

## IMPLEMENTATION OF EFFECTIVE COMMUNICATION IN HEALTH EDUCATION ACTIVITIES FOR NON-COMMUNICABLE DISEASES TO ACHIEVE SUSTAINABLE DEVELOPMENT GOALS (SDGs)

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### Abstract

The world has a dream of achieving a prosperous society. This dream is encapsulated in the Sustainable Development Goals. One of the points included is Good Health and Well-being. A healthy society will lead to a developed and progressive nation. One of the obstacles to global health is non-communicable diseases. These diseases, which are among the leading causes of death worldwide, can be addressed early through prevention programs. One such proven effective prevention program is health education. Health education is a form of communication to the community as a health effort. To achieve success, certain techniques are needed in the delivery process. This study uses a qualitative method with a descriptive approach. Data collection techniques were carried out through interviews and observations, while the data analysis techniques were data reduction, data modeling (data display), and concluding. The results of this study show that there are attitudes of Respect, Empathy, Audibility, Clarity, and humility (REACH) in the communication of general practitioners towards participants in health education activities conducted by Klinik Pratama Nuhato Antapani Bandung.

**Keywords:** Effective Communication, Health Counseling, Non-Communicable Diseases

### Abstrak

Dunia memiliki impian untuk mencapai masyarakat yang sejahtera. Impian ini tercakup dalam Tujuan Pembangunan Berkelanjutan, salah satunya adalah Kesehatan dan Kesejahteraan yang Baik. Masyarakat yang sehat akan mengarah pada negara yang maju dan berkembang. Salah satu hambatan bagi kesehatan global adalah penyakit tidak menular. Penyakit-penyakit ini, yang merupakan salah satu penyebab utama kematian di seluruh dunia, dapat ditangani lebih awal melalui program pencegahan. Salah satu program pencegahan yang terbukti efektif adalah pendidikan kesehatan. Pendidikan kesehatan merupakan bentuk komunikasi kepada masyarakat sebagai upaya kesehatan. Untuk mencapai keberhasilan, diperlukan teknik-teknik tertentu dalam proses penyampaian. Penelitian ini menggunakan metode kualitatif dengan pendekatan deskriptif. Teknik pengumpulan data dilakukan melalui wawancara dan observasi, sementara teknik analisis data meliputi reduksi data, penyajian data, dan penarikan

*kesimpulan. Hasil penelitian ini menunjukkan bahwa terdapat sikap Respect (Penghormatan), Empathy (Empati), Audibility (Kejelasan Suara), Clarity (Kejelasan), dan Humility (Kerendahan Hati) dalam komunikasi dokter umum terhadap peserta kegiatan pendidikan kesehatan yang dilakukan oleh Klinik Pratama Nuhato Antapani Bandung.*

**Kata Kunci:** Pemberdayaan ekonomi, kolaborasi, inovasi bisnis

## INTRODUCTION

The development of a generation involves various components. These components ultimately aim to form elements that achieve community welfare. The need to achieve community welfare is summarized in an agreement agreed upon by world leaders. The world's dream to achieve equitable and fair welfare in various aspects of life is the reason for the creation of a global action plan agreed upon by world leaders, namely the SDGs (Sustainable Development Goals), which have 17 goals with 169 targets, hoping to be achieved by 2030 (Tefera dkk., 2024). One of these goals is point 3, which is a healthy life and well-being.

Health is one of the foundations for building and developing. Without a healthy society, welfare cannot be realized. Unhealthy conditions can occur if someone contracts a disease. The disease can ultimately lead to decreased productivity or even death. One of the diseases currently receiving attention and causing many deaths is non-communicable disease. In fact, according to World Health Organization (WHO) data, Non-Communicable Diseases (NCDs) kill 41 million people every year, equivalent to 74% of all deaths globally. Non-communicable diseases are also known as chronic diseases, such as cardiovascular diseases or heart disease, hypertension, cancer, and diabetes (Jimenez Carrillo dkk., 2020).

Non-communicable diseases tend to be chronic, difficult to treat, and hard to cure, thereby lowering the quality of life of sufferers. Additionally, long-term treatment often results in financial problems for the sufferer and their family. The most appropriate action to respond to non-communicable diseases is prevention (Shanmuganathan dkk., 2022). Chronic diseases usually last a long time and require substantial costs for their therapy. The increase in the incidence of non-communicable diseases is influenced by many factors. These factors include a sedentary lifestyle, dietary habits, heredity, and other behavioral factors (Hulchiy dkk., 2020).

In dealing with diseases, several efforts can be made. According to the latest Health Law, Law Number 17 of 2023 concerning health, health efforts are all forms of activities and/or a series of activities carried out integrally and continuously to maintain and improve public health in the form of promotive, preventive, curative, rehabilitative, and/or palliative efforts by the Central Government, Regional Governments, and/or the community. Based on this statement, health efforts can be carried out by the community itself. For non-communicable diseases, efforts that can be made before a patient has to undergo curative treatment can prevent the disease from attacking first. Non-communicable diseases can also be prevented by improving an individual's quality of life.

These two things are called promotive and preventive measures (Magnusson & Patterson, 2021).

One promotive and preventive step that can be taken is to conduct health education. The right way to change attitudes and increase public knowledge is through health education. Health education is an essential activity or effort to convey health messages to the public, groups, or individuals. With the hope that with these messages, the public, groups, or individuals can gain better health knowledge (Heine dkk., 2021). With better health knowledge, the community is expected to maintain health more optimally.

Education is one form of health information dissemination effort that can be the key to the success of health efforts. A previous study revealed that an educational activity could change someone's knowledge and attitude toward a disease (Osborne dkk., 2022). Based on other research, it was stated that providing education to a group of students about non-communicable diseases influenced and became a means of increasing knowledge in preventing non-communicable diseases (Sipido & Nagyova, 2020). From these studies, it is stated that a health education activity can become a gateway for increasing knowledge, which is expected to be a path for improving community health status. Ultimately, improving community health status becomes one effort to achieve one of the SDG goals, namely a healthy life and well-being.

Successful health education activities certainly require effective and targeted communication methods. If it turns out that education or providing health information is given without certain techniques, the delivery of the message is feared to be not optimal. Previous studies concluded that communication is an important component because doctors will interact with many different and diverse patients (Istifada dkk., 2021). Therefore, inserting communication techniques into the health education process is necessary.

In this study, the theory of effective communication laws is used. The goal of effective communication is to facilitate the understanding of the message conveyed between the sender and receiver so that the language is clearer, more complete, balanced in delivery and feedback, and training in using non-verbal language well (Allen dkk., 2020). Nicholson dkk., (2020) state that effective communication occurs when the listener (message recipient) captures and interprets the idea conveyed as intended by the speaker (message sender). Developing an effective doctor-patient relationship efficiently, with the main goal of conveying information or providing the necessary explanation to build cooperation between the doctor and the patient. Communication conducted verbally and non-verbally results in the patient's understanding of their health condition, opportunities, and obstacles, so that they can jointly with the doctor seek alternatives to address their problems (Islam dkk., 2022). Lauber dkk., (2020) present the 5 Inevitable Laws of Effective Communication summarized in one word: REACH, which means to embrace or achieve and is described as follows:

1. **Respect:** The first law in developing effective communication is the attitude of respecting each individual who is the target of the message we convey. Mutual respect is the first law in our communication with others.
2. **Empathy:** Empathy is our ability to put ourselves in the situation or condition faced by others. One of the main prerequisites for having an empathetic attitude is our ability to listen and understand first before being listened to or understood by others.
3. **Audible:** Audible means: can be heard or understood well. If empathy requires us to listen first or receive feedback well, then the audibility of the message we convey can be accepted by the recipient.
4. **Clarity:** In addition to the message being understandable, the fourth law related to it is the clarity of the message itself so that it does not lead to multiple interpretations or various interpretations. Clarity can also mean openness and transparency. In communication, we need to develop an open attitude (nothing is covered up or hidden) to foster trust from the recipient or our team members.
5. **Humble:** This attitude is an element related to the first law to build respect for others, usually based on the humility we possess.

## **METHOD**

The method used in this study is qualitative. According to Jaya, (2020) qualitative methods focus on natural, real, subjective, and interactive events with participants. The type of research used is descriptive research, which aims to provide a detailed picture of a phenomenon or symptom. Descriptive research presents a detailed picture of a specific situation, social setting, or relationship. It is used to gain comprehensive knowledge about the research object at a particular time (Purwanza, 2022). Qualitative methods are descriptive, with the main objective being to obtain a deeper and holistic understanding of the phenomenon to be studied, based on a natural setting. The researcher acts as the key instrument for obtaining the necessary data (Winarni, 2021). The data collection techniques used in this study are interviews and observations. Purwanza, (2022) states that interviews are a data collection technique conducted through interaction and communication to reveal the attitudes, behaviors, experiences, aspirations, and expectations of respondents. In this study, the researcher conducted interviews with general practitioners who carried out health education activities. According to Jaya, (2020), observation is useful for explaining, providing, and detailing the symptoms that occur. In this study, the researcher conducted observations by directly participating in the health education activities organized by Klinik Pratama Nuhato Antapani Bandung. Thus, the researcher could explain in detail everything that happened during these activities.

The data analysis technique in this research uses the Miles and Huberman model. Miles, Huberman, and Saldana, as cited in Winarni, (2021), state that the data reduction stage is conducted to determine relevant, meaningful data and important aspects based on the

research conducted and to obtain the data needed by the researcher. The data presentation (data display) is presented in the form of brief, narrative descriptions (using text). Conclusion drawing (verification) is carried out by providing explanations from data collection activities through observation, and interviews, and supported by documentation.

## **RESULTS AND DISCUSSION**

Communication skills are one of the crucial factors that a doctor must possess to support their practice. Through good communication skills, the quality of health education activities can be maximized, and the desired outcomes can be achieved. This, in turn, reduces the risk of misunderstandings among participants, ensuring that information is conveyed effectively. This study was conducted through activities carried out by a general practitioner practicing at Klinik Pratama Nuhato Antapani Bandung. The activity performed by the general practitioner was a health education session for members of a local exercise community near the clinic. The event began with the distribution of digital posters to inform the community about the upcoming session.

Based on the observations conducted by the researcher, the general practitioner started by recording the attendance of participants and performing basic health checks, including measuring the participants' blood pressure. The health education session focused on explaining one of the non-communicable diseases, namely hypertension or high blood pressure. To assess the participants' understanding of hypertension, the general practitioner began the session by asking how much they knew about the disease. This approach helped the general practitioner tailor the information to be presented, ensuring the health education session proceeded effectively.

The results of the interviews with general practitioners at Klinik Pratama Nuhato Antapani Bandung indicate that the health education activities conducted in person are an effective communication strategy. This is evidenced by the absence of complaints received by the clinic during these educational activities. This achievement is largely due to the clinic's consistency in regularly conducting health education activities for the surrounding community. Based on the interviews conducted by the researcher, it can be concluded that the reason Klinik Pratama Nuhato Antapani Bandung carries out health education activities for the local community is to prevent non-communicable diseases. This effort aims to achieve the third goal of the Sustainable Development Goals (SDGs), which is to ensure healthy lives and promote well-being for all.

According to what was conveyed by Lan & Cong, (2020) regarding the 5 Inevitable Laws of Effective Communication summarized in one word: REACH (Respect, Empathy, Audible, Clarity, Humble), the effective communication of general practitioners with patients during health education activities can be seen as follows:

1. **Respect:** Respect and mutual appreciation are the first laws in communicating with others. Based on this statement, the general practitioners at Klinik Pratama Nuhato Antapani Bandung place themselves on an equal footing with the participants, acting as the message conveyors and being able to receive feedback on the messages

delivered. In this case, there is two-way communication between the general practitioners and the participants. Based on this, it can be seen that the general practitioners show respect and appreciation towards the participants by providing the best possible service. The general practitioners provide quick and accurate answers to the participants' questions during the health education activities. Thus, service to the participants remains a top priority for the general practitioners at Klinik Pratama Nuhato Antapani Bandung. In line with the above statement, the participants also have respect and appreciation for the general practitioners. This can be seen from the absence of any obstacles experienced by the general practitioners during the health education activities, indicating that the general practitioners never receive unpleasant treatment or feel offended when communicating with the participants.

2. Empathy: One of the main prerequisites for having an empathetic attitude is our ability to listen and understand first before being listened to or understood by others. General practitioners allow participants to express their complaints or simply consult in general about non-communicable diseases. In response to this, the general practitioners understand the discomfort experienced by the participants both verbally and non-verbally. The emergence of empathy helps general practitioners find the right consultation techniques, as it is important for a general practitioner to understand the characteristics of the participants. The hope is that the participants will feel more comfortable explaining the symptoms they feel, their medical history, and other necessary information during the health education activities.
3. Audible: Audible means: can be heard or understood well. In health education activities, general practitioners do not only convey information verbally because if done so, there is a risk of misunderstanding the information by the participants. To overcome this, the general practitioners prepare information in the form of e-brochures using a laptop as a visual aid to help participants better understand the information delivered by the general practitioners and reduce the risk of misunderstandings.
4. Clarity: The fourth law is the clarity of the message itself so that it does not lead to multiple interpretations or various interpretations. Clarity can also mean openness and transparency. In communication, we need to develop an open attitude (nothing is covered up or hidden), fostering trust from the recipient or our team members. General practitioners convey information using everyday language that can be easily understood by the participants. This minimizes the possibility of misinterpretation. Additionally, general practitioners provide explanations using the Sundanese language, which is still commonly used daily by the participants. Besides improving participants' understanding, using the Sundanese language helps general practitioners become more familiar with the participants, hoping to increase participants' trust in the general practitioners. During consultation sessions, patients must convey their medical condition/history truthfully. This is necessary to avoid providing incorrect information that could be fatal to the participants' safety. Even though the health education activities have been carried



out, general practitioners still feel that the consultations conducted are not enough to address the participants' complaints fully. For certain cases, further examination still needs to be conducted to obtain more accurate and effective health solutions.

5. **Humble:** This attitude is an element related to the first law of building respect for others, usually based on the humility we possess. Relating to the first point, respect, general practitioners do not limit consultation opportunities for each participant, showing that general practitioners have a humble attitude as an important element of achieving effective communication by providing the best service according to the participants' needs. Likewise, although general practitioners do not limit consultation opportunities, participants still respect their time. Participants do not feel they must be fully served according to their wishes, but they also understand and appreciate the time provided by the general practitioners.

## **CONCLUSION**

Based on the results of the research and discussion above, it can be concluded that the communication between general practitioners and the participants of the health education activities aligns with the 5 Inevitable Laws of Effective Communication, summarized in the acronym REACH (Respect, Empathy, Audible, Clarity, Humble) as follows:

**Respect:** There is mutual respect and appreciation between the general practitioners and the participants. This is evident as the general practitioners at Klinik Pratama Nuhato Antapani Bandung place themselves on an equal footing with the participants, engage in two-way communication, and provide quick and accurate answers to the participants' questions. **Empathy:** General practitioners show empathy by understanding the discomfort experienced by the participants, both verbally and non-verbally. This helps participants feel more comfortable explaining their symptoms, medical history, and other necessary details during the health education activities.

**Audible:** In addition to verbal health education, the general practitioners prepare information in the form of brochures using laptops, which are shown to the participants as visual aids to reduce the risk of misunderstandings. **Clarity:** To provide information as clearly as possible, the general practitioners use everyday language that is easily understood by the participants. Additionally, they provide explanations in Sundanese, a language still commonly used by the participants.

**Humble:** Humility is demonstrated by the general practitioners not limiting consultation opportunities for any participant. Conversely, the participants respect the time allocated for consultations and do not feel entitled to be fully served according to their wishes. Recommendations for future research include conducting similar studies with a broader scope, such as activities conducted directly by government entities. This way, the impact of health education activities will be more significant in achieving the third goal of the Sustainable Development Goals (SDGs).

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