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Parental Communication in Building Mental Resilience for Children with Thalassemia

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ABSTRACT

Thalassemia is a chronic disease that not only impacts the physical condition of the child, but also on psychological and social aspects. The role of parents through interpersonal communication is an important factor in forming children's mental resilience to face these conditions. This study aims to find out how parental communication in building mental resilience of children with thalassemia and parents' efforts to overcome obstacles in communicating with children. This study uses a qualitative approach with a descriptive method. Data collection was conducted through in-depth interviews with parents and secondary data to reinforce the findings. Data analysis is carried out by identifying, grouping, and interpreting data in the context of parent-child communication. This study uses the framework of Symbolic Interaction Theory to understand how the meaning constructed by parents through communication contributes to children's mental resilience. The results of the study show that the role of parents in building the mental resilience of children with thalassemia and become a guideline for related agencies to increase awareness of the physical, psychological, and social conditions of chronic disease sufferers.

INTRODUCTION

In the context of child development, consistent and supportive communication helps children build positive self-concept and healthy emotional regulation. On the other hand, communication that is authoritarian, closed, or lacks empathy can cause psychological obstacles in children. Children who do not get space to express their feelings tend to have difficulty managing stress and developing mental resilience. The communication patterns applied by parents in the family have an influence on children's emotional development, especially during the growth period which is an important stage in personality formation (Sahara & Triyono, 2026).

Communication between parents and children is a very important form of interaction in the family. Communication not only functions as a means of conveying information, but also as a medium to build emotional relationships, provide psychological support, and shape children's character. Effective communication allows parents to understand the needs, feelings, and experiences experienced by the child. On the other hand, children can also express their thoughts, feelings, and problems to parents. Thus, good communication can create a harmonious relationship between parents and children.

Communication between parents and children certainly plays an important role in shaping children's mental resilience. Mental resilience is the ability of individuals to face, overcome, and adapt to various pressures or difficulties that occur in life. Children who have good mental resilience tend to be able to manage emotions, face challenges, and bounce back from difficult experiences. In this case, the role of parents is very important in helping children build mental resilience through supportive, empathetic, and caring communication. In addition, parental communication in building mental resilience is very important to be carried out under certain conditions, especially in the case of Thalassemia.

Thalassemia is a chronic genetic disease that requires long-term medical treatment, such as through regular blood transfusions or iron chelation therapy. This condition certainly has an impact on both the physical, psychological and social conditions for thalassemia sufferers and their families. For children with thalassaemia certainly experience quite complex emotional experiences, such as feelings of anxiety and fear when facing medical

procedures, and feelings of being different or alienated from their peers, not only that people with thalassemia also feel limited in carrying out social activities (Sari et al., 2024).
In addition, communication between parents and children with thalassaemia is also influenced by various factors. For example, the psychological condition of parents can be influenced by the emotional burden of caring for children with chronic diseases, the level of parental knowledge about thalassemia, and the social support received from the surrounding environment. On the other hand, the child's condition such as age, level of understanding of the disease, experience of undergoing medical procedures, and the emotional condition of the child also affect how the child responds to the communication provided by the parents. Other factors such as the frequency of treatment, the hospital environment, and interactions with health workers can also affect the dynamics of communication in the family. Therefore, these factors are important to study because they can determine the success of parental communication in building the mental resilience of children with thalassaemia.
The available literature examines the quality of life of family support or children's psychology in general, but in-depth studies on how parental communication shapes children's mental resilience, especially those with thalassemia, are still quite limited. This study aims to explore how parental communication in building the mental resilience of children with thalassemia in the hope that it can be an evidence-based reference and recommendation for health workers, parents and related parties in supporting the psychosocial development of children with chronic diseases - especially sustainable thalassaemia.

RESEARCH METHODOLOGY

In this study, the author uses a qualitative research method approach. Qualitative research is research with the aim of understanding in depth about a phenomenon or condition through the results of the collection of field data that is original, descriptive, and analyzed inductively, with an emphasis on meaning and process rather than on generalization (Raihan, 2017).

RESULTS AND DISCUSSION

Parental Communication in Building Mental Resilience for Children with Thalassemia

Providing Understanding of Children's Diseases from an Early Age

The findings of the study show that the process of providing understanding about Thalassemia disease from an early age is one of the effective communication patterns in building mental resilience and self-acceptance for the child. Communication carried out by parents repeatedly and continuously helps children understand their health conditions and the reasons why they should undergo treatment regularly. Thus, the researcher considers that providing understanding from an early age to children is an important step so that children are able to understand the condition and show better mental resilience in the face of long-term treatment.

Providing emotional support through motivational messages

The findings of this study see that words of encouragement given by parents not only serve as support, but also as a means to calm children's emotional states when facing fear, sadness, or boredom due to repeated treatment processes. Through this communication, parents try to instill confidence in the child that he is able to face the conditions he is experiencing and build mental resilience in him during the treatment process.
In addition, positive reinforcement provided by parents consistently, such as calling children strong, patient, and smart individuals, indirectly helps form a positive self-concept in children. The physical touch given also shows the existence of emotional closeness that can increase the child's sense of security and comfort. According to researchers, parental communication carried out in this way is quite effective communication in helping children manage negative feelings that arise due to their illness. This support not only helps calm the child in certain situations, but also contributes to building mental resilience aimed at the child's ability to continue undergoing treatment and accept his condition with confidence.

Building a Communication Approach Tailored to Children's Conditions

The findings of the study show that heart-to-heart communication carried out by parents is not just a way to convey a message, but is a communication strategy that shows parental awareness to adjust the communication approach. Parents understand that children not only need an explanation about their illness, but also a sense of security and comfort when communicating. Therefore, parents try to build a calm atmosphere, choose the right time to interact, and prioritize a warm approach so that the message conveyed can be well received. This communication approach shows the ability of parents to carry out their role as communicators who are sensitive to the child's condition.
The findings of the study show that parents who adjust communication by looking at the child's mood not only act as a messenger, but also as communicators who are able to read situations before interacting. Parents understand that communication is not only determined by the content of the message, but also by the readiness of the recipient of the message. Therefore, choosing the right time to speak is a form of communication approach that is carried out so that messages about illness and treatment can be received without causing rejection or pressure. These findings explain that parents' ability to adjust communication approaches is one of the factors that support effective communication.

Building Communication Openness through Responses to Children's Experiences

The findings of the study show that giving children space to tell stories is a form of communication that shows that parents do not dominate the communication process, but build two-way interactions. Parents realize that the right response can only be given if they first understand what the child really feels. Therefore, the listening attitude of parents is an important part of the communication process, because it helps parents avoid misunderstandings and make decisions that are more in line with the child's circumstances. These findings show that open communication is seen from how parents provide space and time for children to talk about how they feel.

Parents' Efforts in Overcoming Barriers to Communication with Children

Self-Evaluation and Emotional Control by Parents

These findings found that the way parents evaluate themselves and control their emotions before communicating shows an awareness of their responsibilities as the main communicators in the family. The ability of parents to reflect on themselves and control emotions is one of the important forms of communication maturity for children. Through this, parents can maintain the quality of interaction with children so that the ongoing communication process remains of positive value, especially in the mental formation of children with Thalassemia.

Engaging Support from Health Workers

This finding results that parents' decision to involve health workers does not show inability to carry out their role as parents, but rather shows an awareness of the limits of their knowledge. Parents choose not to provide information that they do not understand so as not to cause misunderstandings to children. This shows that parents are able to evaluate their capacity as communicators and make decisions to build collaborative communication with health workers. Thus, communication barriers stemming from limited knowledge can be overcome properly and the information received by children will also remain accurate.

CONCLUSION

The results of the study show that communication carried out by parents plays an important role in building the mental resilience of children with Thalassaemia. Communication is not only a means of conveying information about illness, but also a form of emotional assistance that helps children understand their condition, accept the disease experienced, manage emotions, and still have the spirit to undergo long-term treatment. Communication carried out by parents includes providing an understanding of diseases from an early age in language that is easy for children to understand, providing emotional support through motivational messages, building communication approaches that are tailored to the child's conditions and needs, and creating open communication by providing space for children to share their feelings before parents respond. Through warm, consistent, and empathetic communication, it is able to create a positive relationship between parents and children so as to support the formation of children's mental resilience in facing their illnesses. This is in accordance with the Theory of Symbolic Interaction which shows that parents have interpreted their role as the main companion who is responsible for helping children understand Thalassemia.

The results showed that although parents faced various communication barriers such as economic pressure, limited knowledge about illnesses, physical exhaustion, and emotional conditions due to the long-term treatment process, these barriers did not cause communication with children to be cut off. On the contrary, parents try to maintain the quality of communication through self-evaluation, emotional control before communicating with children, and involving health workers when experiencing limitations in explaining the condition of the disease to the child. These various efforts show that parents try to maintain positive, supportive, and effective communication so that children continue to receive the assistance they need during treatment.

SUGGESTIONS

For parents of children with Thalassemia, it is expected to maintain open, warm, and consistent communication with children through providing an understanding of the disease from an early age. In addition, parents are advised to continue to provide support, listen to their children's experiences, and adjust the way they communicate with children so that children feel safe, valued, and able to build mental resilience during treatment.

Health workers are advised to be communication companions for parents to explain the condition of the disease to the child when parents experience limited knowledge so that the information received by the child does not cause misunderstandings.

The community with Thalassemia is expected to be able to organize educational programs regarding parent-child communication, such as how to provide emotional support, build open communication, and manage the emotions of the elderly while accompanying their children to undergo treatment.

The next study is recommended to examine communication in families with Thalassemia by involving the perspective of children with Thalassemia so that a more complete picture of the communication process that occurs between parents and children is obtained.

Further research is recommended to involve other informants, such as health workers or other family members to obtain a more diverse perspective on communication and assistance for children with Thalassaemia.

Further research is expected to use other communication theories so that it can provide a different perspective in explaining the communication process of parents in building children's mental resilience.

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