

Communication competence of social workers in rehabilitation: interpersonal, empathic, and adaptive dimensions

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ABSTRACT

Background: Social workers require a high level of communication competence in providing social rehabilitation services. Communication competence involves the ability to communicate effectively, empathetically, and adaptively according to clients' needs and social conditions. In social rehabilitation, these competencies are essential for building trust, facilitating participation, and supporting successful intervention outcomes. Social workers ability to establish rapport, communicate empathetically, and tailor communication strategies to clients' situations may affect the success of social support and intervention. Yet, empirical studies, particularly in South Sumatra, remain limited. Therefore, examining social workers' communication competence in Sentra Budi Perkasa, as one of leading social rehabilitation institutions in South Sumatra, is important to provide insights for improving service quality and strengthening professional social work practice. **Purpose:** This study aims to analyze the communication competence of social workers at Sentra Budi Perkasa, Palembang, South Sumatra, Indonesia. **Methods:** It employs a qualitative case study design. The data collection includes in-depth interviews with social workers, participant observation as social workers engage in the rehabilitation process, and a review of pertinent institutional records. **Results:** The interpersonal, empathic, and adaptive dimensions reflect the communication competence of social workers at Sentra Budi Perkasa Palembang. Openness, clear language, and active listening can help social workers gain clients' trust. **Conclusion:** The study concludes that social workers' communication competence is a strategy to optimize the quality of social rehabilitation services. **Implications:** It is believed that the research findings could provide a foundation for enhancing social workers' abilities by continually training them in communication and practice, and guiding them to formulate humanistic, participatory, communication-based social rehabilitation service policies.

Keywords: Social workers; communication competence; interpersonal competence; rehabilitation; empathic; adaptive

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INTRODUCTION

According to Badan Pusat Statistik (BPS), the number of people with disabilities in Indonesia has reached approximately 22.97 million, or 8.5% of the total national population. This group faces barriers in education, employment, and access to social services. Their labor force participation rate remains relatively low, at around 23.94%. This situation indicates that many people with disabilities require social rehabilitation services that focus not only on functional recovery but also on strengthening psychosocial capacity and social independence. The role of social workers in overcoming the problem, then, is strategic.

Many studies show that social workers face high workloads and administrative pressures that can compromise the quality of communication with clients (Ravalier et al., 2022). This situation also exists at the Budi Perkasa Center in Palembang, which serves beneficiaries from South Sumatra and Jambi with diverse cultural backgrounds and educational levels. Therefore, research on social workers' communication competencies is crucial for understanding how therapeutic relationships are built and how social rehabilitation services can be optimized through effective communication.

The spirit of social work as a profession is actually in creating and maintaining relationships with people, groups, and communities. These relationships are established through communication, which is the primary medium. Thus, communication

is an inseparable tool in the practice of social work. Communication may help social workers collect information, explore emotions and thoughts, address problems, and provide guidance. This interpersonal basis promotes, according to Reith-Hall & Montgomery (2023), communication competence, which is paramount for establishing positive working relationships and improving outcomes for service users.

Indeed, effective communication is widely regarded as the keystone of social work practice. It requires social workers to have a complete set of social competencies. Such competencies let social workers navigate the complexities of diverse social situations and effectively use linguistic and pragmatic communication strategies to convey meaning and achieve therapeutic outcomes (Maryani et al., 2020).

Such a lack of communication competency can lead to severe difficulties, which are frequently discussed in major case reviews and commissioned reports as a key area of concern in the profession. Social workers in rehabilitation settings cannot be overlooked as part of an interprofessional team, attending to clients' psychosocial needs while maintaining a biopsychosocial approach (Freymüller et al., 2024). They can explain the complex problems, facilitate discussion, and represent the clients. All these competences are important in providing holistic treatment to achieve an effective rehabilitation result. Furthermore, effective communication between healthcare

workers and patients plays an important role in the rehabilitation process since it can influence patient involvement and the therapeutic relationship as a whole.

The literature widely reports that communication competence is important in social work. Spitzberg and Cupach developed an early model of interpersonal communication competence that comprises three mutually supportive elements: knowledge, skills, and motivation (Spitzberg & Cupach, 1984). This model underscores the importance of being aware of communication principles, using appropriate communication patterns, and having the motivation to engage in effective interactions.

According to this model, successful communication cannot be achieved solely through technical skills in message communication, but also through cognitive knowledge of appropriate communicative behavior and personal willingness to become competent in communicating with others. In this regard, communication skills development is a continuous process that can be refined through targeted training and education (Reith-Hall, 2022), thereby addressing common concerns in social work practice.

These competencies are especially acute in the framework of social rehabilitation since employees have to contend with rather complicated relationships with the clients who can encounter physical, psychological, and social issues. Thus, social workers should use

an adaptive communication strategy, modifying their language and approach to the individual's needs and cognitive capabilities, especially when working with people with disabilities or older adults (Grieve et al., 2022).

One such area where communication competence is practiced is social rehabilitation services for persons with disabilities. Sentra "Budi Perkasa" is a government facility of the Ministry of Social Affairs in Indonesia that provides rehabilitation for individuals with physical disabilities. The institution was founded in 1972 and has since evolved into a center (Sentra) that offers multilayered attention programs, including physical therapy, vocational training, psychosocial support, and community reintegration services. The institution serves beneficiaries across the provinces of South Sumatra and Jambi; thus, it is a major social rehabilitation center in the area. The institution is an important source for investigating the communicative behaviors and strategies used by social workers in the actual rehabilitative environment (Maryani et al., 2020).

This research, then, is aimed at exploring professional social workers' communication competence working at Sentra Budi Perkasa, Palembang. It will also investigate how the social workers modify their communication skills to encourage a meaningful interaction with clients, as well as to achieve the therapeutic objectives professionally. Although the role of communication is now recognized as important in social work, there remains a gap in the

literature on how communication competence is applied in social rehabilitation contexts in the developing world, specifically in Indonesia. The vast majority of the literature has focused on high-income nations, with most research conducted in the United States, Australia, and Germany (Frey Müller et al., 2024). This geographical bias reduces the generalizability of the results and may ignore the cultural, linguistic, and socio-economic peculiarities of communication that shape social work in Indonesia (Purbasari et al., 2025).

The research fills this gap by offering a detailed analysis of social workers' communication competence and discussing how the interpersonal, empathic, and adaptive dimensions of communication are put into practice. The study is expected to provide insight about effective communication in social rehabilitation within a non-Western setting. By examining a particular Indonesian institution, this study examines how local communication norms and linguistic diversity, including translanguaging practices, shape the processes of providing and receiving social rehabilitation. These localized communication dynamics are of particular interest to explore in the present context, which focuses on community-based and culturally relevant models in Indonesia.

This research also aims to discuss the interpersonal communication competence of social workers as well as building relationships with their clients during social rehabilitation, to discuss the empathic communication

competence of social workers as a means to understand and react to the psychosocial needs of their clients, and to determine the adaptive communication strategies used by social workers in response to the diversity and conditions of their clients.

Communication is a critical attribute of each stage of the social work helping process. It involves verbal and non-verbal communication that helps collect information, identify the problem, explore emotions, and organize intervention tasks. The National Association of Social Workers (NASW) stresses that social workers must be effective communicators who can engage clients from all cultures, including individuals with disabilities (NASW, 2015).

The theory of Interpersonal Communication Competence, as argued by Spitzberg & Cupach (1984), provides a solid theoretical approach to communication effectiveness. That component model implicates three critical dimensions: (1) knowledge, concerned with the capability of the communicator to recognize the right behavior under specific conditions; (2) skills, which refer to the capability of the communicator to carry out the right communicative behavior; and (3) motivation, which entails the personal desire to communicate effectively. The three elements act in synergy to create interpersonal communication competence and capacity to adapt to various communicative backgrounds.

Social work communication involves not only relaying messages but also building relationships, empowering clients, and

adapting to different situations by adjusting strategies. It has been established that effective communication in social work requires cultural awareness and adaptability to suit clients' diverse needs and contexts (Reith-Hall & Montgomery, 2023). This is important in the rehabilitation environment, where the effectiveness of interventions depends on the quality of the therapeutic relationship between the worker and the client.

Some key elements of social work practice include interpersonal communication, which is the foundation of healthy and effective working relationships. Interpersonal communication has been shown to shape proximity and familiarity in rehabilitation and to help social workers alter behavioral patterns and establish trust with clients (Maryani et al., 2020). The interpersonal communication approach is more advantageous than facility-based approaches because it has a longer-lasting effect: it encourages internalized behavioral change rather than superficial compliance.

Interpersonal communication used to build trust has several elements. Active listening is a key trust-building behavior, and professionals define it as an expression of their genuine interest in what clients say. Studies of trust in social work relationships have shown that active listening requires professionals to be attentive to the interaction, maintain eye contact, focus on nonverbal cues, be empathetic and respectful, recognize others, ask appropriate questions, and give the interaction their full attention.

The two-way character of trust in professional relationships also highlights the significance of genuine interaction between people (Koswara & Lukman, 2022).

The person-centered approach of Carl Rogers, which recognizes empathy as one of three essential dimensions of therapeutic effectiveness, in addition to unconditional positive regard and congruence, has a major influence on empathetic communication in social work. Rogers theorized that empathy is the therapist's great capacity to understand the client's experience as the therapist sees it, including both cognitive and affective aspects (Watson et al., 2025).

Cognitive empathy is important in social work practice to promote trust, enable effective communication, and properly understand clients' needs and situations. A caring conversation among the social worker, the client, and their immediate surroundings could create trust, emotional safety, and the client's involvement in decision-making (Watson et al., 2025). This is a sensitive communication style that can be used in difficult life circumstances, makes life easier psychologically, and helps the client become more autonomous.

Years of research have demonstrated the effectiveness of communication, especially empathetic interaction, in improving patient adherence to therapy, health outcomes, and recovery (Carvalho & Dores, 2022). Social workers who use empathic communication in rehabilitation facilities are better positioned to

provide psychosocial assessment, counseling, and teaching interventions that meet clients' holistic needs.

Adaptive communication is the skill of adjusting communication strategies to meet situational and client needs. According to NASW, cultural competence means that, when a social worker practices it, they must learn about their own culture and acquire the necessary knowledge, skills, and values to support people with diverse cultural experiences in service delivery. This involves being sensitive to race, ethnicity, gender, class, religion, age, and disability (National Association of Social Workers (NASW), 2015).

Intercultural competence has been identified as key to enabling social workers to work in more diverse societies. Social workers should develop skills to effectively engage clients from diverse cultural backgrounds, which involves familiarity with cultural norms, adapting communication styles, and employing culturally appropriate approaches (Dhamo & Canaj, 2024). In disability care, culturally competent care helps people feel appreciated and understood by providing support in line with cultural norms.

In rehabilitation, the need for adaptive communication is increased because disabilities vary and clients have heterogeneous backgrounds. Social workers must overcome not only cultural differences but also differences in cognitive ability, communication capacity, and psychosocial functioning (Freymüller et al.,

2024). This implies a versatile communication strategy that can meet the needs of clients with diverse characteristics without compromising the fundamental values of empathy and respect.

Social workers in the global workforce experience considerable professional difficulties that may hinder the quality of their communication and service delivery. A study by the International Federation of Social Workers (IFSW) found that social workers worldwide experience problematic, consistently challenging work environments, and that these conditions are reportedly worse than those in up to 75% of other comparable careers (Ravalier et al., 2022b).

The problem of burnout among social workers has been widely reported, and research consistently reports high rates of emotional exhaustion and depersonalization (Parlalis & Hadjicharalambous, 2024; Ratcliff, 2024). The research results show that a large proportion of social workers are emotionally exhausted by their work, and that burnout is strongly linked to high job demands and inadequate resources. Such burnout can lead to a decline in the quality of care or services, as social workers may be under pressure to close cases on time, reducing the thoroughness and quality of their work.

In the rehabilitation setting, Bakker & Demerouti (2007) suggested medical complexities of clients' conditions, which include the coordination of numerous health and care services and the high needs of rehabilitation populations. Such challenges are, in most cases,

exacerbated in developing nations by resource scarcity, a lack of specialist human resources, and a lack of training and skill-acquisition opportunities.

RESEARCH METHODS

The qualitative case study is developed in accordance with the approach described by Creswell and Creswell (2022). A case study is a qualitative research method that involves an in-depth examination of a single entity in real-world contexts, enabling researchers to study a phenomenon holistically and reveal its details and complexities (Bakti et al., 2023; Creswell & Creswell, 2022). The design was selected because the research aims to provide a detailed, context-based understanding of communication competence as practiced by social workers in a given institutional setting. The qualitative method is suitable for this study because communication competence is a multidimensional phenomenon that cannot be adequately evaluated using quantitative measures.

The study was conducted at Sentra Budi Perkasa in Palembang, a social rehabilitation center under the Ministry of Social Affairs of the Republic of Indonesia. It was previously established in 1972 as a subsidiary of the Rehabilitation Centrum Solo. Yet, it has gone through several changes: it was established in 1972 as Lembaga Rehabilitasi Penderita Cacat Tubuh (LRPCT), in 1979 it was renamed

to Panti Rehabilitasi Penderita Cacat Tubuh (PRPCT), in 1994 it changed its name to Panti Sosial Bina Daksa (PSBD), and in 2019 to Sentra “Budi Perkasa” (Kementerian Sosial Republik Indonesia, 2025).

The services offered at the institution are diverse, comprising prosthetic workshops, physiotherapy, occupational therapy, speech therapy, psychological therapy, vocational training (automotive, sewing, workshop, salon, computer, welding, batik, and music), and formal education equivalency programs. It provides its services in the provinces of South Sumatra and Jambi. The center’s mission includes protection and social rehabilitation services, assessment and social advocacy, and strengthening management support for responsible, transparent, and efficient services.

Complementary methods have been used to sample the data. Five Social workers at Sentra “Budi Perkasa” Palembang who directly provide rehabilitation services were interviewed in depth. They are Aparatur Sipil Negara (civil servants) who have worked in social fields for over 10 years. The interview protocols were developed using semi-structured questions addressing the three dimensions of communication competence under study. The interviews examined social workers’ experiences, strategies, challenges, and perceptions regarding communication with clients in the context of rehabilitation.

The rehabilitation process was observed through participatory observation to examine the social workers’ communication practices in

their natural work environment. This involved face-to-face interaction between social workers and their clients during counseling, assessment, and group sessions.

Document analysis involved reviewing pertinent institutional documents, including service protocols, work plans, case records, training materials, and organizational policies related to social worker practice and communication standards.

The data analysis was conducted according to the interactive model developed by Miles, Huberman, and Saldana, which assumes three activities occurring simultaneously: data condensation, data display, and drawing conclusions and verifying them. Data condensation involved selecting, simplifying, and transforming data from field notes, interview transcripts, and documents (Miles et al., 2020). Data are presented in tables and narrative summaries to facilitate analysis and pattern identification. Conclusion drawing involved interpreting the presented data to identify themes, patterns, and relationships, and the conclusions were confirmed through triangulation using multiple data sources and member checking with participants.

To ensure the credibility of the research results, various strategies were used. Data sources were triangulated through interviews, observations, and documents; the researchers spent extended time at the research site; the research team checked with participants to establish the validity of interpretations; and

the researchers used thick description so that the research results could be transferred to other areas. These standards align with the predetermined quality standards in qualitative research (Lavee & Itzchakov, 2023)

RESULTS AND DISCUSSION

The results indicate that social workers at Sentra Budi Perkasa, Palembang, have considerable interpersonal communication competence, which is the basis for successful rehabilitation service delivery. The competences consist of three core behaviors: to foster clients' openness and trust, to use easy-to-understand language, and to listen actively. These three behaviors are basic principles to develop a good relationship and build a conducive environment where clients feel that their concerns are heard and valued. This feeling, in turn, is expected to encourage them to be more active in the rehabilitation process. Furthermore, effective communication skills may have a direct correlation with higher clients' involvement and therapeutic progress. It is the reason why strong interpersonal skills are useful in a certain situation (Hasyim et al., 2026).

This study clearly shows that social workers have always developed open and trusting relationships with their clients from the moment of the first contact. This was done by portraying themselves as friendly, nonjudgmental, and concerned about clients' welfare. Social workers indicated that they used

planned strategies to create a safe, supportive environment where clients felt comfortable sharing personal information and expressing their concerns. It is especially crucial in a case of rehabilitation, where clients are usually highly vulnerable emotionally and psychologically, and their needs demand a more communicative approach that values psychological safety and affirmation.

Such results are in line with the general literature of trust-building in social work, which outlines that trust is an imperative factor in relations between clients and professionals (Heino et al., 2025). It has long been shown that listening, reciprocity, and sincerity are among the best ways professionals can build trust. In this research, social workers described the initial stage of building trust as critical, given that most clients present at the rehabilitation center with a sense of vulnerability, shame, or distrust of institutional services. By showing empathy, respect, and reliability, social workers alleviated these initial obstacles and created a therapeutic alliance that plays a crucial role in effective intervention (Donato, 2025; Seebacher et al., 2024).

The interpersonal communication style used by social workers effectively creates proximity and behavioral change, performing as expected in previous studies. It indicates that interpersonal communication is effective in the context of long-term effects within rehabilitation environments (Maryani et al., 2020). Social workers observed that clients who trusted them

were more likely to be actively involved in the rehabilitation program, share pertinent personal data, and collaborate on intervention strategies. The finding also justifies this focus on trust that patient commitment to rehabilitation programs and their overall improvement substantially increase when they see their caregivers as professional and caring communicators.

Another unique aspect of interpersonal communication competence at Sentra Budi Perkasa was the use of simple language. The social workers were well aware of the need to avoid technical terminology and to adjust their language to suit their clients' levels of education and cognitive ability. Clients have diverse educational backgrounds. Most of them lack formal education, especially those who live in rural areas. Thus, the social worker's language skills and strategy are required to make a clear and interesting instructional message concerning rehabilitation to ensure that the process of therapeutic communications is easier to understand by clients. The correlation between social workers' communication competence and clients' understanding is basically the basic concept in social work literature. The skill to interpret a complex rehabilitation matter into simple language is significant in the process of clients' rehabilitation, where they need to comprehend their hope and, in turn, make the right decision for their treatment.

Active listening is an important factor of social workers' interpersonal communication skills. They listen actively by maintaining eye

contact, using expressive body language and gestures, responding verbally, and offering a reflective paraphrase of client's statements. The action motivates clients to tell their experience and at the same time, validates their emotional feelings and attitudes. This dynamic style of listening enabled social workers to understand the specifics of clients' situations, so that interventions were focused on clients' individual needs and facilitated a more profound therapeutic experience. The practice is consistent with the literature, which recognizes active listening as an essential competence for establishing rapport and creating patient-centered care, particularly when clients feel peripheralized or misunderstood (Mamdani et al., 2022).

Active listening in social work has been studied and shown to be important in practice. It has been identified as a behavioral quality that reflects professionals' genuine interest in what clients are saying, requiring them to be attentive and empathetic (Heino et al., 2025) we attempt to identify the consequences of trust in the relationship between professionals and clients (children and parents. Such an in-depth experience enables social workers to grasp the literal message clearly and also understand hidden feelings and unmet needs, which is significant for holistic intervention.

Research has identified active listening as a way to help clients feel empowered to discuss their situations, reflect on their thoughts and feelings, and feel heard and appreciated. The

social workers studying it noted that active listening was especially significant in the assessment stage, as it is necessary to pay close attention to a client's expressed and unspoken worries to grasp the full complexity of their needs.

Another significant dimension identified in this study is empathic communication. It is about social workers' capacity to understand and respond to clients' emotional states, psychological needs, and lived experiences. This usually entails taking the client's perspective, connecting emotionally, and conveying nonjudgmental acceptance of the client's situation.

Empathic communication was evident at Sentra "Budi Perkasa", with social workers responding to and noting the emotional state of their clients, who were frustrated, grieved, anxious, and hopeful. This sensitivity helped workers react appropriately and offer emotional support that was not merely the exchange of information. This modality helped create a therapeutic atmosphere in which clients felt understood and encouraged, thereby strengthening the foundation of their rehabilitation. This compassionate interaction is essential for establishing rapport and trust, the building blocks of successful crisis intervention and long-term therapeutic relationships.

These results are close to the person-centered approach, which assumes that empathy is one of three essential requirements for therapeutic change. Empathy is perceived

through clients' experiences, and empathic perception has been shown to help establish trust, emotional security, and active client involvement in decision-making.

Social workers in a rehabilitation setting noted that empathic interaction was highly necessary in inspiring clients who might be grieving over disability development or frustrated about the rehab progress. This aligns with the idea that empathy entails being emotionally engaged with another person's experience, which means social workers will have a fresh, unafraid perspective on the client's experience (Watson et al., 2025).

One notable difference in empathic communication at Sentra Budi Perkasa was the social workers' sensitivity to clients' psychosocial differences. Employees demonstrated sensitivity to how family relationships, socioeconomic status, education level, and the history of disability development affected clients' emotional states and communication needs. This knowledge enabled social workers to give empathic responses by acknowledging and validating clients' emotions in the broader context of their life circumstances and challenges (Cunningham et al., 2024).

The social work literature on rehabilitation supports the significance of this holistic sensitivity. The social worker in rehabilitation should use a bio-psycho-social approach, taking into account the full range of clients' needs (Freymüller et al., 2024b). The social environment of clients, social support networks,

family, and interpersonal relationships are important areas of focus in rehabilitation centers.

This sensitivity was expressed at Sentra Budi Perkasa through workers' ability to recognize when clients needed more emotional support, when family involvement would help, or when clients' external circumstances were affecting their recovery. Moreover, social workers changed the style of empathic communication to account for these diverse aspects, making their responses not only emotionally resonant but also culturally and personally appropriate (Raatikainen et al., 2021) emotional skills and a healthy set of boundaries. Qualified Empathy encompasses the ability to tell the difference between sympathy and empathy, as it includes the capacity to use compassion to act in an empathic way in professional contexts (Raatikainen et al., 2017).

The empathic communication skill among social workers also applies to the development of emotionally safe interactions with clients. Social workers explained that they tried to help their clients feel psychologically secure during counseling sessions, group activities, and assessment interviews. This entailed expressing unconditional positive regard, accepting clients without judgment, regardless of their conditions or ways of life. This practice helps social workers build openness and gain trust from clients so that they will openly share their problems and willingly participate in the treatment process (Chima et al., 2023).

The practice directly reflects Roger's theory that aims to create an inviting and warm environment to help clients feel valued. Research by Paudel showed that clients tend to accept themselves and explore their subjective experiences without fear of rejection if they feel unconditionally accepted. Thus, emotional security is very important in the rehabilitation program, especially for clients who face communication and social interaction barriers because of being stigmatized or discriminated for their disabilities (Paudel, 2021).

The last dimension is known as adaptive communication competence and is linked to social workers' capacity to adjust their communication strategies based on client characteristics, cultural settings, and circumstances. This flexibility involves adjusting verbal and nonverbal expressions, communication channels, and the degree of formality to maximize understanding and build relationships with everyone. The social workers at Sentra "Budi Perkasa" tailored their communication strategies to the client's personal traits, including the nature and severity of the disability, cognitive ability, cultural background, and emotional condition.

In cases of speech impairment among clients, workers used simplified language, visual communication, and increased use of nonverbal cues. For clients from other cultural backgrounds, the workers tailored their communication approach to their culture and preferences. The same responsiveness was also

applied to adjusting the communication to the emotional state of the client, where the social workers took a more reassuring and supportive tone for clients in a distressed state and a more direct, solution-focused approach with those who are ready to engage in the action planning (Davi et al., 2024).

Adaptive communication is an essential part of social work, as supported by the literature. Studies have shown that individuals require different communication strategies, and it is crucial to identify the most suitable strategy for each person to support their full engagement in the strengths-based process (Freymüller et al., 2024b). Intercultural communication skills have been identified as factors that enable social workers to interact with clients from different cultures (Dhamo & Canaj, 2024).

The varied nature of the population served by Sentra "Budi Perkasa", with people of different physical disabilities spread across South Sumatra and Jambi provinces, necessitated that social workers be flexible in their communication strategies. Employees added that they adjusted the content, speed, medium, and formality of their relationships depending on the needs of individual clients. This involved using nonverbal communication more with clients who have limited verbal skills and employing specific communication methods to address language discordance in such cases (Carrard, 2021; Ramafikeng & Marshall, 2023).

The adaptive capacity is consistent with the conceptual framework formulated by

Table 1 Communication Competence Core Dimensions of “Budi Perkasa” Social Workers

Core Dimensions	Sub-Findings (Category)	Description
Interpersonal Communication Competence	Openness & Trust Building	Building open, non-judgmental, and supportive relationships from the beginning of interactions.
	Clear and Simple Language	Using simple and easy-to-understand language in accordance with the client's educational background
	Active Listening	Active listening with eye contact, verbal responses, and paraphrasing
	Therapeutic Relationship	Building interpersonal relationships to encourage client openness and participation.
Empathic Communication Competence	Emotional Understanding	Understanding the client's emotional state.
	Perspective Taking	Being able to see from the client's point of view
	Psychosocial Sensitivity	Being sensitive to the client's socioeconomic background
	Emotional Support	Providing emotional support and acceptance without judgment
Adaptive Communication Competence	Psychological Safety	Building a sense of safety in interactions
	Situational Adaptability	Adjusting communication based on client conditions (disability, emotions, culture)
	Multimodal Communication	Using verbal and nonverbal communication (visual, gestures)
	Cultural Adaptation	Using local languages and cultural values
Challenges	Communication Flexibility	Adjusting communication style and approach
	Time Constraints	Limited interaction time due to a large number of clients
	High Workload	High workload and administrative tasks
	Client Diversity	Client variations (age, culture, education, disability)
Outcome	Burnout Risk	Social workers' Emotional exhaustion
	Structural Barriers	Organizational and resource limitations
	Trust Building	Building client trust
	Client Engagement	Increased client participation
	Service Effectiveness	Communication as a key service strategy

Source: research results, 2026

Spitzberg and Cupach, who put it as one of the communication competence criteria (Spitzberg & Cupach, 1984b). Researches also have identified that communication competence covers goal attainment, communication in interpersonal relationship, adaptive behavior, accountability, and social awareness. Yet, the flexibility of social workers at Budi Perkasa

when adapting their approach showed different understanding related to situational aspects of effective communication. In other words, a strategy that is effective for a client may not be effective for another. One of the noteworthy observation results is how the social workers insert local values or wisdom into their communication style. They use native language (including Melayu Palembang), relevant cultural metaphors, and local traditional references to facilitate communication and build understandings with their clients. This cultural-oriented communication points out a strong acknowledgement on the role of culture in shaping communication preferences and meanings. This integration demonstrate the importance to encourage cultural-sensitive communication, a key factor to reduce gaps between social workers and clients, particularly in Indonesia's diverse cultures (Cipta et al., 2024).

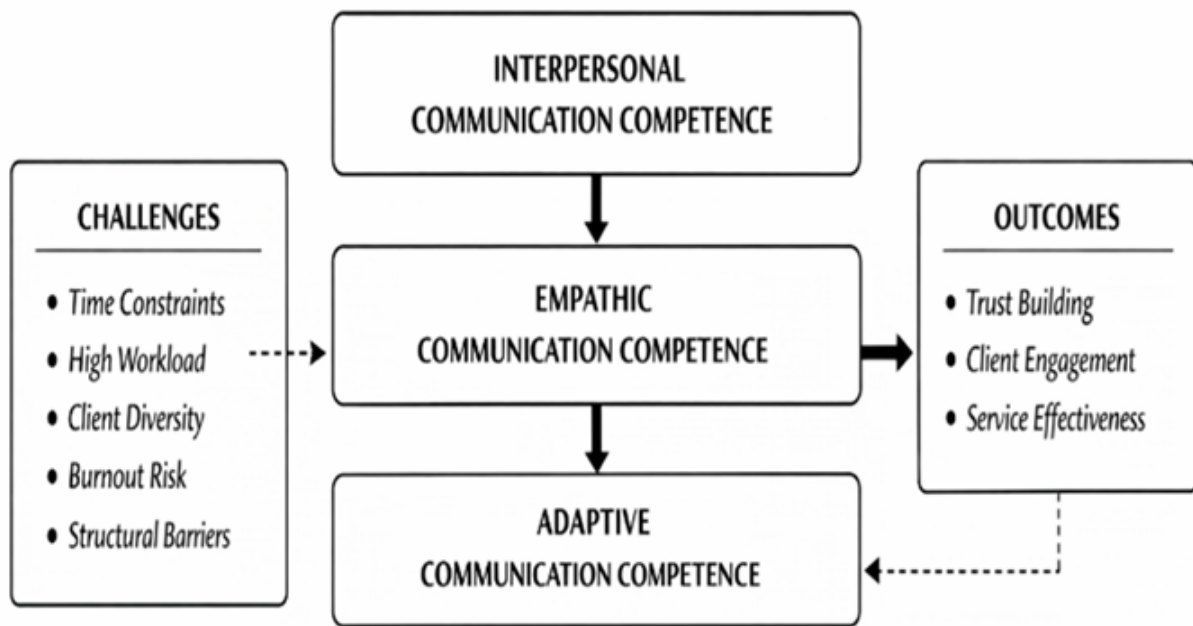
Social work demands cultural competence that requires cultural awareness and sensitivity through active listening, empathy, and intervention as part of the main competence. In an intercultural communication context, a social worker must endeavor to be an effective communicator adaptable to clients' cultural backgrounds. It means that he or she should enhance awareness of a cultural bias and actively reduce its effect on communication and professional interaction. Through self-reflection and sustainable learning, social workers can recognize cultural blind spots and assumptions

and manage to overcome them in order not to hamper culturally responsive treatment.

The implementation of local culture in Budi Perkasa's communication strategy is a positive sign of high adaptive competence, one that goes beyond tolerating diversity and involves applying cultural knowledge in practice. The active combination of this cultural intelligence enables social workers to effectively navigate the complex intercultural dynamics, leading to more meaningful engagement and improved service delivery.

Table 1 shows the core dimensions of communication competence among social workers at Budi Perkasa. The core dimensions of communication competence in social work can also be represented through the model illustrated in the following figure 1. Regardless of the competencies above, this research has identified significant barriers that hamper the complete use of social workers' communication skills.

Those barriers include a lack of local culture understanding and difficulties in delivering information as well as decision making in a diverse cultural context (Martina et al., 2022; Sugiyanto et al., 2025). All key informants said that they have insufficient time to serve each client properly. This situation impedes them to reach the needed level of relationship to communicate effectively because the rehabilitation program runs based on a well-structured schedule, and the number of clients relative to the number of staff available strains the time per session. The



Source: research results, 2026

Figure 1 Communication Competence Multidimensional Model of Social Workers

limitation often excludes detailed conversation that is essential to comprehend clients’ complex stories, especially in terms of socio-cultural context (Omoboye & Eneh, 2024).

This result is consistent with some literature on the working conditions of social workers, which has reported that occupational demands and workloads are worsening over time. Focusing excessively on case numbers while providing insufficient support may leave social workers with too little time to deliver high-quality services (Ravalier et al., 2025). The conflict between an organization’s efficiency requirements and the relational requirements of effective communication is a systemic issue that cannot be solved by personal skill development. It requires a critical analysis of institutional policies and resource allocation to ensure that

social workers have sufficient time to engage with clients in a comprehensive and culturally responsive way.

It was noted that social workers at Sentra Budi Perkasa had heavy workloads, which could be a major obstacle to effective communication. Employees reported working on several cases simultaneously, along with administrative obligations, attending team meetings, and participating in institutional reporting.

The interconnections among workload, burnout, and quality of service are well-documented in the social work literature. Studies have found that social workers are more stressed and more susceptible to burnout than other occupational groups, and that burnout is linked to absenteeism, higher turnover rates, and poor work attitudes (Ratcliff, 2024). It has

been shown that a high percentage of social workers experience emotional exhaustion, a major dimension of burnout that may lead to depersonalization and diminished personal achievement (McFadden et al., 2015). The threat of burnout in social workers who work with physically disabled adults is especially high in the context of rehabilitation.

These implications significantly affect communication competence: the ability to engage in empathic interaction may be undermined by emotional fatigue, whereas depersonalization (the development of emotional hardness towards service users) directly affects the quality of relationships on which successful communication is based.

The heterogeneity of the client population that Sentra “Budi Perkasa” serves in its business poses a constant communication challenge. The clients are not only different in terms of types and levels of their disabilities but also by age, level of education, cultural background, mental condition, and communication abilities. This variety demands that social workers enhance their communication skills, which may be cognitively and emotionally challenging. Furthermore, the growth and use of digital communication tools impose additional strain, for instance, increased message volume, which may lead to staff burnout and affect work-life balance. Research has shown that social workers must deal with the complex task of bringing into alignment with health services and other treatment programs, as well as

addressing the diverse needs of individuals undergoing rehabilitation. In a developing country, these problems have usually been aggravated by limited resources and training opportunities. Thus, the challenge for effective communication in such diversity is the need for sustainable professional growth in adaptive communication.

This study is expected to contribute to the theoretical understanding of communication competence in social work by adding new insights to the literature. It demonstrates how three dimensions, namely, interpersonal, empathetic, and adaptive, interact in a cohesive combination in a specific rehabilitation setting. The findings extend the communication competence model developed by Spitzberg and Cupach by showing differences in how knowledge, skills, and motivation are expressed across these dimensions and how they are configured within particular contexts. This paper helps bridge the gap between Western communication theory and its application to social welfare practice in Southeast Asia. The results suggest that while the fundamental principles of communication competence may be universal, their practical implementation is shaped by cultural context.

Social workers should receive regular and structured communication training in institutions that provide social rehabilitation services. The training should focus on the three dimensions of communication competence identified in this study, especially empathic

listening and culturally adaptive communication strategies. Training programs should also include specialized socio-pragmatic language skills designed for particular client groups, because general evaluations of professional communication competence may not fully capture these skills.

Organizations should reduce barriers to effective communication, including high caseloads and limited time for client interaction. Evidence indicates that better working conditions improve service quality and lower costs, highlighting the importance of effective workload management. Regular clinical supervision and opportunities to reflect on communication practices can support social workers in maintaining and improving their communication competence and can also help prevent burnout and depersonalization.

The effectiveness of rehabilitation services can be increased by creating communication rules and protocols that integrate local cultural values and communication norms, helping the social worker adapt to the competence of adaptive communication. Individualized training programs, such as those that encourage self-directed learning, can substantially strengthen these competencies by tailoring development to their needs and fostering continuous performance improvement.

The policy-level findings imply that social rehabilitation services should develop communication-based standards. The minimum staff-to-client ratios should be stipulated in the

policy to ensure sufficient time for relationship-building and communication. Also, the ongoing professional development criteria must include communication competence as an essential area, with special emphasis on empathic and culturally adaptive communication skills.

Although this study demonstrates that social workers at Sentra “Budi Perkasa” possess strong interpersonal, empathetic, and adaptive competencies, field findings also reveal a contradiction between humanistic values in social work and the structural pressures of rehabilitation organizations. In practice, the social workers at Budi Perkasa lack full autonomy in establishing therapeutic communication because interactions with clients are constrained by administrative targets, tight rehabilitation schedules, and high caseloads that must be handled simultaneously. This situation suggests that communication in social rehabilitation does not occur in an equal relationship, but is influenced by institutional power structures that determine how, when, and to what extent social workers can build relationships with clients.

The findings of this study also indicate that communication barriers between social workers and clients at “Budi Perkasa” do not merely come from limited individual social workers’ skills, but are closely related to structural working conditions. High client volumes, administrative pressures, and limited interaction time can lead to emotional exhaustion among social workers, potentially reducing the quality of empathetic

communication with clients. In certain situations, social workers tend to shorten interactions or focus more on completing procedures than on exploring clients' psychosocial needs in depth.

This situation aligns with various studies on burnout in the social service profession, which show that burnout is not solely an individual psychological issue but is also caused by organizational injustice, work pressure, and minimal institutional support. Ainur Rosidah's research found that organizational justice significantly influences social worker burnout. The lower the perception of organizational justice, the higher the level of burnout among social workers.

CONCLUSION

This research demonstrates that social workers' communication competence at Sentra Budi Perkasa covers not only the interpersonal, empathetic, and adaptive dimensions described in classical interpersonal communication theory, but is also shaped by the cultural context and organizational structure in which communication takes place. The findings suggest that the communication effectiveness of the social workers is significantly influenced by their ability to integrate local language, cultural values, and relational approaches in building therapeutic relationships with clients with disabilities.

This study also identified a contradiction between the ideals of humanistic communication

and the structural pressures of the social rehabilitation bureaucracy. High workloads, limited interaction time, and administrative demands impact social workers' ability to maintain consistent empathetic communication. Communication competence cannot be understood merely as an individual attribute, but as a social practice produced through the interaction of personal capacity, local culture, and institutional conditions.

Based on these findings, this study proposes the concept of contextual communication competence to adapt communication to clients' psychological characteristics and the structural limitations of rehabilitation organizations. This concept expands on Brian H. Spitzberg and William R. Cupach's communication competency model, which previously emphasized individual knowledge, skills, and motivation.

The primary theoretical contribution of this research lies in developing the perspective that communication competency in social work is contextual, relational, and structural. These findings lead to the development of critical social communication studies examining the influence of local culture, power relations, and service bureaucracy on social rehabilitation communication practices in Indonesia.

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