

Research Paper



The process of interpersonal communication between dentists and patients

Hauradhiya Faizah Amriely¹, K. Y. S Putri², Maulina Larasati Putri^{3*}

^{1,2,3*}Communication Science, Universities Negeri Jakarta, Nigeria.

Article Info

Article History:

Received: 29 March 2024

Revised: 04 June 2024

Accepted: 12 June 2024

Published: 24 July 2024

Keywords:

Interpersonal Communication

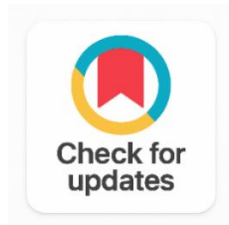
Dentist

Patient

Therapeutic Relationship

Counselling

Empathetic



ABSTRACT

Objective: To look into how effective interpersonal communication happens between dentists and patients, kinda within a clinical counseling setting.

Methods: A qualitative study with a descriptive approach was used. Data were taken from in depth interviews plus direct observation of dentist patient interactions, during counseling sessions.

Results: What seemed to work well for effective interpersonal communication was the dentist's use of language that patients could actually grasp easily, plus an empathetic way of being, supportive conduct, a calm positive demeanor, and also a sense of equality during the conversation. These parts were viewed as necessary for building a solid therapeutic bond. Most patients said they felt relaxed and willing to share their worries and conditions, and they linked that to the dentist being non-judgmental, caring, encouraging, and overall positive. Even with that comfort though, keeping professional boundaries stayed important, so the doctor patient relationship stays appropriately balanced.

Conclusion: Effective interpersonal communication, based on empathy, clarity, steady support, a positive mood, and equality, has a big impact on strengthening the dentist patient relationship. It can raise patient satisfaction, help treatment move along, and also support better healthcare outcomes, while professional boundaries still matter for keeping the clinical relationship well balanced.

Corresponding Author:

Maulina Larasati Putri

Communication Science, Universities Negeri Jakarta, Nigeria.

Email: maulinalarasati@unj.ac.id

Copyright © 2024 The Author(s). This is an open access article distributed under the Creative Commons Attribution License, (<http://creativecommons.org/licenses/by/4.0/>) which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

1. INTRODUCTION

Interpersonal communication is a fundamental aspect of human life as social beings [1]. This type of communication allows participants to capture each other's verbal and nonverbal reactions. Effective interpersonal communication is crucial in various fields, including healthcare. Hospitals are healthcare institutions where interpersonal communication between doctors and patients plays a vital role [2].

In the counseling and therapy process, effective interpersonal communication between the counselor/therapist and the client/patient is critical to the success of the process [3]. Good interpersonal communication enables the counselor/therapist to build a trusting relationship and understand the clients/patient's problems and needs. Conversely, poor interpersonal communication can hinder the client's/patient's healing process.

One example of a condition that requires counseling is depression. Depression is one of the increasingly concerning mental health issues in the modern era [4]. Depression can affect individuals emotionally, socially, and physically [5]. Therefore, effective interpersonal communication between dentists and patients suffering from depression is crucial in the counseling process. Good communication will help the dentist understand the patient's condition and assist the patient in feeling comfortable to open up about their problems and needs.

2. RELATED WORK

Interpersonal communication is an essential aspect in establishing a good relationship between dentists and patients. Effective communication between the two is necessary to ensure that treatment and care can proceed smoothly and optimally. Therefore, a deep understanding of theories and concepts related to interpersonal communication becomes highly relevant in this context.

In this related work discussion, two main theories relevant to the interpersonal communication process between dentists and patients will be discussed, namely the Social Penetration Theory and Interpersonal Communication. The Social Penetration Theory provides a framework for understanding how interpersonal relationships develop from a shallow stage towards a more intimate and close stage. Meanwhile, the concept of Interpersonal Communication provides an understanding of important dimensions in communication between two individuals, such as openness, empathy, supportive attitudes, positive attitudes, and equality.

2.1. Social Penetration Theory

The Social Penetration Theory is one of the relevant theories in discussing the interpersonal communication process between dentists and patients. This theory explains how interpersonal relationships develop from a shallow stage towards a more intimate and close stage [2]. In the context of the dentist-patient relationship, this theory can be used to understand the process of forming a deeper relationship between the two.

The Social Penetration Theory depicts levels or layers in an individual's personality, referred to as "circles of intimacy". Initially, the dentist-patient relationship is at the outermost circle, representing the most general and shallow aspects of personality. However, through an increasingly intimate process of self-disclosure, their relationship can move towards deeper circles, achieving a greater level of intimacy.

The process of social penetration in the dentist-patient relationship can be influenced by factors such as individual personalities, situations and environments, attraction and similarity, and reciprocity [6].

For example, a dentist who is open and confident is more likely to engage in social penetration with patients, or a comfortable and private environment can facilitate the social penetration process.

2.2. Interpersonal Communication

Interpersonal communication is an essential aspect in the interaction process between dentists and patients. Interpersonal communication involves face-to-face encounters between two people, in this case, the dentist and the patient [7]. Interpersonal communication is two-way or reciprocal, following the

transactional communication model that emphasizes the dynamics of the relationship and the dual roles of each party.

There are five dimensions of interpersonal communication that can be applied in the context of the dentist-patient relationship, namely openness, empathy, supportive attitudes, positive attitudes, and equality [8]. For example, dentists need to demonstrate openness and empathy in understanding patients' complaints and conditions, as well as provide supportive and positive attitudes to build a good relationship with patients. On the other hand, patients also need to be open in conveying information related to their health conditions and show a positive attitude in following the dentist's advice and treatment.

3. METHODOLOGY

3.1. Paradigm

This research uses the Constructivism research paradigm. A research paradigm is a general organizing framework for theory and empirical research that includes basic assumptions, central questions, models of good research practice and theory and methods for finding answers to questions [9]. Constructivism is a paradigm that seeks an understanding of the world in which they live and work. The goal of this paradigm is to rely as much as possible on participants' views of the situation being studied [10]. This study uses the Constructivism research paradigm to see how interpersonal communication occurs between dentists and patients.

3.2. Research Method

This research will employ a qualitative approach. Qualitative research methods are non-numerical examination and interpretation of observations, for the purpose of finding underlying meanings and patterns of relationships [11]. This research uses qualitative research methods to find out and understand how interpersonal communication occurs between dentists and dentists.

3.3. Research Type

The type of research is descriptive methods to provide an in-depth description of the interpersonal communication process that occurs between doctors and patients. The qualitative approach is chosen because it is suitable for gaining a deep understanding of a phenomenon based on participants' experiences [10].

Researchers use descriptive qualitative type because researchers want to provide an overview of how interpersonal communication occurs between dentists and patients.

3.4. Unit of Analysis

The unit of analysis is what or who is being studied. The individual is the unit of analysis most often used in social research [11]. The unit of analysis in this research is social interaction. The social interaction unit of analysis looks at what happens between individuals such as contacting over the phone, dancing, arguing, and so on [11].

From the explanation above, it is found that the unit of analysis used is social interaction because researchers want to know and understand how interpersonal communication occurs between dentists and patients.

3.5. Research Subject

Research subject is the name for participants who take part in research [9]. The research subjects are also divided into two, Key Informants and informants. Key informants are sources that will provide researchers with general knowledge of the discussion. Meanwhile, informants are individuals who can provide information related to events that occur.

In this study, the research subjects were divided into two, namely key informants who were dentists and informants who were patients of dentists.

3.6. Informant Determination Technique

This research uses a nonprobability method. A nonprobability sample is a technique where the sample is selected in a certain way [11]. This research also uses a purposive technique. The purposive technique is a type of nonprobability sampling in which the observed units are selected based on the judgment of the researcher who is considered to have representative provisions [11].

Key informants in this study are dentists who provide treatment and direction to patients and Informants are dental patients who receive treatment.

3.7. Data Collection Techniques

Data will be collected through in-depth interviews. In-depth interviews will be conducted face-to-face with dentist and patients to obtain information about their experiences in the interpersonal communication process during counseling [6]. The data obtained from interviews and observations will be analyzed using thematic analysis techniques [4]. The analysis process includes data coding, identification of main themes, and interpretation of findings in the context of relevant theories and literature.

3.8. Data Validity Technique

To ensure data validity, this research will employ data source triangulation techniques, which involve comparing data from different sources (doctors and patients) to obtain confirmation or a more complete understanding [12]. Additionally, member checking will be conducted by asking participants to confirm the accuracy of the researcher's interpretations [13]. This research will adhere to the principles of research ethics, such as maintaining participant confidentiality, obtaining informed consent, and respecting participants' rights.

4. RESULTS AND DISCUSSION

Based on the questionnaire results, effective interpersonal communication between dentists and patients is crucial in ensuring the success of the treatment. It is important for dentists to use language that is easily understood by patients so that patients can comprehend the purpose and goals of the treatment being conducted. This aligns with the dimension of openness in interpersonal communication, which emphasizes clarity of messages and mutual understanding between the communicator and the communicant [8].

In addition to language, another aspect that dentists pay attention to when communicating with patients is the patients' body movements and facial expressions [7]. This reflects the dimension of empathy in interpersonal communication, where dentists strive to understand the patient's perspective and feelings through nonverbal cues [8]. Dentists also apply a supportive attitude by agreeing with patients' statements that align with the facts, as well as a positive attitude by attentively listening to patients' complaints, using polite greetings, and patiently and repeatedly explaining.

One of the challenges faced in interpersonal communication with patients is the difference in local languages used by patients [6]. This can complicate the process of self-disclosure and social penetration between dentists and patients, thus hindering the formation of a more intimate and close relationship. To overcome this challenge, dentists need to apply equality in communication by using polite language and creating a comfortable environment for patients [8].

Interpersonal communication is crucial in the treatment process to facilitate the communication of information related to the patient's disease and enable more effective treatment [2], [3]. Good interpersonal communication allows dentists to build a trusting relationship and understand patients' needs more deeply [6], [3].

These findings align with previous research emphasizing the importance of effective interpersonal communication between doctors and patients in the context of healthcare. The use of language that is easily understood by patients is a key factor in ensuring good understanding and adherence to treatment [3]. Research has also shown that adapting communication styles to patients' characteristics can increase patient satisfaction and better treatment outcomes. Barriers in interpersonal communication, such as

differences in local languages, are challenges faced in clinical practice. This is consistent with research findings that language and cultural differences can hinder accurate information exchange between doctors and patients. Therefore, efforts to build openness, empathy, supportive attitudes, and positive attitudes in communication become crucial in overcoming these barriers.

Furthermore, the results from the questionnaire to patients showed that most respondents felt comfortable when communicating with the dentist, especially when the dentist used a soft tone of voice, a friendly facial expression, and a non-judgmental way of communicating about the patient's condition. Aspects that made respondents feel comfortable included the use of easy-to-understand language, empathetic attitudes, supportive attitudes, and positive attitudes from the dentist.

One patient stated, "I felt comfortable because the dentist understood my complaints and did not judge the patient's condition." This shows that the dentist's empathetic attitude was highly appreciated by the patient, in line with the dimension of empathy in interpersonal communication [8]. Patients felt that the dentist tried to understand their perspective and feelings, making them more open to sharing their problems and conditions with the dentist.

Most patients expressed that they felt open to sharing their problems and conditions with the dentist. One of the main reasons driving this openness was the patients' belief that by being open, their complaints could be better addressed. This aligns with the dimension of openness in interpersonal communication, where openness allows for better understanding between the communicator and the communicant [8]. Respondents tended to be open to sharing their problems and conditions with the dentist because they felt accepted, listened to, and received useful information for their health. Empathetic, supportive, and positive attitudes from the dentist were considered very important in creating comfort, building trust, and motivating patients in the treatment process. The dentist's attitude of equality in communication was also considered important in building a closer relationship with patients, although some respondents acknowledged the need for certain boundaries.

These findings align with previous research emphasizing the importance of effective interpersonal communication in the context of healthcare. The use of simple and easy-to-understand language for patients is a key aspect in building a positive therapeutic relationship between doctors and patients [3]. Empathetic, supportive, and positive attitudes from the dentist were also highly appreciated by patients. This is in line with research showing that empathetic attitudes from doctors can increase patient satisfaction, treatment adherence, and better health outcomes [10]. Supportive and positive attitudes also contribute to the formation of trust and comfort for patients.

These findings also highlight the importance of openness in communication between doctors and patients [14]. When patients feel accepted and understood, they tend to be more open to sharing important information about their condition, which in turn can help doctors provide more appropriate care. However, some respondents acknowledged the need for certain boundaries in the doctor-patient relationship to maintain professionalism. This is consistent with the view that, although equality in communication is important, there must be clear boundaries to prevent over-attachment or excessive dependence between doctors and patients.

5. CONCLUSION

Effective interpersonal communication is a fundamental aspect in the relationship between dentists and patients. This research shows that the use of simple and easy-to-understand language for patients, empathetic attitudes, supportive attitudes, positive attitudes, and equality in communication from dentists are crucial in building a positive therapeutic relationship. This aligns with the dimensions of the interpersonal communication concept, such as openness, empathy, supportive attitudes, positive attitudes, and equality.

The findings indicate that most patients feel comfortable and open to sharing their problems and conditions with the dentist when the dentist uses a soft tone of voice, a friendly facial expression, and a non-judgmental way of communicating. Patients appreciate the dentist's empathetic attitude in trying to understand their perspective and feelings. Additionally, the dentist's supportive and positive attitudes

greatly contribute to building trust and comfort for patients. However, some patients acknowledge the need for certain boundaries in the doctor-patient relationship to maintain professionalism. This aligns with the importance of maintaining equality in communication without eliminating clear boundaries between doctors and patients. Overall, this research emphasizes the importance of effective interpersonal communication in the context of healthcare, especially in building a positive therapeutic relationship between dentists and patients. Good communication not only improves patient satisfaction and compliance but also facilitates more effective treatment and better health outcomes.

Acknowledgments

The authors have no specific acknowledgments to make for this research.

Funding Information

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Author Contributions Statement

Name of Author	C	M	So	Va	Fo	I	R	D	O	E	Vi	Su	P	Fu
Hauradhiya Faizah Amriely	✓	✓	✓	✓		✓		✓	✓	✓	✓			
K. Y. S Putri	✓	✓	✓			✓	✓	✓				✓	✓	✓
Maulina Larasati Putri		✓	✓	✓			✓	✓	✓		✓	✓	✓	

C : Conceptualization

M : Methodology

So : Software

Va : Validation

Fo : Formal analysis

I : Investigation

R : Resources

D : Data Curation

O : Writing - Original Draft

E : Writing - Review & Editing

Vi : Visualization

Su : Supervision

P : Project administration

Fu : Funding acquisition

Conflict of Interest Statement

The authors declare that there are no conflicts of interest regarding the publication of this paper.

Informed Consent

All participants were informed about the purpose of the study, and their voluntary consent was obtained prior to data collection.

Ethical Approval

Not Applicable.

Data Availability

The data that support the findings of this study are available from the corresponding author upon reasonable request.

REFERENCES

- [1] T. Alini, 'Hubungan Pola Komunikasi Keluarga dengan Tingkat Depresi Lanjut Usia Tahun 2018', *Jurnal Ilmiah Kohesi*, vol. 3, no. 2, pp. 96-104, 2018.
- [2] I. Altman and D. A. Taylor, *Social Penetration: The Development of Interpersonal Relationships*. Holt, Rinehart & Winston, 1973.
- [3] N. Amir, *Depresi : Aspek Neurobiologi Diagnosis dan Tatalaksana*. 2016.
- [4] Babbie, E. (2014). *The practice of Social Research*. Cengage Learning.

- [5] J. W. Creswell, 'Research Design Qualitative, Quantitative, and Mixed Methods Approaches', in Research Design: Qualitative, Quantitative, and Mixed Methods Approaches, SAGE Publications, 2018.
- [6] J. A. Devito, 'The Interpersonal Communication Sixteenth Edition', in Pearson Education, Pearson Education, 2021.
- [7] Y. Elvitasari, M. Masril, and W. Fitriani, 'Proses Konseling Individual Oleh Psikologi di Polres Tanah Datar Terhadap Anak Sebagai Korban Pencabulan dan Dampak Psikologinya Bagi Korban', Jurnal Pendidikan Dan Konseling, no. 6, 2022.
- [8] A. A. Mekarisce, 'Teknik Pemeriksaan Keabsahan Data pada Penelitian Kualitatif di Bidang Kesehatan Masyarakat', JURNAL ILMIAH KESEHATAN MASYARAKAT: Media Komunikasi Komunitas Kesehatan Masyarakat, vol. 12, no. 3, pp. 145-151, Sept. 2020. doi.org/10.52022/jikm.v12i3.102
- [9] T. D. Panitra and H. H. D. Tamburian, 'Komunikasi Antarpribadi Dokter Dengan Pasien dalam Membantu Penyembuhan Pasien di Klinik Cendana', Koneksi, vol. 3, pp. 71-76, 2019. doi.org/10.24912/kn.v3i1.6147
- [10] K. Y. S. Putri, H. Fathurahman, Y. Riady, Y. Andriani, and H. Hanifah, 'Literasi Komunikasi Kesehatan Masyarakat Indonesia Terhadap Sikap Penanganan Kesehatan keluarga', Communications, vol. 4, no. 1, pp. 114-134, 2022. doi.org/10.21009/communications.4.2.1
- [11] A. N. Hanun, 'Komunikasi Antarpribadi Tunagrahita', J. Penelit. Komun., vol. 16, no. 2, pp. 137-152, Nov. 2013. doi.org/10.20422/jpk.v16i2.36
- [12] S. M. Sabila, 'Pendekatan Komunikasi Antarpribadi Psikologi Dengan Penderita Depresi', Populika, vol. 8, no. 2, 2020. doi.org/10.37631/populika.v8i2.344
- [13] 'Perencanaan & Evaluasi Program Komunikasi', in Pena Pressindo. Pena Pressindo, 2019.
- [14] L. M. Syahri, M. Mudjiran, D. Sukma, and S. Syahrial, 'Kesiapan Konselor dalam Proses Konseling yang Berhasil', JUBIKOPS: Jurnal Bimbingan Konseling Dan Psikologi, vol. 2, no. 2, pp. 82-91, 2022.

How to Cite: Hauradhiya Faizah Amriely, K. Y. S Putri, Maulina Larasati Putri. (2024). The process of interpersonal communication between dentists and patients. Journal Healthcare Treatment Development (JHTD), 4(2), 12-18. <https://doi.org/10.55529/jhtd.44.14.20>

BIOGRAPHIES OF AUTHORS

	<p>Hauradhiya Faizah Amriely, is a researcher in the Communication Science program at Universitas Negeri Jakarta. Her academic interests include communication studies, media, and related interdisciplinary research. She has contributed to scholarly publications in her field and is committed to advancing communication research through academic collaboration and innovation. Email: HauradhiyaFaizahAmriely1410619015@mhs.unj.ac.id</p>
	<p>K. Y. S Putri, is a faculty member and researcher in the Communication Science program at Universitas Negeri Jakarta. Her research focuses on communication, media, and contemporary social issues. She has published various academic works and actively contributes to research, teaching, and the development of communication studies. Email: kinkinsubarsa@unj.ac.id</p>
	<p>Maulina Larasati Putri, is a researcher affiliated with the Communication Science program at Universitas Negeri Jakarta. Her academic work centers on communication research and its practical applications in society. She participates in collaborative research projects and is dedicated to promoting knowledge and innovation in the field of communication. Email: maulinalarasati@unj.ac.id</p>