

The Relationship Between Nurses' Therapeutic Communication and Family Anxiety in Patients Undergoing Mechanical Ventilator Installation in the ICU: A Cross-Sectional Study

Andri Setiawan Fitrianto¹, Rida Darotin^{1*}

¹Universitas dr. Soebandi, Jember, Indonesia

*Corresponding Author; E-mail: rida.1448@uds.ac.id

Abstract

Background: Background: Critical patients who are indicated for mechanical ventilator installation will indirectly cause their families to experience anxiety. This feeling is further increased by ICU service activities that limit presence with patients and limited access to communication with health workers in it.

Aims: To prove the relationship between nurses' therapeutic communication and the level of anxiety of families of patients who are indicated for mechanical ventilator installation in ICU.

Methods: The research design used is correlation analytic research. The research sample was the families of patients with indications for mechanical ventilator installation in ICU of Balung Hospital with a total of 26 respondents using the Consecutive sampling technique. The instrument used to measure therapeutic communication was the Rizky questionnaire and the one used to measure anxiety levels was the Hamilton Anxiety Rating Scale (HARS) questionnaire.

Results: Based on the results of the Spearman rho test, it showed a p value $(0.000) < \alpha (0.05)$ with a strong level of closeness of the relationship indicated by the correlation coefficient value of 0.45.

Conclusion: There is a relationship between therapeutic communication between nurses and the level of anxiety of the families of patients who are on mechanical ventilators in patients with respiratory failure in ICU.

Keywords: Anxiety, ICU, Mechanical ventilator, Therapeutic communication

INTRODUCTION

The patient is in critical condition with indications for the installation of a mechanical ventilator. It can cause anxiety for the patient's family members. This anxiety can increase with ICU service activities that limit attendance with patients and limited access to communication with health workers in it (Mariati et al., 2012). Anxiety in this family can indirectly affect the condition of the patient being treated, this happens if the family experiences anxiety then it results in delayed decision-making in relation to the treatment process and the treatment that the patient will receive (Salistia, 2017).

Based on data from the World Health Organization (WHO), 9.8-24.6% per 100,000 people in the world suffer from critical illnesses and receive intensive care.

In fact, 1.1 – 7.4 million patients died in the treatment room due to critical illness. The prevalence of critical patients in Indonesia in 2019 was recorded at 33,148 patients with a patient mortality percentage in the ICU reaching 36.5% (Maryuni et al., 2023). According to data obtained from September to November 2024, there were 71 patients treated in ICU of Balung Hospital, and 31 patients who died.

Nurses' communication skills can affect the effectiveness of many interventions. Therefore, nurses must evaluate and improve their communication skills on an ongoing basis. Therapeutic communication requires a conscious effort on the part of the nurse to find ways to help the patient and his or her family communicate thoughts and feelings more effectively. In addition, the provision of interventions with communication techniques that are in

accordance with the cultural background, and the age of the patient must also be considered (Asrul & Afriani, 2024). Good therapeutic communication between nurses and families can arouse feelings of comfort, security and trust from the family and nurses can provide quality nursing care to patient's poor nurse communication will have a bad impact on the patient and the patient's family, including can cause misunderstandings between nurses and patients and patients' families. If the communication used is not therapeutic, then the level of anxiety will increase (Mulyono et al., 2024; Videbeck, 2019).

Based on a preliminary study, the results of interviews obtained from 5 family members of patients who were treated at the Balung Hospital in September 2024 experienced anxiety. This is shown by 3 people saying they are afraid of loss, worried about the patient's condition and 2 people say they are afraid of the unknown, lack of information and feeling uneasy. The results of the nurse therapeutic communication research that has been carried out on 5 respondents show that 2 respondents said the communication carried out by the nurse was good, 2 respondents said the communication of the nurse was quite good while 1 respondent said they were not comfortable with the communication of the nurse when explaining the procedure of the action to be carried out.

Therapeutic communication techniques applied can help lower anxiety levels. But on the other hand, if the communication used is not therapeutic, then the level of anxiety will increase (Videbeck, 2019). Based on the description above, the researcher will conduct a study on "The relationship between nurses' therapeutic communication and the patient's family anxiety level with indications of the installation of mechanical ventilators in ICU".

METHOD

Design

The research design used is correlation analytical research using a cross-sectional approach.

Sample

The population in this study is the family of patients with indications of mechanical ventilator installation in ICU of Balung Hospital on May 1 – May 31, 2025, as many as 26 respondents. The sampling technique used in this study is consecutive sampling.

Data analysis

The instrument in this study used a questionnaire, to measure therapeutic communication using a questionnaire from the study (Kalidupa & Maria, 2021), which consists of 20 statements. This questionnaire has been proven by the results of the validity test obtained by 0.346-0.838. Meanwhile, to measure anxiety levels, the Hamilton Anxiety Rating Scale (HARS) is used which consists of 14 items. The HARS scale has been proven to have high enough validity and reliability to measure anxiety in trial-clinic studies, namely 0.93 and 0.97. This condition shows that anxiety measurement using the HARS scale will obtain valid and reliable results. This study uses the Spearman rho statistical test.

RESULTS

The following is a description of the results of data analysis of the Relationship between Therapeutic Communication of Nurses and Patient Family Anxiety Levels with Indications for the Installation of Mechanical Ventilators in ICU of Balung Hospital.

Table 1. Characteristics of Respondents Based on Gender, Age, Occupation, Education, Marital Status, Nurse Therapeutic Communication, Patient's Family Anxiety With Indications for the Installation of Mechanical Ventilators in ICU of Balung Hospital.

Characteristic	f	(%)
Sex		
Man	8	30.8
Woman	18	69.2
Total	26	100
Umur		
26 – 35 Yo	5	19,2
36 – 45 Yo	8	30.8
46 – 55 Yo	10	38.5
56 – 65 Yo	2	7.7
> 65 Yo	1	3.8
Total	26	100
Employment Status		
Unemployed	19	73.1
Self-employed	4	15.4
Government employees	3	11.5
Total	26	100
Last Education		
Elementary school	3	11.5
Junior high school	12	46.2
Senior High School	8	30.8
College	3	11.5
Total	26	100
Marrital		
Unmarried	1	3.9
Menikah	20	76.9
Divorce	5	19.2
Total	26	100
Therapeutic Communication		
Good	19	73.1
Enough	7	26.9
Less	0	0
Total	26	100
Anxiety Level		
No Anxiety	0	0
Mild Anxiety	4	15.4
Moderate Anxiety	20	76.9
Severe Anxiety	2	7.7
Total	26	100

Based on the table above, it shows that most of the respondents are female, namely 18 (69.2%), in the early elderly category (46 - 55 years) which is 10 people (38.5%), with unemployed employment status, which is 19 (73.1%), junior high school education as many as 12 (46.2%), married marriage

status as many as 20 (76.9%), nurse therapeutic communication is mostly good as many as 19 respondents (73.1%) and the patient's family anxiety level is moderate anxiety with 20 respondents (76.9%)

Table 2. Distribution of the Frequency of Nurses' Therapeutic Communication Relationship with the Patient's Family Anxiety Level with Indications for the Installation of Mechanical Ventilators in ICU of Balung Hospital

Nurse Therapeutic Communication	Anxiety Level						Total	
	Mild		Moderate		Severe		f	%
Low	0	0	0	0	0	0	0	0
Moderate	4	15.4	1	3.8	2	7.7	7	26.9
Good	0	0	19	73.1	0	0	19	73.1
Total	4	15.4	20	76.9	2	7.7	26	100

Based on Table 2. The above shows that of the 26 respondents that have been studied, it is known that respondents who have therapeutic communication with nurses are moderate with a mild level of anxiety as many as 4 respondents (15.4%) and with severe anxiety as many as 2 respondents (7.7%). Respondents with therapeutic communication of good nurses with moderate levels of anxiety were 19 respondents (73.1%). This shows that with good therapeutic communication, the respondent's anxiety level does not become heavy.

Table 3. Distribution of Respondent Frequency by Anxiety Level

Anxiety Level	Correlation Coefficient	Anxiety Level	Therapeutic Communication
	1.000		.471*
	Sig. (2-tailed)	.	.015
	N	26	26
Therapeutic Communication	Correlation Coefficient	.471*	1.000
	Sig. (2-tailed)	.015	.
	N	26	26

Based on Table 3. The results of the Spearman rho test showed ρ value (0.015) $< \alpha$ (0.05) with a strong correlation level indicated by a correlation coefficient value of 0.471.

DISCUSSION

Nurse Therapeutic Communication

Based on the results of the research, the respondents in this study amounted to 26 respondents. It was found that the research conducted in ICU of Balung Hospital 19 respondents (73.1%) assessed that the therapeutic communication of nurses was good because they had fulfilled the phases of therapeutic communication. A total of 7 respondents (26.9%) rated the therapeutic communication of nurses as sufficient. Meanwhile, there were no respondents who assessed that the nurse's therapeutic communication was lacking because the nurse had provided good communication. In a nursing communication there are several stages, namely the pre-interaction stage, a nurse is expected to have the ability to recognize before contact with the patient. The second stage of orientation is the stage where the nurse will recognize what the patient feels. Then the work stage is the most important thing in a goal and the last is the termination stage where this stage the nurse creates the reality of the farewell, evaluates the actions that have been taken and plans the follow-up contract (Mahyuni et al., 2023; Prasetyo Kusumo, 2017). This therapeutic communication has the goal of helping patients which can be done by professional people by using an approach between nurses and patients based on feelings and emotions, where in therapeutic communication there must be an element of trust between nurses and patients (Soleman & Cabu, 2021).

Therapeutic communication between nurses in ICU of Balung Hospital has been carried out well. Starting from introducing yourself, conveying information, actions and procedures, showing empathy and caring attitude towards patients and fostering mutual trust between patients and nurses. Nurses who have good therapeutic communication skills will easily

communicate with patients. Therapeutic communication is also able to form a relationship of mutual trust, foster an attitude of empathy and caring towards patients, and prevent problems from occurring.

Patient's family anxiety level

Based on the results of the study through data collection which was attended by 26 respondents, namely the families of patients who were waiting for family members who were treated in ICU of Balung Hospital, it can be seen that the majority of respondents felt mild anxiety amounting to 4 respondents (15.4%), then respondents who felt moderate anxiety amounted to 20 respondents (76.9%) and while respondents who felt severe anxiety amounted to 2 respondents (7.7%).

Anxiety is a feeling of fear that is not clear and not supported by the situation. Individuals who feel anxious will feel uncomfortable or afraid, but do not know the reason for the condition. Anxiety does not have a clear identifiable stimulus (Astuti et al., 2023; Videbeck, 2019).

The anxiety response that arises in families in patients waiting for family members who are treated in ICU of Balung Hospital is very different for each individual. The anxiety response that arises in the family in patients treated in ICU includes a range of responses that are adaptive and have not led to a maladaptive response. This is because the coping mechanism used by the family in dealing with a stressor is quite good and can adapt to all problems, both from inside and outside the family itself.

Nurse Therapeutic Communication Relationship

With the Level of Anxiety of the Patient's Family with Indications of Mechanical Ventilator Installation in ICU of Balung

Hospital Based on the results of cross-tabulation of nurses' therapeutic communication with patients' family anxiety levels, it was shown that respondents who had nurse therapeutic communication were sufficient with a mild anxiety level of 4 respondents (15.4%) and with severe anxiety as many as 2 respondents (7.7%). Respondents with nurse therapeutic communication were good with moderate levels of anxiety as many as 20 respondents (76.9%) and with severe anxiety as many as 0 respondents (0%). Based on the results of the Spearman statistical test, rho showed ρ value (0.015) $< \alpha$ (0.05) with a strong correlation level indicated by the correlation coefficient value of 0.471. This shows that there is a relationship between Nurse Therapeutic Communication and Family Anxiety Level with Indications of Mechanical Ventilator Installation in ICU of Balung Hospital.

Everyone's experience of anxiety varies depending on the situation and interpersonal relationships. There are two precipitation factors that affect anxiety, namely external factors and internal factors. Internal factors include education where individual education affects thinking skills. The higher the level of education, the easier it is for individuals to think rationally and capture new information. The ability to analyze will make it easier for individuals to describe new problems, this is in accordance with the results of the study that most of the respondents had a junior high school education, namely 12 respondents (46.2%).

In addition to educational factors, another factor is gender, where anxiety disorders are often experienced by women than men. The impact of anxiety is excessive worry about real and potential problems. This is the same as the results of the study showing that most of the respondents were female, namely 18 respondents (69.2%). Anxiety will make individuals spend their energy,

cause anxiety and prevent individuals from performing their functions adequately in interpersonal situations and social relationships. The next factor is age, where old age is more easily anxious compared to younger age. This is the same as the results of the study of almost half of the respondents aged within the initial age limit (46 years – 55 years), namely 10 respondents (38.5%).

Conflict theory views anxiety as a conflict between two opposing interests. Anxiety occurs because of the reciprocal relationship between conflict and anxiety. Conflict causes anxiety and anxiety causes feelings of helplessness. Which in turn increases perceived conflict. Anxiety if it persists can affect health status and can change the diagnostic procedures that have been determined. To be able to increase the confidence of the patient's family in facing a treatment action, one of them is therapeutic communication so that they can choose coping alternatives that are positive for them (Made et al., 2017; Sulastri et al., 2019). Therapeutic communication provides nurses with a clear picture of the condition of the patient being treated, the signs and symptoms displayed and the complaints felt. Therapeutic communication occurs when it is preceded by a relationship of mutual trust between nurses and patients.

Through communication and therapeutic relationships, respondents can understand and accept the patient's condition so that the respondent's anxiety decreases. In addition, therapeutic communication with the patient's family anxiety has a very close relationship because therapeutic communication is applied by the nurse in dealing with the patient's family to increase mutual trust, and if not applied will disrupt the therapeutic relationship which has an impact on anxiety in the patient's family. Nurses who have therapeutic communication skills will not only easily

establish a relationship of trust with patients, prevent illegal problems, provide professional satisfaction in nursing services and improve the image of the nursing profession and the image of the hospital. Communication is very important because it is a means to coordinate and work together in achieving goals.

CONCLUSION

The results showed that the therapeutic communication of nurses in the families of patients with indications of mechanical ventilator installation in ICU was mostly good, while most patients' family anxiety levels were moderate anxiety. Based on the

REFERENCES

- Asrul, & Afriani, M. (2024). Therapeutic Communication in Improving Nursing Services at Mitra Medika Tanjung Mulia Hospital Komunikasi Terapeutik Dalam Meningkatkan Pelayanan Keperawatan di RS . Mitra Medika Tanjung Mulia Abstrak Pendahuluan. *Journal of Pharmaceutical and Sciences*, 7(4), 628–634.
<https://doi.org/10.36490/journal-jps.com.v7i4.613>
- Astuti, N. L. S., Setiyarini, S., & Rahmat, I. (2023). The Effect of Augmentative Alternative Communication on Anxiety in Patients under Mechanical Ventilators in the Intensive Care Unit: Pilot Study. *Journal of Health Science and Medical Research*, 41(6), 2023967.
<https://doi.org/10.31584/jhsmr.2023967>
- Kalidupa, R., & Maria, L. (2021). Hubungan Komunikasi Terapeutik Perawat dengan Motivasi Sembuh pada Pasien Diabetes Mellitus di Ruang Rawat Inap Rumah Sakit XX. *Jurnal Ilmiah Kesehatan Rustida*, 8(2), 84–91.
- results of the statistical tests carried out, there was a significant positive and unidirectional relationship between variables, which means that the better the therapeutic communication delivered, the less anxiety was caused, and the correlation value (r) was categorized as a strong relationship.

Ethics Approval

This research has been carried out an ethical test and received ethical feasibility from the University Research Ethics Committee dr. Soebandi with number: No.1271/KEPK/UDS/VII/2025.

<https://doi.org/10.55500/jikr.v8i2.136>

Made, A., Prapti, N. K. G., & Putu, I. G. N. (2017). HUBUNGAN TERAPEUTIK PERAWAT-PASIEN TERHADAP TINGKAT KECEMASAN PASIEN PRE OPERASI Artini, Ni Made, Ni Ketut Guru Prapti1, I Gusti Ngurah Putu. *Community of Publishing in Nursing*, 5(3), 147–152.

Mahyuvu, T., Masqurotin, M., & Rumpiati, R. (2023). Therapeutic Communication with Patient Anxiety Levels During Operation Preparation: A Cross-Sectional Study. *International Journal of Nursing and Health Services (IJNHS)*, 6(4), 257–265.
<https://doi.org/10.35654/ijnhs.v6i4.716>

Mariati, Hindriyastuti, S., & Winarsih, B. D. (2012). GAMBARAN TINGKAT KECEMASAN KELUARGA PASIEN YANG DI RAWAT DI ICU RUMAH SAKIT MARDI RAHAYU KUDUS. *The Shine Cahaya Dunia S-1 Keperawatan*, 7(1), 11–22.
<https://doi.org/10.4135/9781412963909.n349>

Maryuni, R., Meilando, R., & Agustiani, S. (2023). Pengaruh Abdominal Massage terhadap Penurunan Volume Residu Lambung Pasien Kritis di Intensive

- Care Unit. *Jurnal Penelitian Perawat Profesional Pencegahan*, 5(3), 961–972.
<https://doi.org/10.37287/jppp.v5i3.1661>
- Mulyono, D., Sarjana, M., Universitas, K., & Sukabumi, M. (2024). Hubungan Komunikasi Terapeutik Perawat Dengan Tingkat Kecemasan Keluarga Pasien Yang Dirawat Di Ruang Intensive Care Unit (Icu) Uobk Rsud Jampangkulon Provinsi Jawa Barat. *Lentera: Jurnal Ilmiah Kesehatan Dan Keperawatan*, 6(2), 33–39.
<https://jurnal.ummi.ac.id/index.php/lentera/article/view/3272>
- Prasetyo Kusumo, M. (2017). Pengaruh Komunikasi Terapeutik Perawat Terhadap Kepuasan Pasien di Rawat Jalan RSUD Jogja. *Jurnal Medicoeticolegal Dan Manajemen Rumah Sakit* 10.18196/jmmr.2016, 6(1), 72–81.
<https://doi.org/10.18196/jmmr.6130>
- Salistia, B. Y. (2017). *Faktor-Faktor yang Mempengaruhi Kecemasan Mahasiswa Program Studi D III Keperawatan Dalam Menghadapi Ujian Skill Laboratorium: Studi Mixed Method di STIKES Banyuwangi*.
- Soleman, N., & Cabu, R. (2021). HUBUNGAN KOMUNIKASI TERAPEUTIK PERAWAT DENGAN TINGKAT KEPUASAN PASIEN DI RUANG RAWAT INAP RSUD MABA. *LELEANI: Jurnal Keperawatan Dan Kesehatan Masyarakat*, 1(2), 48–54.
<https://doi.org/10.55984/leleani.v1i2.71>
- Sulastris, S., Trilianto, A. E., & Ermaneti, Y. (2019). Pengaruh Komunikasi Terapeutik Perawat terhadap Tingkat Kecemasan pada Pasien Pre Operasi. *Jurnal Keperawatan Profesional*, 7(1).
<https://doi.org/10.33650/jkp.v7i1.503>
- Videbeck, S. L. (2019). *Psychiatric-Mental Health Nursing* (8 (ed.)). Wolters Kluwer.
<https://books.google.co.id/books?id=GwbEvgEACAAJ>