



Therapeutic Communication Between Therapist and Fracture Patient at *Padepokan Padjadjaran Cimande*

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ABSTRAK

Penelitian ini bertujuan untuk mengetahui komunikasi terapeutik antara terapis dan pasien patah tulangpasien patah tulang di Padepokan Padjadjaran Cimande. Metode yang digunakan dalam penelitian ini adalah metode pendekatan kualitatif deskriptif dengan paradigma konstruktivisme. Teori yang digunakan dalam penelitian ini yaitu teori akomodasi komunikasi. Teori ini digunakan untuk mengetahui bagaimana komunikasi terapeutik yang dilakukan terapis dengan pasien patah tulang dengan mengkombinasikan unsur medis dan tradisional. Teknik pengumpulan data yang digunakan yaitu observasi langsung, wawancara mendalam, dokumentasi serta studi pustaka. Hasil penelitian ini menunjukkan bahwa komunikasi terapeutik telah dijalakankan oleh padepokan dan menjadi salah satu cara dalam berkomunikasi maupun mengedukasi pasien dalam pengobatan patah tulang.

Kata kunci: Komunikasi, Terapeutik, Terapis, Pasien, Padepokan, Cimande

ABSTRACT

This study aims to determine therapeutic communication between therapists and fracture patients at Padepokan Padjadjaran Cimande. The method used in this research is a descriptive qualitative approach with a constructivist paradigm. The theory used in this research is communication accommodation theory. This theory is used to find out how therapeutic communication is carried out by therapists with fracture patients by combining medical and traditional elements. The data collection techniques used were direct observation, in-depth interviews, documentation and literature study. The results of this research show that therapeutic communicating and educating patients in the treatment of fractures.

Keyword: Communication, Therapeutic, Therapist, Patient, Padepokan

Introduction

Therapeutic communication is used in the medical world, but it is also used in traditional medicine, because this therapeutic communication is a way of communicating to establish a mutual trust system between patients and medical personnel or traditional therapists. To achieve its goals, a nurse must first be able to understand therapeutic communication, so that it is easy to establish a close relationship between patients and nurses (Azzubair, 2021). This is also closely related to how the success of interpersonal communication can be well established in the delivery and reception of a message (Rafi, 2023).

The success built in therapeutic communication will determine how the patient responds regarding the quality of a health service that is considered quality or quality, because most of the dissatisfaction that is born from patients and is usually caused by the doctor's lack of sincerity in communicating with the patient. The correct application of therapeutic communication is needed because it will reduce the stress experienced by patients Hasanah in (Kristyaningsih, 2021). This is also related to how communication patterns are created properly, there must be an interactive that occurs from patients and servants, in this case doctors and the like, to achieve the desired goals (Wahyu, 2022).

Communication in the treatment of therapists is called therapeutic communication, communication carried out by a therapist when identifying or treating known injuries, the therapist must be able to provide treatment that helps in healing fracture patients. Therefore, a therapist must increase the knowledge and applicable skills of therapeutic communication so that the needs and satisfaction of patients are met. Because therapeutic communication is communication that encourages a patient's healing process.

Padepokan Padjadjaran Cimande is a martial arts school based on the Cimande tradition, which is why it has created a traditional treatment as a form of community service based on the aspect of the Padjadjaran Cimande school. The hermitage is located at Jalan Setapak No.48, Sasak Panjang, Tajur Halang, Bogor, West Java which was established in 2009 by Yusuf Sarwo Edi or commonly called Kang Iyus who is a teacher of Cimande traditional culture.

The first method of traditional fracture treatment in Padepokan Padjadjaran Cimande is to recite prayers because prayers are a tool or a form of belief from Muslims, as well as preparing mentally to treat the patient, if our mentality is not strong we will not be able to do the treatment process, as well as preparing all forms of equipment used to perform the treatment. In Cimande traditional fracture treatment, unlike other traditional treatments that use olive oil or coconut oil, Cimande therapists use Cimande oil that they have made themselves, but they also provide other oils such as olive oil. The traditional treatment of Padjadjaran Cimande is a local wisdom that must be maintained, not only as a specialty but also as an attraction or destination in the field of community-based health, as it is known that local wisdom is able to support various things that are unique and distinctive from the local community (Rasyid, 2021).

Anwar (2020), said that traditional medicine is a form of disease healing carried out by experts in handling it. Modern system medicine is called medical personnel or doctors, while traditional system medicine is known as healers, shamans or therapists. Doctor or therapist are two professions that are well known by the public. The development of traditional medicine occurs because of the awareness of certain ethnic communities to the potential value of local culture (Mailin et al., 2023). Suheri (2019), said that Communication Accommodation Theory (CAT) is a theory introduced by Howard Giles. This theory rests on the premise that when speakers interact they adjust their speech, vocal patterns and actions to accommodate others. This theory leads to interpersonal adaptation, because when two individuals communicate, they tend to make accommodations to achieve goals, such as adjusting language, accents and body styles as a communication response to the other person.

Communication accommodation is fundamental to interaction and serves two congnitive functions related to understanding and affective related to feelings, moods and behavior (Giles, 2016). Dragojevic (2016), said that communication accommodation theory explains and predicts the form of communication adjustments and models how a person in interaction perceives, evaluates and responds to them. Therapeutic communication is communication that is planned and carried out to help the patient's healing/recovery. Therapeutic communication is professional communication for nurses who relate to patients for therapeutic purposes. Therapeutic communication consists of verbal and nonverbal communication which is used to form a relationship between the therapist and patient in meeting needs. Therapeutic communication is comfort, safety, trust, or health and wellbeing. Therapeutic communication is the main basic intervention modality used to form a relationship between the therapist and patient in meeting needs

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The basic assumptions of communication accommodation theory according to West Richard & Tunner Liynn H in Suheri (2019). First, Similarities and differences in speech and behavior are found in all conversations of different experiences and backgrounds that will determine the extent to which a person accommodates others. Second, the way a person perceives the speech and behavior of others will determine how we evaluate a conversation. Third, language and behavior will provide information about social status and group membership related to the impact of language on others, because the language used will reflect individuals with higher social status. Fourth, accommodation varies on issues of degree of appropriateness and the norms that direct the accommodation process. The research that examines therapeutic communication in educating fracture patients by combining medical and therapist elements in Padepokan Padjadjaran Cimande will use Communication theory to see how therapeutic communication is done by therapists in educating fracture patients by combining medical and therapist elements.

Methods

Humans as research subjects are people who participate actively or passively Azwar in Sugivono (2015). Sugivono in Tanujaya (2017), the subject is an attribute, trait or value of people, objects or activities that have certain variables that have been determined to be studied and drawn conclusions. In this study, the research subjects were therapists and fracture patients at Padjadjaran Cimande. The research object is an object that is not set or natural. Natural research objects cannot be manipulated by researchers and must be as they are (Habsy, 2017). The object of research in this study is therapeutic communication in educating treatment with medical elements and therapists. The research approach used by researchers is a qualitative research approach. Mappasere (2019), said that this qualitative approach is an intensive research that has a natural setting which means directly engaging in the field, making categories of actors, acting as observers, observing phenomena, not manipulating data and recording observations in books. Researchers also made documentation that was being carried out in the field and analyzed it reflectively and reported the results of the research in detail. This research uses a qualitative descriptive research approach with a constructivism paradigm. Constructivism is a perspective that views that a reality is a symptom that is not settled and has a relationship with the past, present and future. Reality conditions must be understood based on construction as there is a researcher's awareness or experience related to life. Therefore, in the perspective of constructivism, understanding of reality is relative and dynamic (Nugrahani 2014).

Result and Discussion

Communication Style Used by Padepokan Padjadjaran Cimande Therapists

Communication is one of the main indicators to support the success of the communication process between patients and therapists, therapeutic communication is very effectively used to find out the problems or conditions felt by patients when doing alternative medicine to Padepokan Padjadjaran Cimande. As said by Informant 1, a therapist of Padepokan Padjadjaran Cimande. The first question that the researcher asked was, How do therapists build closeness when communicating with patients so as to create a conducive condition?

Previously, we will definitely share with the patient first, ask about the patient's condition, both the events and events experienced and we also provide education to patients on anything related to the patient's recovery (Informant 1).

Another therapist at Padepokan Padjadjaran Cimande, also stated that the same thing.

First, approach regularly, then establish a sense of trust so that there is such a thing as ignorance, so that the therapist and the client or the patient have a sense of mutual trust (Informant 2).

From the results of interviews with Informant 1 and Informant 2, it can be said that they build closeness by communicating casually such as sharing events experienced until mutual trust arises between patients and therapists. Although they talk casually in conducting treatment, it does not make them have to remain professional in conducting treatment because this way makes patients and therapists feel close so that they can easily communicate with patients. Then the researcher asked, Is there a communication technique that is most effective in helping fracture patients, especially with pediatric patients.

First of all, we definitely provide education first to the family and obviously, when we are handling in place for patients, especially for pediatric patients, what we are involved in is feelings for children. So how do we understand the psychology and sikis of children when an injury occurs so that we handle it safely and comfortably without any rebellion from the patient (Informant 2).

Informant 2, a therapist of Padepokan Padjadjaran Cimande, also stated.

That was the answer, the answer that is close to number one is, there is such a thing as therapeutic communication. In moo, modern medical, it's called therapeutic communication, which is establishing a form of chemistry or a system of trust in each other (Informant 2).

The results of the second question interview can be said that the technique they use in communicating is using therapeutic communication, namely communication between patients and therapists to establish mutual trust, to understand what the patient feels. The technique they do is to create closeness first with the patient so that the patient feels trust and comfort to the therapist when talking. Then the researcher asked, How does the therapist understand the situation when the patient does not respond or does not want to talk?

For patients who do not respond, we try to repeat the question, several times at least two, up to three times and we also provide direction to the family, before we ask, what is the background for the patient and why it happened and we also directly enter his soul by trying to ask nicely, at least to be a friend. So that we know how the patient responds (Informant 2).Begitu juga diungkap oleh

Informant 2, therapist of Padepokan Padjadjaran Cimande.

First, there is a procedure that we first do direction such as with a pinch or touch response, Father, do you feel it or not? If he can't speak, just shake his head or nod his head. Even if he can't shake his head or nod his head with a body response, it can be with a wink, like that. (Informant1)

The results of the third question interview as stated by Informant 1 and Informant 2 that they are fellow therapists, but they have their own ways of handling when the patients they hold do not respond or do not want to talk. Their methods are different but have the same purpose and intention, which is to make the patients they handle want to respond when invited to communicate.

Information and Education Provided by Therapists to Fracture Patients

Information and education in a treatment is very necessary, because not all patients know about the treatment, one of which is fracture treatment in Padepokan Padjadjaran Cimande. Patients need to get education from a therapist so that they know the treatment process such as what benefits and taboos the therapist will give to the patient.as said by Informant 1 Alfans, Padepokan Padjadjaran Cimande therapist, regarding the first question asked by the researcher. What information is given by the therapist to the patient.

The information given to the patient is probably, from the beginning of our treatment until after the observation, we give directions on what the patient can do and what the patient should not do and more importantly support from the family, that's all (Informant 1).

The same answer was given by Informant 2, a therapist at Padepokan Padjadjaran Cimande.

First, the form of fixation or movement or biday should not change so, the mobility should not be, not too unimportant should not be, then for food, then for drinks, so for the bandage or the dressing there is no movement and the fracture is maintained or the fracture is maintained. (Informant 2).

From the results of the first question interview answered by Informant 1 and Informant 2, namely, that the general information provided by the therapist to the patient is about what and how the form of treatment or treatment from beginning to end, then the prohibitions that the patient should not do while still on treatment and directions so that the bandage or dressing that covers the fracture does not shift. This information needs to be given to patients because there may be patients who do not know this. Then the next question asked to the therapist is, How does the therapist ensure that the patient understands the risks and benefits of alternative fracture treatment.

The risk is that maybe after explaining we give one of the documentaries or videos or photos that we have handled patients who might be considered recalcitrant, if they don't follow the therapist's directions because it is in accordance with what we said earlier, we combine between traditional and modernization whatever the requirements, whatever prohibitions are not allowed by the patient if they want to prove it, please prove it, the risk is borne by the patient himself, like that (Informant 1).

The same answer was given by Informant 2, a therapist at Padepokan Padjadjaran Cimande.

The first thing we definitely do is explain or educate so for example, for people who are laymen, of course it's easy to do explanations, but for people who have intellectuals, maybe they need a little approach, for example, how come medical, eh how come alternative therapists are like this? If we really master both, for example, for me, I master modern and alternative medicine because I am a basic nurse. So, when we compare or combine the two, it becomes a very good combination (Informant 2).

From the results of the second question interview answered by Informant 1 and Informant 2, the therapists must ensure and understand the risks and benefits of alternative medicine. They provide direction and knowledge to patients so that patients understand and are also supported by documentaries such as photographs, so that patients better understand the risks and benefits of these treatments. As Informant 2 said if as a therapist mastering medical and alternative then it can be combined and it is very good if both are used in the treatment of fractures.

Norma Sosial dalam Pengobatan Patah Tulang di Padepokan Padjadjaran Cimande

Social norms in fracture massage treatment are the use of traditional medicine or treatment methods carried out by pressing, squeezing and rotating broken bones using hands. This treatment is one of the most effective, fast and cheap ways to restore broken bones to function again. However, there are also negative impacts or risks that cause disability from this treatment if it is not handled by people who are experts and understand this traditional medical and therapist knowledge. As said by Informant 1, a therapist of Padepokan Padjadjaran Cimande. Regarding the first question asked by the researcher, whether this traditional treatment is in accordance with the local wisdom habits of the surrounding community or not.

Maybe for this question, we return to the testimonies of our patients, because thank God until now they believe and they also recommend to their surroundings if there is one or several people who have an accident they recommend to come to us, because of the comfort and obviously their trust that we hold and their trust that we keep until now (Informant 1). The same answer was given by Informant 2, a therapist at Padepokan Padjadjaran Cimande.

For alternative medicine or traditional medicine, it has generally existed since the time of our ancestors. So, the difference is that with the development of this with the modern era like this, there are many developments or new methods that must be adapted to the needs of today's society (Informant 2).

From the results of the first question interview as answered by Informant 1 and Informant 2, that this traditional treatment is indeed in accordance with the habits of the surrounding community because the therapists also continue to develop this alternative treatment without reducing the local wisdom that has existed since the time of the ancestors. Therefore, until now there are still many people who come to treat these fractures. Furthermore, the researcher asked, Do social norms influence people's views on alternative fracture treatment.

There are some, some might say comparisons and differences yes from the social norms themselves because clearly there are those who believe not to, some still wonder why this can happen, yes we go back again, we are just sanat aja, we only do what our teachers teach and more to the healing is from Allah SWT. so, we entrust more to the patient if he really wants to recover, give good enthusiasm and motivation for his recovery, we are just intermediaries (Informant 1).

Same as Informant 2, a therapist at Padepokan Padjadjaran Cimande, said.

Sometimes yes, sometimes no. So, what it means is that sometimes it's like this, ah, instead of going to the fracture treatment, why don't you just go to the hospital, as for the family, ah, instead of going to the hospital, why don't you just break a bone, if you go to the hospital, you have to have surgery, you have to do this, you have to do that. So, back to us, we explain to the client or the patient that the importance of deliberation between families, okay, first deliberate where to go, what is good, we make observations if you agree, we do treatment, like that (Informant 2).

From the results of the second question interview as said by Informant 1 Alfans and Informant 2, that the views of each person must be different because some still do not believe in alternative medicine and prefer modern medicine to hospitals and vice versa. This social norm apparently affects the views of the surrounding community about fracture treatment, so it is also important to consult with the patient's family so that they understand about this alternative fracture treatment.

Communication Style with The Therapist

Communication is not only done by the therapist but the patient must also communicate to the therapist to convey the things he feels so that the therapist knows what complaints the patient is feeling. So that there is openness between the two in order to make it easier for the therapist to also treat the patient. As the researcher asked the patient, How does the therapist communicate with you.

The communication is good, their therapists are also friendly, polite, they nurture their patients (Informant 3).

Likewise answered by Informant 4 as a fracture patient.

As for the therapist himself, he is more like what, to get into the patient's side. The problem is that his behavior is relaxed and it is also clear where the conversation is going (Informant 4).

From the results of the first question interview, as answered by Informant 4 and Informant 3 that the way therapists communicate with patients is relaxed, polite nurturing and also friendly. They do this not because they are unprofessional to the patients but the therapists make the patients more comfortable when talking to the therapists, because if they talk stiffly, it will make the situation tense

and make the patients afraid. Then the next question, Do you find it difficult when talking to a therapist about your condition.

As for the condition before I was treated, I could still speak. But when it was handled, I couldn't speak, because of the pain, the pain (Informant 3).

Likewise revealed by Informant 4 as a fracture patient.

For me personally, I have no difficulties, because the therapist explained it in great detail, from beginning to end what his condition is, what he will feel next (Informant 4).

From the results of the second question interview as said by Informant 3 that he felt difficulty speaking when treatment was carried out and for Informant 4, he did not feel difficulty when speaking because what had been conveyed by the therapist could be received well and the therapist explained it clearly and in detail. Therefore, every patient must be different, some have difficulty speaking and some do not.

Information and Education provided by the Therapist

Information and education is very necessary to be conveyed to patients because if patients do not get information or education from therapists, patients will find it difficult in the treatment process. Therefore the researcher asked, what information did you get from the therapist.

If what I get is this, so I know more about what the anatomy of the body is like, about each of them, about the therapist in essence, what are the ways of first treatment, if it is acute like what (Informant 3).

Similarly, Informant 3 as a fracture patient revealed.

As for the information itself, what I got was explained starting from the abstinence, what to eat, uh what not to eat and what to eat, then it was also explained what would happen in a few weeks we have to go there again, it was explained with the therapist also from beginning to end and it would also be explained when the recovery would be an estimated month, no, not with therapy (Informant 4).

From the results of the first interview question, as stated by Informant 4 and Informant 3, they came to know about anatomy that they did not know before, the therapist explained the information clearly so that the patient understood and comprehended the meaning conveyed by the therapist, the therapist also provided an explanation regarding prohibitions that were not can be eaten and what the patient can eat. The patient really needs to know this because otherwise the healing process could take a long time. Next, the researchers asked, Did the therapist provide clear and easy to understand explanations or information about the treatment you are undergoing?

Yes, the therapist always follows up, what is it called, always giving updates, oh, it's getting better, so I have to come here again. So he always keeps updating, updating about the healing process (Informant 3).

This was also expressed by Informant 3 as a fracture patient.

What I felt was really clear, sis, because I was really explained from beginning to end what could be eaten and what wasn't and starting from the healing process, it was really detailed, I added, what I felt straight away There's really clear progress. (Informant 4).

From the results of the second interview question which was answered by Informant 4 and Informant 3, the therapist provided detailed information explanations and gave directions to the patient and continued to inform the patient of the development or progress experienced, so that the patient knew the extent of the development or condition they were experiencing.

Patients' Views of Social Norms for Fracture Treatment

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Many people nowadays don't believe in the treatment of bone fractures and prefer to go to the hospital because they think things like fractures, dislocations, tendonitis are things that shouldn't be done, even though if someone understands the knowledge it can be treated. with fracture massage treatment. On the other hand, there are still those who believe in the social norm of treating broken bones because it is considered a treatment passed down from their ancestors. As the researcher asked the fracture patient, Informant 4.

If it's like this, there are a lot of therapists, traditional therapists, but there are traditional therapists who don't have the knowledge, those who don't have the status are therapists, but in Cimande, they already have the certificate, they already have the knowledge, so it's not just random. Moreover, in Cimande there is a professor, namely Kang Iyus, who is known as the therapist's professor. So he really understands, really understands bone fracture problems, it's like he's a specialist and there are lots of patients who come to Cimande just for treatment. So, I prefer to be certain, oh in Cimande there are things like this and there have been lots of incidents, strange things but they can be cured in Cimande, like a crooked hand, a U letter, but it can be done. straight again. Yes, I just looked at the reviews from the patients and believed them here and thank God, what I did, the treatment was really cured, that means it was genuine, purely from their knowledge, not side knowledge, like that (Informant 4).

This was also expressed by Informant 3 as a fracture patient.

What about me, because it's affordable too, I believe in traditional even though I like modern, however, I prefer things that are certain. In my opinion, if a therapist is like a treatment, that's for sure because I also happen to be like that, the therapist's treatment acquaintances are really extensive, and they are used to treatment, because what I felt myself was that the broken bones were really intact again (Informant 3).

From the results of the first interview question, Informant 4 and Informant 3 said that they still trust this alternative treatment because the price is affordable, the Padepokan therapists have knowledge about treatment and certificates that support that they are therapists who understand knowledge about bone fracture massage. Then this fracture treatment has healed various fractures and they healed again after being treated by Padepokan therapists. This is the reason why they still believe in alternative treatment for fractures. Next, the researchers asked again, is the fracture treatment you choose more easily accepted by the local environment?

Yes, it's easy, it's really easy, how about it, he also doesn't charge patients how much they have to pay, so it doesn't make it a burden first and foremost for those from lower economic levels, more, humanizing people is the point (Informant 4).

That's what Informant 3 said as a fracture patient.

From what I've seen, it's really safe, sis, from the surrounding area, there are even outsiders who play there, including whatever, it's just familiar, so, there's never been any trouble at all from what I've seen., because there was never anything strange from the trapper's side (Informant 3).

From the results of the second interview question, as stated by Informant 4 and Informant 3, bone fracture treatment has so far been easily accepted by the local community and even outsiders have come to the Padepokan to receive treatment. Therefore, this alternative treatment can be well received by patients and the surrounding community because the therapists are also friendly in treating patients and they never burden or charge patients to pay.

The results of this research relate to the way therapists educate by combining medical and therapeutic elements at Padepokan Padjadjaran Cimande. Through observation, direct observation

and in-depth interviews with 4 informants, the way therapists educate fracture patients uses therapeutic communication in treating patients. Therapeutic communication is one of their ways of communicating and educating patients and there is an element of combining medical and therapeutic elements in the treatment of fractures, namely by combining medical and therapeutic equipment and they also combine medical and therapeutic elements in the way they convey information to patients during treatment.

This research is related to communication accommodation theory, namely, by looking at Padepokan therapists in interacting, adjusting conversations and actions in managing or accommodating the emotions of broken bone patients. With this interaction, the relationship between the patient and the therapist aims to achieve the goal, namely, what complaints the patient feels, what methods are suitable for carrying out first treatment, and the success of the treatment carried out by the therapist for the patient.

Conclusion

Based on the results of research and discussions that have been carried out regarding Therapeutic Communication between Therapists and Fracture Patients at Padepokan Padjadjaran Cimande, it has been concluded that the communication usually used by therapists at Padepokan Padjadjaran Cimande is therapeutic communication. The therapeutic communication implemented by the therapists has been carried out well, because the therapist can maintain the patient's emotions and is able to interact directly with the patient and is able to see and understand the complaints felt by the patient, thereby creating a sense of mutual trust between the patient and the therapist. The therapist provides clear and detailed information regarding problems, restrictions and stages in treatment and which treatment is appropriate to the patient's needs. In the patient healing process, it can be concluded that the success of therapeutic communication is not only the stages of communication but also the success of the patient feeling heard, understood and the patient's involvement in their treatment which increases the trust system. Fracture treatment at Padepokan Padjadjaran Cimande has been around for a long time and continues to be developed as well as the therapeutic communication they continue to use during the treatment process, so that many people choose traditional treatment because many patients have recovered and been treated by Padepokan therapists. This is what makes bone fracture treatment still trusted by the people around Padepokan and people outside the Padepokan area.

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