

ABSTRAK

Penelitian ini dilatarbelakangi oleh tantangan masa transisi pasca-rawat inap Rumah Sakit Jiwa (RSJ) bagi Orang Dengan Gangguan Jiwa (ODGJ) usia produktif yang rentan mengalami krisis percaya diri, kecemasan, dan stigma sosial akibat kehilangan peran sosial-ekonomi. Penelitian ini bertujuan mendeskripsikan dan menganalisis fungsi, proses, hambatan, serta strategi komunikasi terapeutik yang dilakukan perawat dalam mendampingi ODGJ usia produktif di Rumah Singgah Laras Jiwo, Kabupaten Magelang. Penelitian menggunakan metode kualitatif dengan pendekatan deskriptif. Informan dipilih melalui purposive sampling yang melibatkan perawat, ODGJ usia produktif, dokter, psikolog, pengelola, dan keluarga pasien. Data dikumpulkan melalui wawancara, observasi selama 30 hari, dan dokumentasi, kemudian dianalisis menggunakan model interaktif Miles, Huberman, dan Saldana dengan triangulasi sumber dan teknik untuk menjamin keabsahan data. Hasil penelitian menunjukkan bahwa komunikasi terapeutik perawat berfungsi efektif sebagai instrumen pemulihan psikososial dengan membangun rasa aman, kepercayaan, mengurangi kecemasan, serta mendukung adaptasi pasien melalui tiga tahap: adaptasi lingkungan dasar, adaptasi interpersonal terbatas, dan adaptasi sosial mandiri. Komunikasi empatik diterapkan melalui nada bicara yang lembut, mendengar aktif tanpa menghakimi, dan ketegasan dalam menjalankan rutinitas. Hambatan komunikasi meliputi faktor psikologis, klinis, kognitif-semantik, serta stigma sosial dan beban keluarga. Perawat mengatasinya melalui kehadiran yang konsisten, pendekatan interpersonal informal, menjaga kerahasiaan, pemetaan karakter pasien, dan komunikasi koordinatif dengan keluarga. Komunikasi terapeutik terbukti berkontribusi dalam meningkatkan kesiapan mental dan sosial ODGJ sebelum kembali ke masyarakat.

Kata Kunci: *Komunikasi Terapeutik, Masa Transisi, ODGJ Usia Produktif, Rumah Singgah Laras Jiwo, Pemulihan Psikososial.*

ABSTRACT

This research is motivated by the challenges of the transition period after hospitalization at a Mental Hospital (RSJ) for productive-age People with Mental Disorders (ODGJ) who are vulnerable to a crisis of confidence, anxiety, and social stigma due to the loss of their socio-economic roles. This study aims to describe and analyze the functions, processes, obstacles, and therapeutic communication strategies carried out by nurses in accompanying productive-age ODGJ at the Laras Jiwo Halfway House, Magelang Regency. The study used a qualitative method with a descriptive approach. Informants were selected through purposive sampling involving nurses, productive-age ODGJ, doctors, psychologists, administrators, and patient families. Data were collected through interviews, 30-day observations, and documentation, then analyzed using the interactive model of Miles, Huberman, and Saldana with triangulation of sources and techniques to ensure data validity. The results show that nurses' therapeutic communication functions effectively as an instrument of psychosocial recovery by building a sense of security, trust, reducing anxiety, and supporting patient adaptation through three stages: basic environmental adaptation, limited interpersonal adaptation, and independent social adaptation. Empathetic communication is implemented through a gentle tone of voice, active, non-judgmental listening, and assertiveness in carrying out routines. Communication barriers include psychological, clinical, cognitive-semantic factors, as well as social stigma and family burden. Nurses address these through consistent presence, informal interpersonal approaches, maintaining confidentiality, mapping the patient's character, and coordinating communication with the family. Therapeutic communication has been shown to contribute to improving the mental and social readiness of people with mental disorders (ODGJ) before returning to the community.

Keywords: *Therapeutic Communication, Transition Period, Productive-Aged Individuals with Mental Health Disorders, Laras Jiwo Halfway House, Psychosocial Recovery.*