disease has not healed, I am bored here."*

Based on the analysis of example 7, differences in perception are not uncommon due to negative opinions held by other participants of the communication due to unclear meaning. This cognitive barrier was attributed to the responses of communication participants. The results of this study show that in the process of intercultural communication, individuals tend to draw conclusions on the part of the interlocutor on the basis of the initial perception that he accepts as a form of interpretation what does he get from the communication process between the media participants (Putri, 2014).

#### **4.4 Doctor's Cross-Cultural Communication Strategies for Patients**

The essence of communication lies in the process, the action of "helping" the relationship between the sender and the receiver of a message across time and space. When this process encounters a bottleneck, the process fails (Liliweri, 2003). Thus, this is also what happens in Mitra Sejati Hospital, which is an intercultural communication between doctors and patients. If a disruption occurs in the intercultural communication process, the communication that occurs between the patient and the paramedics at the Mitra Sejati Hospital also does not work effectively.

Thus, the doctors must think of it as a way for the message to set the way for the patient. Because, in fact, communication itself is message management aimed at making meaning. A strategy used by the doctors to change patient perceptions of the treatment process is to educate patients. This training is carried out initially when patients decide to be hospitalized.

Example 8: *"For the efforts, we have put into the patient awareness we explained at the beginning of about the length of time patients have to endure, for example, the recovery after fracture surgery (fracture). It is not more than two months, so the patient is not worried, and the explanation about why he still has not recovered, apart from every visit, we always explain for family (patients)."*

Example 9: *"For this, we usually do socialization in villages, where we explain the dangers of people breaking bones so being massaged directly by a shaman resulted in the most deaths. be it complete paralysis or amputations, there we also play videos of examples of people who lost their arms due to improper handling."*

Based on the analysis of example 8 and example 9, by identifying problems that patients have, it can be used as a guide for the doctors to take action to educate underperforming patients, understanding, and awareness of the healing process. And changing human behavior on a larger scale through the transfer of new ideas (Cangara, 2014).

In addition, the doctors at Mitra Sejati hospital use special techniques to communicate with patients as follows:

1. Identify and name the patient.  
This technique is used as a starting point to connect nurses with patients in therapeutic communication. In addition to recognizing and naming patients, also aims to reduce errors when performing medical actions.
2. Greeting  
The greeting is a way of respecting the patient according to polite theory in communication.
3. Shake or touch  
Shaking hands or at least making an intention shows how deeply the nurse cares for the patient. Especially if the patient is a child, touching is very necessary, because a child will be very happy if he or she is taken care of.
4. Explain medical action taken.  
By providing an explanation for every medical action, its purpose is to inform the patient and it is also to seek the patient's consent because, at Mitra Sejati Hospital, every patient has the right to receive or receive refuse any medical treatment.
5. Find out about the patient's condition by contacting them  
Give the patient the opportunity to explain his or her condition. This technique is performed to involve the patient actively in the interaction, including providing information about their current condition.
6. Pause for a moment.  
Silence allows nurses and patients to organize their thoughts. This momentary silence is very is especially helpful when a patient has to make a decision.
7. Ask relevant questions.  
This technique provides patient-specific information. Therefore, the question asked relates to the subject under discussion.

## **5. Conclusion**

Communication exists between doctor and patient using verbal and non-verbal communication. Communication speech used includes saying hello to, asking about the patient's condition, asking about the patient's activities at home. When performing health care procedures, the doctors use Indonesian and the patients use Batak and Karo languages. Non-verbal communication during communication between doctor and patient at Mitra Sejati hospital, namely a smile (facial expression), body movements (gestures), and making contacts body like touching the forehead of patients and patting the patient on the shoulder.

There are various obstacles at Mitra Sejati Hospital, namely cross-cultural communication barriers, language barriers, and perception barriers. In interpersonal communication with patients, the doctors at Mitra Sejati Hospital use techniques such as recognizing and calling the patient's name, greeting or greeting, shaking hands or touching, explaining medical measures taken, trying to find out the condition of patients through communication by giving patients the opportunity to explain their condition, pause for a moment, and ask relevant questions.

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