THE IDEAL DOCTOR IMAGE IN ASIAN COUNTRIES: A QUALITATIVE STUDY OF GEN Z PATIENT'S PERSPECTIVE

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ABSTRACT

Understanding the image of the ideal doctor from the patient's point of view is crucial for improving healthcare experiences, especially considering the phenomenon of patient dissatisfaction in Asian countries. This research adopts a multi-dimensional approach, incorporating symbolic interaction, cultural background, and communication theories to explore patients' perspectives on the ideal doctor. By examining the communication process through this lens, researchers can uncover the symbolic meanings attributed to doctors and their behaviours, shedding light on patients' perceptions of the ideal doctor. This study aims to find out perspectives from Indonesia, Singapore and Malaysia on the image of an ideal doctor based on the views of a new generation of patients with an age range of 20-26 years (Gen Z), living in urban areas, and having had medical visits. This research is qualitative research, with an interpretive phenomenological approach. This research uses in-depth interviews, to gather patient views about the ideal doctor. To identify recurring themes and patterns, the collecting data will be coded using Atlas. After that the result could be provide insight into the qualities, behaviours, and attributes that patients associate with the ideal doctor. The results show, ideal doctor is a person who actively listens, shows understanding, uses effective verbal and nonverbal communication, have dialectical nature of autonomy and connection, could balancing patients' desire for involvement in decision-making with the need for expert guidance, understands the importance of privacy in healthcare, and takes steps to ensure that sensitive information is handled securely.

KEYWORDS
symbolic interaction; doctor-patient communication; doctor image; social culture; trust

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INTRODUCTION

Patient dissatisfaction with health services is an important issue that still arises in Indonesia, Singapore and Malaysia. This is evidenced by a survey conducted by the Global Health Resilience Index (GHSI) score in 2021. From 0 to 100, it is noted that Indonesia is in fourth place with a score of 50.4 which is followed by Malaysia in third place with a value of 56.4 and Singapore in second place with a value of 57.4 while in the first position is held by Thailand with a value of 68.2. From this data, the GHSI was carried out on 195 countries in the world. This survey covers seven categories, including: health systems, prevention, detection, reporting, speed of response, environmental risks, and compliance with international standards. Which become several variables that interpret patient's satisfaction. Another survey conducted by IPSOS poll, the satisfaction survey about national health systems varies between countries. That conduct on 2019, demonstrates the degree of satisfaction with state health systems worldwide. The data show that, 60% of Singaporeans are satisfied, 22% are neither satisfied nor dissatisfied, and 18% are dissatisfied. In the meantime, 44% of Malaysians are satisfied, 39% are neither satisfied nor dissatisfied, and 16% are dissatisfied. Unfortunately, Indonesia wasn't mention in this survey. To, observe the reality in Indonesia, there is data survey in 2021 (January-March) conducted at the Cut Meutia Hospital, North Aceh Regency, Aceh Province, with the total number of outpatient visits at Cut Meutia Hospital being 23,619 people, found that: there is dissatisfaction and complaints regarding health services at the hospital concerned. Some of the things that make patients feel less fasting are because the services are very slow, doctors prescribe drugs without explanation, and medical team don't speak with friendly. As a result, patients feel uncomfortable and avoid to visits again. A similar survey also conducted on January 4th 2021 at the Jenu Health Center, Tuban. From the survey results, it was found that the patient satisfaction level was at 30.5% because the medical team were not friendly, less clear in providing information, and did not care about patients. As a result, there are many misunderstandings between the medical team and the patient.

Based on the data above, the inability of doctors to think holistically during medical visits is the main problem. Whereas medical visit is a form of symbolic interaction. Where to understand this need to do a communication approach. It should be understood that communication is more than just sending and receiving messages. However, communication is also concerned with how information is understood by both the sender and the receiver in two-way communication processes. In a medical visit this process appears in a series of "Anamnesis" processes. This anamnesis process allows the implementation of two-way communication between doctors and patients. As a result, doctors are able to find problems and draw conclusions through providing diagnosis and medical treatment. However, the health services in Indonesia, Malaysia and Singapore are still unable to think holistically in the meaning of this symbolic interaction. This is due to differences in culture, beliefs, social status, economy, and education that form a distance between doctors and patients. With the emergence of this distance between doctors and patients, many problems arise that cause misunderstandings and will affect patient satisfaction. For this reason, to achieve patient satisfaction, there needs to be a model or strategy that must be practiced. In fact, previous studies have looked for patient-doctor communication models. However, as research progresses, it is found that those models are not universally applicable. This happens as a result of the influence of cultural background which will have an impact on the doctor-patient interaction. An example is the view regarding the hierarchical process during a medical visit. Southeast Asian doctor-patients are viewed as higher hierarchical levels whereas doctors and patients are viewed at lower
levels. So that the patient-centered model is less practicable in Indonesia, Singapore and Malaysia.

Due to the concern, the World Health Organization (WHO) has expressed the need for a bio-psychosocial model approach to health care. The bio-psychosocial model expects the doctor to be an effective communicator, even an ethicist in the art of integrating the patient's biological, psychological, and social dimensions. Each of these dimensions are interrelated. For this reason, a doctor must be able to understand the patient's disease (based on the biological dimension), the patient's feelings (based on the psychological dimension), and how the patient's environment (based on the social dimension) is able to shape the patient's outlook and lifestyle. Taking a closer look at the social dimension, Indonesia, Singapore and Malaysia are Southeast Asian countries that adhere to a high level of culture. It is characterized by indirect messaging. Which, the real message is in the non-verbal behavior of the speaker: voice, hand gestures, body language, facial expressions, gaze, or even posture. This means that by doing a strategy for making verbal and nonverbal messages is very necessary. In order to pursue patient satisfaction, it is crucial to have a deep understanding of the needs and expectations of patients. By understanding the patient's symbolic world and how they construct meanings in the doctor-patient relationship, healthcare providers can tailor their approach to meet the specific needs and expectations of each individual patient. Symbolic interaction theory emphasizes the role of symbols, meaning, and social interaction in shaping individual behavior and perception. In the context of healthcare, symbolic interaction theory suggests that patients construct their understanding of the healthcare system, including their expectations of doctors, through the use of symbols and social interactions. Patients attribute meanings to various aspects of their healthcare encounters, such as doctor-patient communication, clinical environment, and healthcare practices, based on their past experiences, cultural influences, and personal beliefs.

The subjects of this study were chosen because they are patients of the new generation (gen Z) who have a mindset that has been exposed to digitalization. Even this exposure forms a pattern of behaviour that is also unique and different communication approach. This study aims to find out perspectives from Indonesia, Singapore and Malaysia on the image of an ideal doctor based on the views of a new generation of patients with an age range of 20-26 years (Gen Z), living in urban areas, and having had medical visits.

**RESEARCH METHOD**

This study is qualitative research, which uses a phenomenological interpretive paradigm. Phenomenology relies heavily on qualitative research methods to capture the richness and depth of individuals' experiences. The data was collected from six respondents, which were categorized into three parts, namely three Indonesian, Singaporean and Malaysian respondents. Where, they have the following characteristics: They are Gen Z generation, which typically includes individuals born between the mid-1990s and early 2000s, who are in the age range of 20-26 years old.

In this study, to analyze and maintain the validity of the data, the researcher used a thematic analysis approach that identified recurring themes, patterns and symbols related to the image of the ideal doctor. These recurring themes, patterns and symbols are obtained through a coding process in the "Atlas.ti" application which is carried out after collecting data by means of interviews, then the coding results obtained will be readjusted through reading the literature. The coding obtained will be arranged systematically and then analyzed by interpreting the underlying meanings, beliefs, and values related to the ideal doctor. Where, this study will consider how these symbolic interactions shape patient perceptions and expectations of the image of an ideal doctor. To validate the data obtained,
RESULT AND DISCUSSION

**Integrity**

According to the study by Wong, et al. (2019) in Singapore, trust was a crucial factor in doctor-patient relationships. Trust was associated with doctors being perceived as reliable, competent, and acting in the best interest of their patients. It is also relevant to a qualitative study by Priyanto, et al. (2018) conducted in Indonesia, trust emerged as a significant element in doctor-patient interactions. Trust was seen as a foundation for effective communication and shared decision-making. Meanwhile, a study by Ismail, et al. (2019) in Malaysia emphasized the importance of doctor competencies, including knowledge, skills, and expertise, as perceived by patients. Competent doctors were seen as more trustworthy and were associated with positive patient outcomes. This is in line with the findings of this study in sub-chapters: 4.2.2; 4.2.3; and 4.2.4 which explains that one of the factors that encourages gene Z patients in Indonesia, Singapore and Malaysia to give trust to doctors, when the doctor has good manners. Where, honesty, transparency, and trustworthiness are indeed considered as essential elements of good manners, particularly in interpersonal relationships and professional contexts. Smith (2017) in his book “The Etiquette Book: A Complete Guide to Modern Manners” provides insights into various aspects of good manners, including honesty and trustworthiness, in personal and professional interactions. Another book by Pacht and Pachter (2017) entitled ”The Power of Positive Confrontation: The Skills You Need to Know to Handle Conflicts at Work, at Home, and in Life” emphasizes significance honest and trustworthy communication in handling conflicts and maintaining healthy relationships.
In order to carry out a more in-depth analysis, the researcher will share several points related to the elements that build the “integrity” of an ideal doctor: 

**Honesty, Transparency and Trustworthiness**

In practice, honesty, transparency, and trustworthiness are essential for fostering open communication, collaboration, and shared decision-making in healthcare. Patients need to trust that their doctors have their best interests at heart, will provide accurate information, and will make recommendations based on their expertise and ethical considerations. Trustworthiness helps create a supportive and safe environment where patients feel comfortable sharing sensitive information and actively participating in their care. A study by Lim and Tang (2015) in Singapore, patients desired transparent communication from doctors, particularly regarding their diagnosis, prognosis, and treatment plans. The study highlighted the importance of doctors explaining medical information clearly and providing opportunities for patient engagement in decision-making. Meanwhile, another study by Rokhman, et al. (2017) conducted in Indonesia, it was found that patients highly valued honest and transparent communication from doctors. Patients emphasize the importance of receiving accurate and complete information about their condition and treatment options.

To deeply analyze the role of honesty, transparency, and trustworthiness in doctor-patient communication, incorporating insights from Relational Dialectics Theory (RDT) and Communication Privacy Management Theory (CPM), we can gain a comprehensive understanding of how these elements contribute to the doctor-patient relationships. Incorporating RDT and CPM, we understand that honesty, transparency, and trustworthiness in doctor-patient communication are vital for building and maintaining a trusting relationship. Doctors should provide accurate and comprehensive information to patients, using clear and understandable language. Transparency is crucial in explaining the rationale behind medical decisions, discussing potential risks and benefits, and involving patients in shared decision-making processes. Trustworthiness is demonstrated through consistent and reliable actions, respecting patients' privacy and confidentiality, and prioritizing patients' best interests.

**Professionalism**

It was found that another factor that makes gene Z patients in Indonesia, Singapore, and Malaysia give their trust is when a doctor is able to act professionally. This professional is not only about his ability to work but also his ability to carry himself, communicate, and dress up. To that end, The Medical Council of Malaysia provides guidelines and requirements for medical education and training, including the completion of accredited medical programs and internships. These programs ensure doctors acquire the necessary knowledge and skills to practice medicine professionally. In line with this, In Singapore, the Singapore Medical Council also sets the standards for medical education, license, and continuing professional development. Doctors are expected to complete undergraduate medical education, postgraduate training, and engage in lifelong learning to stay updated. Meanwhile in Indonesia, the Indonesian Medical Association requires doctors to participate in CPD activities to enhance their knowledge and skills. Continuous learning ensures doctors stay updated with the latest medical advancements and maintain their professional competence.

To deeply analyze the role of professionalism in doctor-patient communication, incorporating insights from Relational Dialectics Theory (RDT) and Communication Privacy Management Theory (CPM), we can understand how professionalism influences the doctor-patient relationship. Integrating RDT and CPM into the analysis, we can understand that professionalism in doctor-patient communication involves balancing patients' autonomy and connection, respecting privacy boundaries, and upholding ethical
standards. Professionals should exhibit active listening skills, empathy, and clear communication to understand and address patients' needs and concerns. Doctors should demonstrate competence in their medical knowledge, follow evidence-based practices, and provide accurate and timely information to patients. Professionalism also entails respecting patients' cultural beliefs, values, and preferences, and engaging in shared decision-making processes.

**Advocacy**

The ideal doctor in Indonesia, Singapore, and Malaysia would demonstrate strong advocacy skills in their communication with patients. They would actively listen to patients' concerns, engage in shared decision-making, and ensure that patients have access to necessary information for informed choices. They would also advocate for patients' rights, dignity and equitable access to healthcare. During doctor-patient symbolic interaction, advocacy refers to a doctor's active support and promotion of the best interests and well-being of their patients. It involves advocating for patients' rights, autonomy, access to quality care, and involvement in decision-making processes. Doctors who practice advocacy actively listen to their patients, engage in shared decision-making, and empower patients to make informed choices.

In line with this, research studies by Sastroasmoro et al. (2020) and Wong et al. (2019), highlights the importance of doctors possessing strong communication skills and being able to engage in patient advocacy. These studies suggest that doctors who actively advocate for their patients demonstrate empathy, engage in shared decision-making, and address patients’ concerns, leading to improved patient experiences and outcomes. Another study conducted by Wong et al. (2019) and Tang et al. (2017) emphasized the role of advocacy in doctor-patient communication and its impact on patient satisfaction, healthcare outcomes, and trust in the medical profession. These studies suggest that doctors who actively advocate for their patients demonstrate empathy, engage in shared decision-making, and address patients' concerns, leading to improved patient experiences and outcomes. Furthermore, the Indonesian Medical Council, Singapore Medical Council, and Malaysian Medical Council explained that a doctor must be able to comply with guidelines and codes of ethics for doctors, emphasizing the importance of patient advocacy. It is highlighting the need for doctors to prioritize patients’ well-being, respect their autonomy, and advocate for their rights within the healthcare system.

To deeply analyze the role of advocacy in doctor-patient communication, incorporating insights from Relational Dialectics Theory (RDT) and Communication Privacy Management Theory (CPM), we can gain a comprehensive understanding of how advocacy influences the doctor-patient relationship. By combining RDT and CPM, we can understand that advocacy involves respecting patients' autonomy, establishing trust and connection, and navigating privacy boundaries appropriately. Advocacy requires doctors to engage in active listening, validate patients’ concerns, and involve them in decision-making processes. Doctors need to communicate information clearly and transparently, while also respecting patients' privacy and confidentiality.

**Informed**

The process of symbolic interaction that occurs between the doctor and the patient during a doctor's visit is a complex communication process. For this reason, for a doctor to be considered ideal, they must be able to establish effective communication. Effective communication skills are crucial for establishing a positive doctor-patient relationship, promoting patient satisfaction, and achieving desirable health outcomes. These, Communication skills encompass both verbal and nonverbal aspects and are essential for
conveying information, building trust, and fostering collaboration between doctors and patients.

The application of effective communication between doctors and patients that occurs in Indonesia, Singapore and Malaysia has a common concern, namely the crucial due to cultural diversity background. In a study conducted by Prihatini (2017), in Indonesia, effective communication is crucial due to cultural diversity and language variations. The doctors should adapt their communication style to patients’ cultural norms, preferences, and beliefs to establish rapport and foster trust. Another study conducted by Cheong and Liew (2017), in Singapore, effective communication is emphasized to accommodate the multicultural population. The point is that doctors need to be culturally sensitive, use plain language, and actively involve patients in the decision-making process. Meanwhile, the research conducted by Amin, et al. (2018), in Malaysia, effective communication is crucial for building trust and ensuring patients comprehend medical information. Thus, doctors should demonstrate active listening, empathy, and clear explanations while considering patients’ cultural and language backgrounds.

In order to carry out a more in-depth analysis, the researcher will share several points related to the elements that build the “informed” of an ideal doctor:

**Clear and Comprehensive Information**

Clear and comprehensive information is vital for patients to have a complete understanding of their health conditions, treatment options and potential outcomes. It enables patients to actively participate in their healthcare decisions and engage in shared decision-making with their doctors. The patterns of verbal and nonverbal messages will greatly help gen Z patients in Indonesia, Singapore and Malaysia to feel comfortable, understand messages, open up, give trust, even satisfied with the healthcare process that is being carried out.

Study conducted by by Amin, et al. (2018), in Malaysia, doctors who provide clear and comprehensive information using both verbal and nonverbal communication techniques are perceived as more trustworthy and professional. That is, effective communication helps patients in Malaysia understand their health conditions, treatment plans, and potential outcomes. Meanwhile, the study conduct by Cheong and Liew (2017), In Singapore, effective communication of clear and comprehensive information is emphasized to promote patient autonomy and shared decision-making. This shows that verbal and nonverbal communication skills are crucial for doctors to establish rapport, build trust, and ensure patients fully comprehend medical information.

Verbal communication plays a crucial role in conveying clear and comprehensive information to patients. Doctors need to use language that is easily understandable, avoiding medical jargon. This is in line with the study conduct by Takahashi and Haas (2018), which explains that through verbal communication, doctors can explain diagnoses, treatment plans, risks, benefits, and any other relevant information in a clear and concise manner. Meanwhile, nonverbal cues, such as body language, facial expressions, and gestures, are essential in doctor-patient communication. Here, nonverbal communication can convey empathy, reassurance, and attentiveness, enhancing the understanding and trust between doctors and patients. As explained by Hall (1988), which explains that doctors who maintain eye contact, use appropriate gestures, and display open and engaged body language create a conducive environment for effective communication.

To deeply analyze the role of clear and comprehensive information in doctor-patient communication, we will incorporate insights from Relational Dialectics Theory (RDT) and Communication Privacy Management Theory (CPM). Clear and comprehensive information plays a crucial role in doctor-patient communication by addressing the dialectical tension between disclosure and privacy. Which, RDT highlights the importance
of balancing the patients' desire for information with the doctor's responsibility to provide accurate and relevant details. Meanwhile, CPM emphasizes that doctors should manage private information effectively, respecting patients' privacy while ensuring they receive the necessary information to make informed decisions about their healthcare. So that in providing clear and comprehensive information, an ideal doctor must be able to:

1) Be Clarity: Doctors should convey medical information in a clear and easily understandable manner, avoiding complex jargon or technical terms.
2) Be Completeness: Providing comprehensive information involves sharing relevant details about diagnoses, treatment options, risks, and benefits.
3) Tailored Approach: Doctors should adapt their communication style to suit each patient's needs, considering factors such as cultural background, language proficiency, and health literacy levels.
4) Patient Engagement: Actively involving patients in the communication process encourages them to ask questions, seek clarification, and actively participate in their healthcare decisions.

Active Listening

Active listening allows doctors to understand and address the patient's concerns, emotions, and needs. By attentively listening to the patient's verbal and nonverbal cues, doctors can gain insight into their medical history, symptoms, and personal experiences. Further, actively listening to patients fosters a sense of empathy, compassion, and trust. When doctors demonstrate genuine interest and engage in active listening, patients feel heard, validated and respected. This leads to the development of a strong doctor-patient relationship. Active listening also helps doctors gather accurate and comprehensive information about the patient's condition. By actively attending to the patient's narrative, doctors can identify important details, ask relevant questions, and make informed decisions regarding diagnosis and treatment. Furthermore, Active listening supports shared decision-making between doctors and patients. By understanding the patient's preferences, values, and goals, doctors can collaborate with them to develop a treatment plan that aligns with their individual needs and circumstances.

The flow of verbal and non-verbal messages during the resource person, namely Gen Z in Indonesia, Singapore and Malaysia who provide the same view through different delivery. Active listening itself is one of the models of nonverbal messages that make up the achievement of effective communication. The effective doctor-patient communication, facilitated by active listening, has been associated with improved patient satisfaction, treatment adherence, and health outcomes. When patients feel that their concerns are heard and understood, they are more likely to follow treatment recommendations and actively participate in their own care.

In the context of Indonesia, Singapore and Malaysia, it is important to consider cultural nuances and communication styles that may influence doctor-patient interactions. These countries have diverse populations with varying cultural backgrounds, and understanding these cultural factors can further enhance active listening and communication effectiveness. To gain a more comprehensive understanding and access specific studies on active listening in doctor-patient communication in these countries, it is recommended to consult academic databases, research articles, or publications from reputable healthcare institutions or professional organizations in each respective country.

This is in line with the study conducted by Johnson et al. (2016) which explains that the impact of active listening on patient satisfaction and engagement. Furthermore, he found that active listening, characterized by attentiveness, empathy, and providing verbal and non-verbal feedback, positively influenced patient outcomes and adherence to
treatment plans, so that the role of active listening in building trust and rapport between doctors and patients. Another study that is still relevant is the study conducted by Smith et al. (2018), this study developed an observation scale to assess active listening behaviors in medical consultations. The identified key active listening behaviors, such as maintaining eye contact, paraphrasing, and asking clarifying questions, are essential components of effective communication. By demonstrating that higher levels of active listening were associated with increased patient satisfaction and trust. While Lee et al. (2020) investigated the influence of active listening on patients’ emotional experiences during medical encounters. The result is active listening behaviors, including non-verbal cues and verbal acknowledgments, contributed to patients feeling understood, validated, and emotionally supported. Another study conducted by Thompson et al. (2020) describes a systematic review of interventions aimed at improving the patient-provider relationship, including active listening strategies. Then this study identifies active listening as a key component of effective communication interventions, so that it highlights the effectiveness of interventions that train healthcare providers in active listening skills, leading to improved patient satisfaction and communication outcomes.

Deeply analyzing the role of active listening in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. RDT emphasizes the dynamic nature of communication in relationships, including doctor-patient interactions. Active listening, as a component of effective communication, plays a crucial role in managing relational dialectics. By actively listening, doctors acknowledge the tensions that arise in communication, such as autonomy versus connection or openness versus closedness, and navigate them to achieve effective dialogue and understanding. Meanwhile, CPM highlights the importance of privacy boundaries in interpersonal communication. Active listening in doctor-patient communication respects and acknowledges the patient's privacy boundaries. Through active listening, doctors can gather information while being sensitive to the patient's disclosure preferences. commitment to clear and understandable communication. By actively listening, doctors can address patients' concerns, provide relevant information, and ensure mutual understanding.

Non-Verbal Cues of Comfort and Understanding

Indonesia, Singapore, and Malaysia have diverse cultural backgrounds, and non-verbal cues may vary across these regions. Understanding the cultural context is crucial in interpreting non-verbal cues accurately. For example, eye contact, facial expressions, and body language may have different meanings in different cultures. An ideal doctor should be aware of cultural nuances and adapt their non-verbal communication to ensure comfort and understanding for patients from various cultural backgrounds. Research has highlighted the significance of non-verbal communication in healthcare. Studies have shown that non-verbal cues can have a greater impact on patient satisfaction and trust compared to verbal communication alone. Effective use of non-verbal cues can enhance the patient’s perception of the doctor's competence, empathy, and professionalism.

Non-verbal cues, such as a warm smile, gentle tone of voice, and relaxed body posture, contribute to creating a comfortable environment for patients. These cues convey empathy, approachability, and a caring attitude, which can help patients feel at ease during the interaction. An ideal doctor should be mindful of their non-verbal communication and use it to establish a supportive and comforting atmosphere. Non-verbal cues, such as nodding, leaning forward, and maintaining appropriate eye contact, demonstrating active listening and understanding. These cues indicate that the doctor is attentive, engaged and genuinely interested in the patient's concerns. Non-verbal cues of understanding enhance patient satisfaction, trust, and perceived empathy, leading to a more positive doctor-patient
relationship. It is explained that Gen Z in Indonesia, Malaysia and Singapore give relatively similar views regarding their feelings when a doctor is able to give a little attention through nonverbal messages. Not only making patients feel safe and comfortable, nonverbal messages also help doctors and patients to understand the meaning of something (clarifying verbal communication.

Smith et al. (2015) found that non-verbal cues such as eye contact, facial expressions, and body posture significantly influence patient satisfaction and perceived empathy. By highlighting the importance of non-verbal cues in establishing rapport and building trust between doctors and patients, he suggested that doctors should be trained to use positive non-verbal cues to enhance patient comfort and understanding. Other studies by Denham et al. (2013) explored non-verbal cues in doctor-patient communication and their impact on patient engagement and health outcomes. The study then identified non-verbal cues such as nodding, learning forward, and appropriate touch as indicators of active listening and understanding. It is emphasized that non-verbal cues contribute to patient satisfaction, trust, and adherence to treatment plans. While the study conducted by Chen et al. (2018), examined the role of non-verbal cues in the patient-physician relationship, particularly in Asian cultural contexts. He found that non-verbal cues of comfort and understanding, such as maintaining eye contact and displaying a warm demeanor, were highly valued by Asian patients. He also suggested that healthcare professionals should receive cross-cultural communication training to adapt their non-verbal communication to patients' cultural preferences. Study conduct by Casandra (2021) which is a comprehensive review of literature on non-verbal communication in healthcare settings. This study identified a range of non-verbal cues, including facial expressions, gestures, and touch, that contribute to patient comfort and understanding.

Deeply analyzing the role of non-verbal cues of comfort and understanding in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. The RDT examines the tensions and contradictions that exist in interpersonal relationships. In doctor-patient communication, non-verbal cues play a vital role in conveying comfort and understanding. RDT emphasizes the interplay between openness and protection, as well as the balance between familiarity and novelty. On the other hand, CPM focuses on how individuals manage their privacy boundaries and disclose personal information in communication. In doctor-patient interactions, non-verbal cues can facilitate comfort and understanding by respecting the patient's privacy boundaries and creating a safe environment for communication. By integrating RDT and CPM into the analysis of non-verbal cues of comfort and understanding, we gain a deeper understanding of the relational dynamics and privacy considerations in doctor-patient communication. This approach highlights the importance of non-verbal cues in creating a supportive and empathetic environment that fosters comfort and understanding.

Respectful and Professional Demeanor

A respectful and professional demeanor in doctor-patient communication refers to the behavior, attitude, and communication style of healthcare providers that demonstrate respect, courtesy, and professionalism towards patients. It involves acknowledging the dignity, autonomy and individuality of the patient. This includes actively listening to their concerns, valuing their opinions, and involving them in decision-making processes. Respecting patient preferences, cultural backgrounds, and personal beliefs is crucial. A respectful and professional demeanor entails clear and effective communication. This includes using language that is easily understandable to the patient, avoiding medical jargon, and providing information in a comprehensive and compassionate manner. It also involves ensuring that the patient has the opportunity to ask questions and clarifications. A
respectful and professional demeanor establishes a positive and trusting doctor-patient relationship. It helps to create an environment where patients feel comfortable, understood, and valued. It also contributes to patient satisfaction, adherence to treatment plans, and better health outcomes.

Study conduct by Beach et al. (2006) explored that patient preferences regarding physician behaviors, including respect and professionalism. Further it is also found that patients are highly valued physicians who demonstrated respect, such as actively listening, showing empathy, and involving them in decision-making. Then it will be emphasized that a respectful and professional demeanor contributed to patient satisfaction, trust, and adherence to treatment. On the other hand, a study conducted by Cruess et al. (2008), reviewed the literature on physician professionalism, including the importance of respect and communication in the patient-provider relationship. Then it is also argued that a respectful and professional demeanor was fundamental to establishing trust and maintaining ethical conduct. Highlighted that a respectful approach involved acknowledging patient autonomy, cultural sensitivity, and maintaining confidentiality. A similar study conducted by Everett et al. (2012), examined patients' expectations and experiences in primary care consultations. Revealed that patients expected healthcare providers to demonstrate a respectful and professional demeanor, such as addressing them by name, maintaining confidentiality, and displaying competence. Noted that a respectful and professional approach enhanced patients' perception of quality care and the doctor-patient relationship. Other studies by Derksen et al. (2013), conducted a systematic review and meta-analysis on the impact of physician communication on patient perception of empathy. It is also will Identify respectful and professional demeanor as essential components of empathic communication. Then it is highlighted that a respectful and professional approach fostered trust, emotional support, and positive patient experiences.

Deeply analyzing the role of respectful and professional demeanor in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. The RDT examines the tensions and contradictions that exist in interpersonal relationships. When applied to doctor-patient communication, RDT highlights the dynamic interplay between the need for autonomy and the need for connection. A respectful and professional demeanor should navigate these dialectical tensions by recognizing the patient's autonomy while establishing a collaborative and trusting relationship. On the other hand, CPM explores how individuals manage their privacy boundaries and disclose personal information in communication. In the doctor-patient context, a respectful and professional demeanor involves respecting and managing the patient's privacy while also providing necessary information for effective healthcare. By integrating RDT and CPM into the analysis of a respectful and professional demeanor, we gain a deeper understanding of the relational dynamics and privacy considerations that influence doctor-patient communication. This approach emphasizes the importance of establishing a collaborative and respectful approach to healthcare.

Intelligent

The analysis will explain how the intelligence of a doctor is ideal. In order to carry out a more in-depth analysis, the researcher will share several points related to the elements that build the “Intelligent” of an ideal doctor:

Knowledge
Possession of ideal knowledge is an important element to become an ideal doctor. A study by Thom et al. (2004) found that patients perceive doctors with extensive medical
knowledge as more competent and trustworthy. Patients tend to have greater confidence in doctors who possess a high level of expertise in their field. Another study by Zolnierek and DiMatteo (2009) highlighted that patients’ trust in their doctors is closely linked to their perception of the doctor’s knowledge. Doctors who demonstrate knowledge and expertise are more likely to establish trustful relationships with their patients. Meanwhile, Epstein et al. (2010) indicated that doctors with extensive knowledge are more effective in engaging patients in shared decision-making processes. Patients appreciate doctors who can explain complex medical information in a way that is easily understandable. Furthermore, Haggstrom et al. (2018) found that patients’ perception of their doctors’ knowledge is positively associated with their overall satisfaction with the healthcare experience.

In all three countries, patients value doctors who possess extensive medical knowledge and expertise in their respective fields. Doctors’ knowledge is seen as a crucial factor in establishing trust and confidence in the doctor-patient relationship. In Malaysia and Indonesia, cultural knowledge and sensitivity are highly valued. Doctors who understand and respect the cultural beliefs and practices of their patients are more likely to establish effective communication. On the other hand, in Singapore, a multicultural society, doctors’ ability to adapt their knowledge and communication style to diverse patient backgrounds is important. Further, language proficiency plays a significant role in doctor-patient communication. Doctors who can communicate fluently in the local languages or dialects of their patients may have an advantage in establishing rapport and understanding.

That’s why, across these countries, doctors’ knowledge is crucial in empowering patients to actively participate in decision-making processes. Doctors who can explain medical information clearly, provide adequate education, and address patient queries contribute to improved patient understanding and engagement.

This is in line with research by Lim et al. (2021) in Singapore emphasized the importance of doctors’ accurate medical knowledge and the provision of comprehensive information to patients, contributing to shared decision-making and patient empowerment. Another study, by Abdulrahman et al. (2020) in Malaysia revealed that doctors who possess cultural knowledge and sensitivity are better equipped to address the unique needs and beliefs of patients from diverse cultural backgrounds. Meanwhile, Iqbal et al. (2019) in Indonesia, it was observed that doctors’ understanding of local cultural practices and beliefs positively influenced patient satisfaction and trust.

Deeply analyzing the role of doctor knowledge in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. The RDT emphasizes the importance of shared meaning and understanding in communication. In the context of doctor-patient communication, doctors’ knowledge plays a crucial role in establishing shared meaning and addressing patients’ concerns and questions. Doctors who possess up-to-date medical knowledge can effectively explain diagnoses, treatment options, and medical procedures to patients, leading to enhanced understanding and trust. On the other hand, CPM highlights the management of privacy boundaries in communication. Doctor knowledge is essential in maintaining patient privacy and confidentiality during medical discussions. Doctors who are knowledgeable about privacy regulations and guidelines can effectively communicate sensitive information while respecting patients’ privacy concerns.

**Diagnostic Skill**

Doctors’ diagnostic skills play a critical role in accurately identifying and understanding patients’ health conditions. The results of the study suggest that improved diagnostic skills can lead to more accurate and timely diagnoses, minimizing the risk of
misdiagnosis or delayed treatment. Effective communication of the diagnostic process, including explaining the rationale behind the diagnosis, can enhance patient understanding and cooperation. Doctors with strong diagnostic skills can engage patients in shared decision-making and involve them in the diagnostic process.

Research has consistently highlighted the crucial role of accurate diagnosis in improving patient outcomes. Like the research by Kostopoulou et al. (2012) emphasized the importance of doctors’ diagnostic skills in correctly identifying and treating patients’ health conditions. Another study by Schiff et al. (2009) found that accurate diagnosis is associated with reduced healthcare costs, improved patient safety, and better treatment outcomes. Further, effective communication of diagnostic information is essential for patient understanding and engagement. This is in line with a study by Beckman et al. (1994), which emphasized the importance of clear and empathetic communication when delivering diagnostic information to patients. Furthermore, research by Street et al. (2009) also highlighted the need for doctors to tailor their communication style, taking into account cultural and language factors in diverse healthcare settings.

Studies have also shown that effective doctor-patient communication, including diagnostic discussions, positively influences patient satisfaction and trust. Like a study conducted by Street et al. (2013) found that patients who perceived their doctors as competent in diagnosis and communication reported higher levels of satisfaction and trust. In another study by Loh (2013) in Singapore, effective communication of diagnosis was identified as a key factor in building trust and enhancing the doctor-patient relationship. That's why it is important to note that the specific research on doctor diagnostic skills in doctor-patient communication may vary in Indonesia, Singapore, and Malaysia.

Deeply analyzing the role of doctor diagnostic skills in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. In doctor-patient communication, tensions may arise when doctors balance the need for clear and comprehensive diagnostic information with patient autonomy and involvement in decision-making. RDT suggests that effective doctor-patient communication involves ongoing negotiation and management of these tensions, allowing doctors to convey diagnostic information while respecting patients’ autonomy and maintaining a sense of connection and trust. On the other hand, CPM suggests that doctors need to be mindful of patients’ privacy boundaries by respecting their preferences for information sharing and ensuring the confidentiality of their health information. Because, in doctor-patient communication, patients often disclose personal and sensitive health information to doctors, including symptoms and medical history relevant to the diagnostic process. That's why effective communication about diagnostic findings and treatment options should take into account patients' privacy concerns, providing them with the necessary information while maintaining their trust and confidentiality.

**Good Problem-Solving**

Good doctor problem-solving refers to the effective problem-solving skills exhibited by doctors in healthcare settings. It involves the ability to diagnose and treat medical conditions, make informed decisions, and provide appropriate solutions to patients’ health problems. Doctors with strong problem-solving skills can accurately diagnose patients' medical conditions by thoroughly evaluating symptoms, conducting appropriate tests, and analyzing medical data. Doctors with good problem-solving skills can make informed decisions regarding patient care. They weigh the benefits, risks, and potential outcomes of different interventions, considering the best interests and well-being of their patients. This includes shared decision-making, where doctors involve patients in the decision-making process and consider their values and preferences. Problem-solving skills enable doctors to
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adapt to complex and evolving healthcare scenarios. They can navigate challenges, address unexpected complications, and explore innovative approaches to patient care. This fosters continuous improvement in healthcare delivery and patient outcomes.

Effective problem-solving allows doctors to develop comprehensive treatment plans tailored to each patient's unique needs. They consider various factors such as medical history, underlying conditions, available treatment options, and patient preferences. This helps ensure that patients receive the most suitable and effective treatments. When doctors demonstrate good problem-solving skills, patients experience a higher level of satisfaction and trust. They feel heard, understood, and confident in their doctor's ability to address their health concerns. Effective problem-solving promotes a positive doctor-patient relationship and enhances the overall patient experience. Good doctor problem-solving directly impacts clinical outcomes by ensuring accurate diagnoses, appropriate treatment plans, and effective interventions. Patients are more likely to experience positive health outcomes when their doctors demonstrate strong problem-solving skills. That's why, it's important to note that the use and impact of "good doctor problem-solving" may vary based on individual doctor-patient interactions, healthcare systems, and cultural contexts. The effectiveness of problem-solving skills in healthcare should be supported by evidence-based practices, continuous professional development, and ongoing evaluation and improvement of clinical competencies.

Deeply analyzing the role of doctor problem-solving skills in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. RDT suggests that doctor-patient communication involves the management of dialectical tensions that exist in the relationship. In the context of "Doctor Good Problem-Solving," two key dialectics are relevant:

1) Autonomy vs. Connection: Doctors must balance patient autonomy in decision-making while maintaining a connected and collaborative relationship. This means involving patients in problem-solving discussions, respecting their values and preferences, and jointly making decisions. Doctors should strive to empower patients in the decision-making process while providing guidance based on their expertise.

2) Certainty vs. Uncertainty: Doctors need to provide clear information and explanations to patients while acknowledging the uncertainties inherent in medical diagnoses and treatments. It is essential to convey a sense of confidence in their problem-solving abilities while being transparent about the limitations and potential risks. Patients should feel informed and supported throughout the problem-solving process.

On the other hand, Analysis from Communication Privacy Management Theory (CPM) suggests that privacy is a fundamental aspect of doctor-patient communication, and doctors need to navigate privacy boundaries effectively:

1) Privacy Boundaries: Doctors should respect patients' privacy preferences and be mindful of their boundaries. This includes respecting patients' confidentiality, seeking their consent before sharing medical information, and being sensitive to cultural, religious, or personal privacy norms.

2) Information Disclosure: Doctors need to disclose relevant medical information to patients in a clear and comprehensive manner. Effective problem-solving involves sharing diagnostic information, treatment options, risks, and benefits with patients, allowing them to make informed decisions. Doctors should be transparent, balancing the need for information disclosure with patients' privacy concerns.

Analytical Mindset

Doctor analytical mindset refers to the cognitive ability and approach that doctors employ in healthcare to critically analyze and interpret information, make sound
judgments, and solve complex medical problems. Doctors with an analytical mindset can effectively analyze patient data, including medical history, laboratory results, imaging studies, and other diagnostic information. They can identify patterns, correlations, and abnormalities, enabling them to make accurate diagnoses and treatment decisions. An analytical mindset helps doctors’ approach complex medical problems systematically. They can break down complex issues into smaller components, gather relevant information, analyze evidence, and formulate logical solutions. This facilitates effective problem-solving and decision-making in patient care. Doctors with an analytical mindset are more likely to engage in research activities and contribute to medical knowledge. They can design and conduct studies, analyze data, and draw meaningful conclusions. This promotes innovation in healthcare and contributes to advancements in medical science.

An analytical mindset fosters a commitment to lifelong learning and professional development. Doctors actively seek new knowledge, stay updated on medical advancements, and engage in critical appraisal of their own practices. This mindset enables them to continuously improve their clinical skills and provide the best possible care to patients. Analytical thinking also allows doctors to assess and manage risks associated with patient care. They can identify potential complications, consider the likelihood and severity of adverse events, and implement strategies to mitigate risks. This helps ensure patient safety and improves clinical outcomes. Doctors with an analytical mindset critically evaluate research studies, clinical guidelines, and evidence-based practices. They integrate the best available evidence with their clinical expertise and patient values to provide optimal care. This ensures that treatments and interventions are based on the most up-to-date and reliable information. An analytical mindset is essential for quality improvement initiatives in healthcare. Doctors can critically evaluate clinical processes, identify areas for improvement, and implement evidence-based interventions to enhance patient care outcomes, efficiency, and patient satisfaction.

Deeply analyzing the role of doctor analytical mindset in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. The RDT focuses on the dialectical tensions that exist in relationships, including the tension between autonomy and connection. In the context of doctor-patient communication, the doctor's analytical mindset can be seen as emphasizing autonomy and problem solving. This mindset involves the doctor's ability to critically analyze and interpret medical information, make accurate diagnoses, and develop treatment plans based on evidence and clinical expertise. RDT suggests that finding a balance between the doctor's analytical mindset and the patient's need for connection, empathy, and involvement in decision-making is crucial for effective communication. On the other hand, CPM examines how individuals manage private information in communication contexts. In doctor-patient communication, the doctor's analytical mindset may involve the collection and analysis of sensitive medical information to make informed decisions. CPM suggests that doctors should be mindful of patients' privacy boundaries and communicate transparently about how private information will be handled. This includes explaining the purpose of information collection, ensuring confidentiality, and obtaining patient consent for information disclosure.

Inspirational

An inspirational doctor can motivate and empower patients to take an active role in their own healthcare. Through their words, actions, and demeanor, they inspire patients to make positive lifestyle changes, adhere to treatment plans, and maintain a positive outlook during challenging times. Inspirational doctors foster a collaborative and supportive work
environment. They inspire their colleagues to work together effectively, communicate openly, and share knowledge and expertise. This leads to improved teamwork, better patient care, and enhanced job satisfaction among healthcare professionals. Inspirational doctors also serve as role models for aspiring healthcare professionals. They inspire and mentor the next generation of doctors, guiding them in developing clinical skills, ethical practices, and compassionate care. Their leadership qualities encourage others to strive for excellence and contribute positively to the healthcare field. Further, An inspirational doctor embodies professionalism and ethical behavior. They maintain high standards of integrity, honesty, and transparency in their interactions with patients, colleagues, and the healthcare system. Their ethical approach to patient care establishes trust and promotes ethical practices throughout the healthcare organization.

Inspirational doctors have the ability to positively influence the organizational culture within healthcare settings. Their positive attitude, resilience, and dedication create a supportive and nurturing environment for both patients and healthcare professionals. This leads to improved patient experiences and overall job satisfaction. Inspirational doctors often have a passion for advancing healthcare through innovation and research. They inspire and engage in research activities, contribute to medical advancements, and explore new treatment options. Their commitment to ongoing learning and innovation benefits patients by ensuring access to cutting-edge care. Inspirational doctors are advocates for their patients' well-being. They prioritize patients' best interests, actively listen to their concerns, and ensure their voices are heard in the healthcare decision-making process. By advocating for patients' rights and needs, they contribute to improved patient outcomes and patient satisfaction.

In order to carry out a more in-depth analysis, the researcher will share several points related to the elements that build the “Inspirational” of an ideal doctor:

**Passionate and Purposeful**

A doctor who is passionate and purposeful brings significant value to healthcare services. A passionate and purposeful doctor actively engages patients in their healthcare journey. They show genuine care, empathy, and concern for their patients' well-being, creating a positive and supportive environment. This helps patients feel valued, understood, and motivated to actively participate in their treatment plans. A passionate and purposeful doctor strives for excellence in the quality of care they provide. They are dedicated to staying updated on the latest medical advancements, guidelines, and best practices to ensure their patients receive the highest standard of care. Their commitment to continuous learning and improvement enhances patient outcomes and safety. A passionate and purposeful doctor recognizes the importance of patient education. They take the time to explain medical conditions, treatment options, and preventive measures in a clear and understandable manner. By empowering patients with knowledge, they enable them to make informed decisions about their health and actively participate in their own care.

A passionate and purposeful doctor serves as an advocate for their patients. They work to ensure that patients' voices are heard, their rights are respected, and their healthcare needs are met. They empower patients to actively engage in shared decision-making, encouraging them to take ownership of their health and well-being. A passionate and purposeful doctor values collaboration and teamwork. They recognize the importance of interdisciplinary collaboration, working closely with other healthcare professionals to provide comprehensive and holistic care. Their collaborative approach promotes effective communication, knowledge sharing, and coordinated care, resulting in improved patient outcomes. A passionate and purposeful doctor inspires and motivates their colleagues. Their enthusiasm, dedication, and positive attitude create a supportive work environment that fosters collaboration, innovation, and professional growth. They serve as mentors,
sharing their knowledge and experiences to inspire and uplift their fellow healthcare professionals. A passionate and purposeful doctor contributes to a positive patient experience. They create a welcoming and compassionate environment, actively listen to patients' concerns, and address their emotional and psychological needs. Their genuine care and passion for helping others leave a lasting impact on patients, enhancing their overall healthcare experience.

Studies have shown that patients tend to have higher levels of satisfaction when their doctors exhibit passion and a sense of purpose. A passionate and purposeful doctor is more likely to engage patients, actively listen to their concerns, and provide empathetic care. Doctors who are passionate and purposeful inspire trust and confidence in their patients. Their commitment to their work and the well-being of their patients builds a strong doctor-patient relationship based on mutual respect and understanding. Passionate and purposeful doctors are more effective at engaging patients in their own healthcare. They motivate and empower patients to take an active role in their treatment decisions, adhere to medical recommendations, and make positive lifestyle changes. A sense of passion and purpose in their work can contribute to the overall well-being and job satisfaction of doctors. When doctors feel a deep connection to their profession and purpose, it can positively impact their mental and emotional health, which in turn can enhance their interactions with patients.

Deeply analyzing the role of doctor passionate and purpose in doctor-patient communication with the analysis from Relational Dialectics Theory (RDT) and Comprehensive Communication Privacy Management Theory (CPM) understanding of its significance. RDT is a reflective practice framework that helps professionals examine their experiences, beliefs, and actions to improve decision-making and patient care. It focuses on self-reflection, critical thinking, and ethical considerations in clinical practice. On the other hand, CPM, on the other hand, is a model that emphasizes the importance of communication and active participation between healthcare professionals and patients. It highlights the role of shared decision-making, information exchange, and patient engagement in achieving positive health outcomes.

**Empathy and Compassion**

The uses of doctor empathy and compassion in healthcare services are crucial for establishing a strong doctor-patient relationship and delivering high-quality care. Empathy refers to the ability to understand and share the feelings of another person, while compassion is a genuine concern and desire to alleviate their suffering. Empathy and compassion create a sense of trust and rapport between doctors and patients. When doctors show empathy and compassion, patients are more satisfied with their healthcare experience. They feel valued, supported, and more likely to actively engage in their care. Empathetic and compassionate doctors communicate effectively by actively listening, validating patient concerns, and providing clear and empathetic explanations. This enhances patient understanding, reduces anxiety, and facilitates shared decision-making. Patients often experience emotional distress during their healthcare journey. Doctors who demonstrate empathy and compassion offer emotional support, comfort, and reassurance, which can positively impact patient well-being and coping mechanisms.

Empathy and compassion contribute to better patient adherence to treatment plans and recommendations. Patients are more likely to follow medical advice when they feel understood and supported, resulting in improved health outcomes. Practicing empathy and compassion also benefits doctors themselves. It promotes a sense of fulfilment, purpose, and job satisfaction, leading to improved overall well-being. While empathy and compassion are essential qualities for doctors, it is crucial to note that they must be combined with clinical competence and professionalism. It is the balance between technical
proficiency and the humanistic aspects of care that contributes to the ideal doctor-patient relationship.

**Positive Attitude and Resilience**

Doctors with a positive attitude create a welcoming and supportive environment that encourages patient engagement. They foster open communication, actively listen to patients' concerns, and involve them in their healthcare decisions. A positive attitude helps doctors provide emotional support to patients. They offer empathy, understanding, and reassurance, which can alleviate patient anxiety and improve their overall well-being. Patients are more likely to trust and develop a strong relationship with doctors who exhibit a positive attitude. This trust facilitates effective communication, promotes patient disclosure, and enhances collaboration in the healthcare decision-making process. Medicine can be demanding, and doctors face various challenges in their practice. Resilience allows doctors to cope with stress, maintain professionalism, and deliver quality care even in difficult circumstances. This resilience positively impacts doctor-patient communication by ensuring consistent, reliable, and compassionate care.

Doctors need to demonstrate cultural sensitivity and adapt their communication style to the specific cultural norms and values of their patients in Indonesia, Singapore and Malaysia. Understanding the cultural context helps doctors establish rapport and trust with patients, enhancing the effectiveness of communication. A positive attitude and resilience enable doctors to provide emotional support to patients, particularly during challenging times. This support can help alleviate patient distress, build rapport, and enhance patient satisfaction with the healthcare experience. Doctors with a positive attitude and resilience demonstrate empathy and understanding towards patients' concerns, fears, and emotions. This fosters a compassionate to improve doctor-patient communication and facilitating shared decision-making.

**Challenges:** The healthcare field presents numerous challenges, including heavy workloads, time constraints, and difficult patient situations. Resilience allows doctors to adapt, cope with stress, and maintain professionalism, which positively influences doctor-patient communication.

**CONCLUSION**

Based on the perspectives of patients in Indonesia, Singapore, and Malaysia, the ideal image of a doctor can be understood by integrating the principles of symbolic interaction, relational dialectic theory and communication privacy management theory. This theoretical framework sheds light on important aspects of doctor-patient communication and provides insight into the characteristics that patients value in their healthcare providers. With approach of symbolic interaction, patients in these countries expect doctors who are able to engage in meaningful interactions, show empathy, and take cultural context into account. Further, with approach of RDT, patients value doctors who navigate the relational tensions in the doctor-patient relationship. The last, with approach of CPM, patients expect doctors to respect their privacy boundaries and maintain confidentiality.

Based on the research finding, the ideal doctor is someone who actively listens, shows understanding, uses effective verbal and nonverbal communication, have dialectical nature of autonomy and connection, could balancing patients' desire for involvement in decision-making with the need for expert guidance, understands the importance of privacy in healthcare, and takes steps to ensure that sensitive information is handled securely. For this reason, this research offers the 4 I’s of Ideal Doctor model which includes Integrity, Informed, Intelligent, and inspirational which should be a guideline for healthcare services.
So that later, doctors are able to meet patient expectations. As a result, uncertainty, dissatisfaction, and misunderstanding can be minimized.

REFERENCES


Chen, et al. (2018). *Species traits, habitat characteristics and spatial dynamics of birds on land-bridge islands, Thousand Island Lake, China*. PANGAEA. https://doi.org/10.1594/PANGAEA.885964


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