Speech Act Analysis of the Formality Scale of Digestive Surgeon Specialist Doctors to Patients

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Abstract: In this study, the formality scale speaking behaviors of digestive surgeons to patients were explained. Using reflective and descriptive notes to gather data for this research. To evaluate whether the utterances were included in the speech act coding that characterizes the formality scale, the researcher conducted a heuristic analysis of the data. The research data is spoken conversational language between physicians and patients at Abdul Moeloek Hospital in Bandar Lampung that depicts the degree of formality (formal and informal) as a setting for creating relationships.

Keywords: discourse analysis, formality scale, speech acts.

▪ **INTRODUCTION**

Language politeness in Indonesia is greatly influenced by local language and culture, which helps develop superior character (Lestari & Prayitno, 2016). According to linguistic facts, regional language entities and their culture have an impact on how politely Indonesian is spoken (Hestiyana, 2018). Differences in context also influence how language is used (Devianty, 2017). Wijana (in Ainin & Rokhmansyah, 2019) matters that discuss meaning in a context are a pragmatic study or discourse analysis (speech).

Pragmatics which includes discussions about speech acts that analyze language by considering non-linguistic rules, or what is known as context, is different from pure linguistics such as morphology, syntax, phonology and semantics which tend to limit its study (Baan, 2021). Nababan (in Yuliana et al., 2013) adds certain elements known as pragmatics in an effort to make language skills a true reality.

In his book How to Do Things with Words, John Langshaw Austin put forward a theory of language use known as speech acts. One of the leading philosophers of the Oxford School of Ordinary Language Philosophy is Austin. His student, Searle, then developed this idea and eventually dominated the study of language use in relation to pragmatics (Saifudin, 2019).

Speech acts occur when people communicate through words (Hardiati, 2018). A speech community uses language as a set of symbols in the form of arbitrary sounds to collaborate, communicate and express who they are (Machmud, 2016). A speaker's ability to use language in certain situations has an impact on whether or not a speech act continues (Fatmayanti, 2017). The aim or purpose of activities in speech can be seen in speech acts (Purba, 2011).

It is clear that there is contact between the speaker and the speech partner throughout the conversation as a type of linguistic communication (Afifulloh, 2018). Brown and Levinon's perspective (in Cahaya, 2016), which underlines that for different speech acts, when two speaking people interact, various types of problems arise for both the speaker and the speech partner regarding how the speech act is realized.

Speech acts are not only limited to speaking activities but also have a basis for anything in the speech, thus speech acts can determine whether the speaker intends to utter speech that intentionally offends the speech partner or not (Rosyida & Siroj, 2021). Austin stated something, then went into further detail about several types of speech acts, including locutions, illocutions and perlocutions on various scales (Suyitno, 2006). As a result, the speech acts used in speech are determined by the situation and context of the communication taking place.

In communication, spoken language is used more often than written language. There are two categories of situations in communication according to the speech formality scale: formal situations and informal situations (Syafruddin, 2018). Regulations on the use of formal language encourage speakers to use formal language. On the other hand, participants or speakers are allowed to use different nuances of the intended language in discussions in an informal setting (Isbowo et al., 2014).

According to Sachiko's idea (in Saifudin, 2005) politeness is seen as a sense of separation of the speaker. Here, the goal of distance is recognized as a key idea for organizing civilized human behavior. Speaker distance is driven by three factors: (1) social distance; (2) formality; and (3) psychological distance. When someone feels very careful about the speaker, distance is perceived as the biggest problem, and when someone feels indifferent, distance is considered the least problem.

If the relationship between the two parties in a speech act is distant, then the language used will be more formal and stiff. On the other hand, if the relationship between the two parties in a speech act is close, then the language used will be less formal or relaxed (Abid, 2019). This of course applies depending on the context and situation that occurs. Thus, researchers want to examine the speech acts related to the formality scale of digestive surgeons towards patients.

Research questions
1. What are the formality scale speech acts in formal situations spoken by digestive surgeons to patients?
2. What are the speech acts on the scale of formality in informal situations spoken by digestive surgeons to patients?

▪ **METHOD**

Use reflective and descriptive notes to collect data for this research. Descriptive notes are notes about what the researcher heard, experienced and saw. Reflective notes function as a source for the next stage of data collection plans by containing the researcher's observations, comments, opinions and interpretations of the findings (Fadli, 2021).

To find out whether the speech is characterized by a scale of formality, the researcher carried out heuristic data analysis. This research data is the language of spoken conversations between doctors and patients at Abdul Moeloek Hospital Bandar Lampung which describes the scale of formality (formal and informal) as a background for creating relationships.

▪ **RESULT AND DISCUSSION**

Social characteristics of the formality scale were found in speech based on a study of speech acts between doctors and patients at Abdul Moeloek Hospital, Bandar

Lampung. The speech act data below illustrates speech events against the background of the formality scale during interaction.

Speech Event 1
Doctor: "What is your complaint?"
Patient: "Bloody bowel movements, Doc."
Doctor: "How long have you been defecating? bloody?"
Patient: "Approximately a month, Doc."
Doctor: "Please get checked, Sus! Who I know there's a lump."
Nurse: "Yes, Doc!" (wearing gloves latex then check patient)
Nurse: "There's a lump, Doc."
Patient: "So what's wrong with me, Doc?"
Doctor: "Well, it's probably you suffering from internal hemorrhoids. But it could be polyps or other."
Patient: "Do I need surgery?"
Doctor: "Not yet about that certainly. We must examination continued in the operating room."
Patient: "Why do you have to stay in the room? operation, Doc?"
Doctor: "Equipment in the operating room more complete. All followed up at once anesthesia."

Event 1 occurred when the researcher, who at that time was a patient of a digestive surgeon, wanted to carry out an examination regarding the complaint he was experiencing. In this speech event, the doctor started the conversation by asking the patient, "What is your complaint?" The speaker uses formal language to express questions to the interlocutor. The speech event occurred in the doctor's examination room where not only the nurse and the patient were in it, but there were Several students who graduated from the Faculty of Medicine, University of Lampung are currently undergoing a co-assistant or co-assistant period so that the speaker chooses the use of a formal scale of formal language because their communication is known to other people who have the status of student speakers.

Story Event 2
Doctor: "Calm... Smile... That's it cheerful now, aren't you?" (walks closer to the bed the patient's room occupy)
Patient: "Hehe... Yes, Doc. Period should I scowl?"
Doctor: "Eh, why are you still in here? Go home! Do you want stay here all the time? A year? Two years?"
Patient: "N...no, Doc. I I want to go home but I'm waiting doctor first..."

Event 2 occurred when the patient had undergone a surgical procedure and was hospitalized for 4 days and 3 nights. In this speech incident, the doctor started the conversation by asking the patient, "Happy... Smiling... Are you cheerful now?" Speakers use everyday (informal) language to communicate questions to speech partners. The speech event occurred in the patient's inpatient room, which was only shared with the speaker (doctor), the doctor's assistant, and the patient, so the speaker chose the use of informal language formality scale speech because their communication situation was different from previous speech events with a fairly close relationship scale. . Because they had talked a lot during the operation, the utterances in speech act 2 were different because

the two became quite close. Therefore, in this speech incident, a conversation occurred using language that tended to be more flexible.

▪ **CONCLUSION**

The results of research on the scale of formality in speech acts are two types, namely formal and informal, based on research on the speech acts of digestive surgeons to patients. The doctor-patient speech act in speech event 1 has a high scale of formality in a formal context, with a fairly distant social relationship scale and involving more people. Meanwhile, speech event 2 between a doctor and a patient with a fairly close relationship was observed to have speech acts with a low formality scale in an informal context.

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