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## Speech Act Analysis in Nurse-Patient Communication

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### Keywords :

*Speech Act;  
Illocutionary;  
Nurse-Patient  
Communication*

### Abstract

*In the medical field, communication between nurses and patients is essential since it can influence patients' comprehension of medical situations and adherence to therapy. With an emphasis on the many kinds of illocutionary speech acts and their pragmatic meanings, this study attempts to investigate speech acts utilized in nurse-patient communication. This study employs a qualitative research method and descriptive approach. The study, which was carried out at Daya Hospital in Makassar, revealed the many speech acts—representative, directive, expressive, declarative, and commissive—that nurses and patients employ when communicating. Nurses commonly use directive speech actions when communicating with patients in order to provide care and take action. Patients commonly use expressive speech acts to express all of their feelings, illnesses, and concerns. Appropriate and effective speaking actions can benefit patients and nurses, speed up the healing process, and create a pleasant environment.*

### Kata Kunci :

*Tindak Tutur;  
Illokusi;  
Komunikasi  
perawat-pasien*

### Abstrak

*Komunikasi antara perawat dan pasien memainkan peran krusial dalam pelayanan kesehatan, di mana efektivitas komunikasi dapat mempengaruhi pemahaman pasien terhadap kondisi medis dan kepatuhan terhadap perawatan. Penelitian ini bertujuan untuk menganalisis tindak tutur yang digunakan dalam komunikasi perawat-pasien, dengan fokus pada jenis-jenis tindak tutur ilokusi dan makna pragmatiknya. Penelitian ini*

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*menggunakan metode penelitian kualitatif dengan pendekatan deskriptif. Dilakukan di rumah sakit daya makassar, hasil penelitian menunjukkan jenis-jenis tindak tutur yang digunakan perawat-pasien dalam berkomunikasi yaitu representatif, direktif, ekspresif, deklaratif, dan komisif. Untuk memberikan perawatan dan melakukan tindakan terhadap pasien, perawat seringkali menggunakan tindakan tutur direktif saat berkomunikasi dengan pasien. Pasien seringkali menggunakan tindak tutur ekspresif untuk mengkomunikasikan semua masalah, penyakit, dan perasaan mereka. Komunikasi Perawat dan pasien dapat ditingkatkan melalui tindakan tutur yang tepat dan berhasil, yang juga dapat mempercepat proses penyembuhan dan membantu menciptakan lingkungan yang ramah..*

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## INTRODUCTION

The process by which people exchange information via a system of signs, symbols, and behavior is known as communication. Building relationships between individuals requires communication because it affects how attitudes and beliefs are formed and can persuade others to act in a way that suits the communicator. If there is mutual comprehension between the communicator and the communicant, the exchange of information will proceed in accordance with the speaker's aims and objectives. Through communication activities, each speaker hopes the other person will comprehend their goals and intentions, in order to share opinions or to express ideas and thoughts to others. If others are unable to understand the language being used, then communication is not ideal.

Speech acts and speech events take place within the communication process. A speech event is the occurrence of utterances utilized by every member of society during interaction. A speech event, according to Chaer (2010), is the occurrence or continuous linguistic interaction in one or more speech forms involving two parties, namely the speaker and the interlocutor,

with a single time-based primary point of speech. The pragmatic study of speech acts examines communication between the speaker and the listener. Speech acts are any actions taken by an individual to communicate all of their ideas and feelings by speech realization (Apriastuti 2017). Speech is not just a means of communicating ideas or providing information; it may also be used to sway the other person.

In the context of daily life, speakers frequently hear and even utilize language in the form of speech acts when interacting with their speech partners. A case in point is the interactive interaction that takes place in the hospital setting between nurses and patients.

In order to achieve optimal health, hospitals serve as a method of delivering healthcare services to the community and help coordinate health initiatives to raise awareness, willingness, and capacity to live a healthy lifestyle for all residents. A speech event, or exchange of information between nurse and patient, takes place during the interaction process. Nurse with varying views receive complaints or statements from patients.

Effective communication between nurses and patients has a big impact on how well patients grasp medical information, how well they follow their treatment plans, and how comfortable they are receiving medical care. Nurses need to be able to communicate effectively in order to establish positive relationships with patients and provide clear information as medical professionals who work closely with them.

The quality of health care can be improved in large part through communication between nurses and patients. In addition to being in charge of the technical facets of medical care, nurses are also the main point of contact for patients seeking emotional support and information. A key component of this communication is speech acts, which include using language to relax patients, give information, give instructions, and build more sympathetic connections. It is essential to comprehend speech acts in the context of medical communication in order to

guarantee that patients are given clear information and feel supported during their treatment.

Given the preceding definition, it is essential to see how nurses and patients communicate. When communicating with people at the community health center, this can enable a variety of speech behaviors. Effective communication is essential between nurse and patient because it serves as the foundation for the provision of suitable services for patient complaints or health issues. In medical communication, the study of speech actions is crucial because it may demonstrate how pragmatic language features impact how patients interpret the information they are given. Speech act analysis is used in this study to analyze the different speech acts that are employed in nurse-patient communication and speech acts play in fostering relationships between nurse and patient.

Speech acts, or pragmatics, are closely related concepts. Sentences' meaning is determined by speech activities. Speech acts are used in all communication-based interactions. Similar to how people express their thoughts, objectives, and feelings through communication. Searle (1979) says that "Language communication is not just a symbol, word, or sentence, but it would be more appropriate to call it a product or result of a symbol, word, or sentence that is in the form of speech act behavior". A speaker must adapt to the context before uttering a statement. Tarigan in Nadar (2009) asserts that pragmatics "focuses on the different ways in which different social contexts of language performance can influence interpretation and examines special utterances in special situations." This phrase clarifies that pragmatic studies look at the environment that can facilitate language comprehension as well as the meaning of language

Speech acts are context-bound when used. Put differently, the usage of speech acts is influenced by the speech circumstance and speech occurrence. We must be able to comprehend the speaker's and speech partner's context while analyzing speech acts.

Therefore, speech actions typically focus on meaning rather than theories that attempt to evaluate sentence form. The goal of every speech act is to communicate something. The speaking context and the speaker's position must be taken into consideration, though. A speaker can perform at least three different kinds of pragmatic actions, according to Searle in Wijana (2010): locutionary acts, illocutionary acts, and perlocutionary acts, which was first put forth by Austin in 1962 and expanded upon by Searle in 1969.

According to Searle in Rahardi (2003), locutionary speech acts are those whose meaning is consistent with what the speaker is saying. Perlocutionary speech acts are those that the speaker uses to influence or affect the speech partner. Illocutionary speech acts are actions taken by the speaker that are related to the speech's purpose and other goals.

Illocutionary speech acts can be classified into five categories: directive, expressive, declarative, representational (assertive), and commissive. For example, stating, reporting, displaying, and noting are examples of representative (assertive) speech acts that bind the speaker to the veracity of what is said. Directives include requests, questions, orders, prohibitions, permissions, and advice, and they are speech acts that are intended to be performed by the listener. An expressive speech act is one that is generated with the goal of having the utterance be understood as an assessment of the item being discussed. Examples of expressive speech acts include complimenting, thanking, criticizing, and complaining. A commissive speech act, such as swearing, threatening, or promising, binds the speaker to follow out the actions stated in the utterance. Declarations are speech acts, such as determining, canceling, forbidding, permitting, and forgiving, that are performed by the speaker with the goal of establishing something new (status, condition, etc.) (Searle 1979).

According to earlier research by Rohma and Wafa (2022), doctor use directive acts, explanations, orders, requests, advice,

greetings, answering, confirmations, fact-assertive acts, and prohibited declaration acts. Asking is primarily an illocutionary act since the doctor's purpose in asking is to learn more about the patient's issue and enhance communication between the two parties. The study by Purwaningsih and Dewi (2019) found that expressive speech acts include expressing thanks and compliments, whereas directive speech acts include pragmatic interrogative imperative, passive imperative, suggestion, prohibition, and query. Speech acts serve as a means of communication between patients and medical practitioners, including being polite, avoiding confrontation, and demonstrating deference.

Besides that, study from Shargawi (2025) revealed that Doctors' and patients' speech acts, along with the types of speech acts that are accessible or could be developed in relation to their variations, including directives, assertives, expressives, and assurances. It was discovered that patients' anxiety levels and trust in the medical procedure are influenced by the doctors' more sympathetic assurance. An evaluation of current philosophical speech-act theories, which are seen as components of a therapeutic interlocution, and to interpret how effective they are in this context (Bremer and Sieron 2018).

It is not always the case that a speech act is a direct representation of the elements of meaning. Leech (1993) outlines several factors that should always be taken into account when conducting pragmatic studies in relation to the different intentions that may be conveyed. These factors are as follows: (a) Speaker and Interlocutor: The speaker's characteristics include age, socioeconomic background, gender, degree of familiarity, and so forth. (b) Context of Speech: The interlocutor requires a common background of knowledge in order to interpret the meaning of the utterance. (c) The Objective of Speech: There are specific goals and intentions that drive the speaker's speech pattern. It is possible to convey the same goal using different speech forms, or the opposite is true: different speech forms can

convey different meanings. (d) Speaking as a Way to Do Something: Verbal acts or performances that take place in specific contexts or at specific times, and that obviously involve the speaker and the interlocutor, are related to this characteristic. (e) Speech as a Verbal Act-Based Product: In this context, "speech" refers to the language output of a speech act as a linguistic outcome identifiable by its use in particular contexts.

Descriptive qualitative research is what this kind of study is. In a linguistic community, descriptive data from this kind of qualitative research might be expressed as spoken or written words. The goal of qualitative research is to comprehend the phenomenon that the study participants encounter overall by using a variety of scientific methodologies, articulating it in words and language, and experiencing it in a particular setting (Moleong 2015).

This study was done at Daya Hospital in Makassar, nurses and patients employed a variety of words and sentences, particularly those pertaining to illocutionary speech acts. The main focus of this study is the illocutionary speech act in communication between nurses and patients. Methods of observation, note-taking, recording, and documentation were employed in this study to gather data. This study's data analysis methods include data transcription, coding, data classification, describing, and drawing conclusions from the findings.

## **RESULT AND DISCUSSION**

### **Research Finding**

The study's analysis of the data concentrated on illocutionary speech acts that surfaced in Nurse-Patient Communication at Daya Hospital Makassar. Various verbal exchanges between nurses and patients during care giving are included in these illocutionary speech acts. The findings of the investigation of illocutionary speech acts in nursing-patient communication at Daya Hospital Makassar can be summed up as follows.

Directive speech act

Ns1: still has chest pain, sir?

Ns2: still vomiting?

Ns3: when was the last time you had a fever?

Ns4: no other nausea and vomiting?

Ns5: any pain?

Ns6: how is he?

Ns7: what's his complaint?

Ns8: are there any other complaints ma'am?

Ns9: does he feel anything, how is he?

The sentences that nurses said to patients are included in the data above. Because the usage of questioning sentence patterns necessitates responses from patients in order to determine the patient's health, these sentences are included in the directive speech act of questions. As said above, in order to provide the patient with the right care, it is crucial to ask questions like these to learn about the patient's health.

Ns10: Okay. Let me know if the infusion is ready to be replaced with the new one.

The usage of the conditional structure "If" in this line, which indicates that the request is optional and contingent on specific conditions, places it under the category of directive requesting. This sentence requests that, should specific conditions be met, the patient take action (notify). For the patient's health to be maintained, requests such as these are deemed significant and ought to be complied with.

Ns11: don't lift heavy things yet.

Ns12: don't give him milk yet.

Because the term "don't" suggests that it should not be done to maintain the patient's health, this sentence falls within the category of prohibitive directives.

Ns13: eat lots of vegetables and fruit to facilitate bowel movement.

Ns14: drink water to maintain your health.

Ns15: take medication regularly to prevent inflammation.



An advisory directive is used to contain this sentence. The patient is more likely to understand and heed the advise because the language above gives a rational and obvious justification for it.

Ns16: lie down!

Ns17: lower your sarong a little!

Ns18: move your hand too!

The directive commanding form category includes this statement. This statement guarantees that the patient comprehends and consents to the directions provided and demonstrates the steps that must be followed.

One kind of speech act that seeks to elicit a specific response from the speech partner is a directive illocutionary act. This speech act is often referred to as an impositive illocutionary act (Leech 1993). Generally speaking, this speech act falls into a number of primary types, each with unique traits and functions in the communication context, particularly in the healthcare setting.

The act of speaking to make a polite or indirect request is known as the speech act of requesting. The nurse gently requests that the patient mention any discomfort they may be feeling. Giving instructions or directives that the speech partner must abide by is known as the speech act of commanding. These directions are clearer and more aggressive. Giving comments or advise with the intention of benefiting the conversation partner is known as the speech act of advising. In addition to giving medical advice, directive speech acts often demonstrate empathy and inspire the patient. The nurse can lessen patient fear and boost their participation in the care process by offering emotional support through these speaking acts.

Expressive speech act

Ns19: good. you take the medicine regularly so you don't have a fever anymore.

This statement is part of the category of praise-related expressive speech activities. 'Good' is used to demonstrate this, as the patient complies with the instructions and guidance.

P1: I feel pain in my stomach. It hurts so much.

P2: initially my body felt weak and tired.

P3: my calves hurt and feel heavy.

P4: exhausted and anxious.

This sentence falls within the category of expressive speech acts that involve complaining. This is evident in every statement the patient makes, expressing the issues they are having and the pain they are feeling.

In order to convey feelings, expressive speech acts are used. For instance, a nurse may express thanks for the patient's improved condition. When the patient has complied with the nurse's instructions and the nurse has given the greatest care possible, it demonstrates an emotional link between the two. Additionally, because nurses are willing to listen to patient grievances and offer assistance, patients can voice their concerns without feeling burdened.

Declarative speech act

Ns20: Oh it's okay.

This sentence is part of a declarative speech act that grants permission. The nurse's response to the patient, in which the patient requests authorization to provide milk to his child, demonstrates this.

Declarative speech acts are intended to alter the circumstances. For instance, a nurse may permit her patient to consume any food or beverages they desire because of the improvement in their health.

Representational/Assertive speech act

Ns21: I want to inject the medicine first.

Ns22: I inject the medicine now.

Ns23: This is the pain medicatio.

Ns24: I want to change the bandage.

This sentence is an example of an assertive speech act that states or illustrates something. This is crucial because the patient will better understand the nurse's activities, resulting in more open and transparent communication.

In order to assist patients feel less anxious, medical

practitioners might provide information regarding the feelings or experiences that may be encountered throughout the operation. They are able to better prepare themselves emotionally and psychologically for the procedure or therapy by having a clearer idea of what to anticipate.

Commissive speech act

Ns25: yes sir, we'll check it again tonight.

Ns26: be patient, later there will be new doctor's instructions, we'll convey them.

This sentence is part of a promise-related commissive speech act. The nurse subtly commits to giving the patient information and further care.

The Commissive Speech Act tries to accomplish something; for instance, the nurse says she will check on the patient again in a few hours. In order to help the patient feel more at ease, avoid thinking about things that could make their pain worse, and, most importantly, feel that the nurse is taking good care of them while they are in the hospital, the nurse typically does this.

## CONCLUSION

In nurse-patient communication, directive, expressive, commissive, declarative, and assertive speech acts are employed. In order to offer care and take action on patients, nurses frequently utilize directive speech actions when speaking with patients. Patients frequently employ expressive speech acts to communicate all of their concerns, ailments, and feelings. Nurses and patients can be enhanced by appropriate and successful speech acts, which can also hasten the healing process and help establish a welcoming environment. Good communication fosters trust between nurses and patients, making it safer and more comfortable for patients to voice their concerns and inquiries. Additionally, when employing speech acts, nurses must consider the setting and context to avoid offending patients or creating misunderstandings. The language must be simple enough

for patients to understand, and it must take into account their feelings and mental health. Through comprehension and application of appropriate speech acts, nurses can enhance patient relationships and service quality.

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