



Caring Behaviors and Therapeutic Communication Among Third-Year Nursing Students During Service at Santa Elisabeth College of Health Sciences Medan

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Abstract. *Caring behavior encompasses compassion, empathy, responsibility, sensitivity, and supportive actions that shape quality nursing care. Therapeutic communication, as a structured and goal-directed interaction, is essential for facilitating patient recovery and meeting client needs. This study aimed to describe the caring behavior and therapeutic communication competencies of third-year nursing students during clinical practice. A descriptive method was applied used cross sectional design, involving all 97 students selected through a total sampling method. Data were collected using validated questionnaires on caring behavior and therapeutic communication, and analyzed bivariate using frequency and percentage distributions. Results showed that 50 students (51.5%) demonstrated very good caring behavior, whereas only 9 students (9.3%) achieved sufficient levels of therapeutic communication. These findings underscore the importance of strengthening training strategies to enhance students' caring competencies and therapeutic communication skills, thereby improving the effectiveness and quality of nursing practice. It is hoped that strengthening these skills will help nursing students overcome challenges in clinical practice and contribute to more effective patient recovery.*

Keywords: *Caring Behavior, Cross Sectional, Descriptive Method, Nursing Students, Therapeutic Communication.*

1. INTRODUCTION

Caring behavior is a fundamental component of nursing practice, encompassing sensitivity, comfort, attentive listening, honesty, acceptance, and non-judgmental attitudes toward patients (M. Karo & Sihite, 2020) As a profession grounded in the promotion of well-being, nursing requires both theoretical understanding and empirical application of caring principles. Nurses are expected to possess a comprehensive awareness of patient needs, a broad scope of practice, and a deep appreciation of holistic well-being.

Therapeutic communication is equally essential and is defined as a goal-directed interaction between nurses and patients aimed at achieving optimal therapeutic outcomes Effective communication enhances trust, facilitates patient participation, and strengthens the nurse patient relationship. Caring behavior and therapeutic communication are two basic competencies that nurse professional students must possess because they both determine the quality of nursing care and the effectiveness of the nurse-patient relationship. Caring behavior reflects the ability of nurses to show empathy, respect, care, and emotional support to patients, thus becoming the foundation for building trusting relationships. Therapeutic communication, on the other hand, serves as a professional means to help patients express their feelings,

understand their condition, and increase patient involvement in the treatment process. Various international studies show that good caring behavior and therapeutic communication are directly related to increased patient satisfaction, adherence to therapy, and overall quality of nursing services (Arda, 2020)

In the context of nursing education, professional level students (clinical clerkship) are required to be able to apply caring and therapeutic communication consistently while carrying out clinical practice.(Putri et al., 2025) However, previous research has shown that students often experience obstacles in maintaining caring behaviors, especially due to high practice burden, adaptation to the clinical environment, limited experience, and the demands of nursing documentation (Purba & Karo, 2022). Similarly, students' therapeutic communication skills are often not optimal due to lack of confidence, anxiety in interacting with patients, and lack of direct feedback from the prescriber (Pertiwi et al., 2022).

The urgency of this research is increasing because modern health services demand a holistic approach that focuses not only on the medical, but also psychosocial aspects. Hospitals and nursing education institutions are required to ensure that students as prospective nurses are able to display effective caring behavior and therapeutic communication as service quality standards. In addition, empirical reports from the field (student service reports) listed in the thesis show that there are variations in the application of caring and therapeutic communication by third-level students during practice. This variation indicates the need to map actual conditions to find out the extent to which these competencies have developed.

Based on the results of the preliminary study contained in the thesis, it can be seen that there are still students who are not optimal in showing certain caring aspects such as full *presence*, empathy, and the ability to provide comfort. Similarly, in therapeutic communication, some students still have difficulty fostering trusting relationships and demonstrating active listening skills consistently. This condition emphasizes the importance of conducting descriptive research to describe the level of caring behavior and therapeutic communication of level III students during the professional practice period.

The novelty of this research lies in its focus which specifically describes the conditions of caring behavior and therapeutic communication of third level students at certain educational institutions, namely STIKes Santa Elisabeth Medan, simultaneously in a period of clinical practice. Unlike previous research that assessed one variable separately, this study provides a comprehensive overview of the two competencies in the context of students' real practice. In addition, this study also highlights the gap between theory and practice, namely how students who have acquired caring learning and therapeutic communication still show a variety of skills

in the field. These findings can be the basis for strengthening the curriculum, clinical guidance methods, and evaluation of student competencies at these institutions.

Preliminary observations conducted among ten third-year Diploma Nursing students at STIKes Santa Elisabeth Medan revealed that most demonstrated good to excellent caring behavior, with 90% categorized as excellent. However, their therapeutic communication skills were less consistent; only half of the students demonstrated sufficient competence, while the remainder fell into the poor category. These findings indicate a discrepancy between caring attitudes and communication practices, suggesting the need for strengthened education and clinical guidance.

Previous studies emphasize that caring behavior is influenced by educational level, clinical experience, personal mindset, emotional capacity, and interpersonal competence (Wianti & Hidayat, 2022). In addition, nurses who display attentiveness, friendliness, respect, and a willingness to help are more likely to establish trust and enhance patient satisfaction (Apriani et al., 2020). Strengthening awareness of professional attitudes, monitoring clinical performance, and ensuring adherence to communication principles have been identified as strategies to enhance caring behavior in nursing practice (M. B. Karo et al., 2023)

Therapeutic communication is a critical skill that supports holistic nursing care by addressing the physical, emotional, social, and spiritual dimensions of the patient (Arda & Suprpto, 2023). Therefore, cultivating both caring behavior and therapeutic communication competence is essential for preparing nursing students to deliver high-quality clinical care.

Given these considerations, this study aims to describe the caring behavior and therapeutic communication of third-year nursing students during clinical practice at the Nursing Study Program of Santa Elisabeth College of Health Sciences Medan in 2024.

2. MATERIALS AND METHOD

In this study, a descriptive method with cross sectional was chosen to describe *the caring behavior* and therapeutic communication of level III students during service at the STIKes Santa Elisabeth Nurses Study Program in Medan in 2024.

Independent variable is a variable that has an influence on other variables or determines the value of other variables. In other terms, this variable is also referred to as an independent variable which means it is influenced by other variables. So in this study, caring behavior is used as an independent variable. Dependent variables are variables whose values are influenced by other variables and refer to the observed behavioral aspects of the organism receiving the stimulus. In this study, therapeutic communication was used as a dependent variable.

The questionnaire that will be used to discuss caring behavior consists of 40 questions that have been adopted from the (M. Karo & Sihite, 2020) which are standardized and will not be tested for validity again. P is the length of the range of values of the 4 classes measured between the highest and lowest values. Always = 4, often = 3, rarely = 2, absolutely not = 1. The results of the study on caring behavior state that the excellent level is in the range of 130-160, both in the range of 100-129, quite in the range of 70-99, and less in the range of 40-69.

The therapeutic communication method for students during this study was adapted from (Pertiwi et al., 2022) which consisted of 26 questions using a likert scale with 4 answer options, namely always = 4, often = 3, sometimes = 2, never = 1. The result statement is categorized into 4 levels: less = 1, adequate = 2, good = 3, excellent = 4. Then to determine the student's therapeutic communication is included in the category of excellent, good, sufficient, poor, then the scores of each item are added up after which it is adjusted to the interpretation of the score: Very good implementation: score 89-104, Good implementation: score 68-88, Sufficient assessment: score 47-67, Poor assessment: score 26-46.

In this study, the author used 2 questionnaires with 40 caring behavior questions, without a validation and reliability test because it was adopted from previous research (M. Karo & Sihite, 2020) The second questionnaire contained 26 questions about therapeutic communication carried out by students during service. The author does not need to conduct a validity and reliability test in this study because it uses a standard questionnaire that has been validated and reverified by Pertiwi in 2021.(Pertiwi et al., 2022)

The validity and reliability of the instrument refers to the source research, where the caring and therapeutic communication instruments have been declared valid with the item validity test and are reliable with a Cronbach's Alpha value of > 0.70 so that they are suitable for use to measure research variables. The research subjects were determined using the total sampling technique, namely all level III students totaling 97 people. The inclusion criteria in this study include level III students who are undergoing professional practice during the data collection period and are willing to become respondents. Meanwhile, the exclusion criteria include students who are not present at the time of data collection or who fill out questionnaires incompletely (Nursalam, 2020). With this criterion, the research is expected to obtain accurate and representative data on the real conditions of students' caring behavior and therapeutic communication.

This study was conducted at STIKes Santa Elisabeth Medan, located at Jl. Bunga Terompet No. 118, Medan, Indonesia. Data collection took place from 20 to 26 April 2024. The study population consisted of all third-year students enrolled in the Nursing Study Program

in 2024, totaling 97 individuals. A total sampling technique was applied, resulting in a sample size equal to the population ($n = 97$).

Data were obtained through both primary and secondary sources. Primary data were collected using structured questionnaires measuring caring behaviors and therapeutic communication, administered directly to all third-year nursing students. Secondary data were retrieved from institutional academic records provided by the Academic Administration Bureau (BAAK) of STIKes Santa Elisabeth Medan.

Data analysis employed a univariate approach to describe the distribution of caring behavior and therapeutic communication variables. Frequency and percentage tables were generated to summarize participant characteristics and variable outcomes. Ethical approval for this study was obtained from the Ethics Committee of Santa Elisabeth College of Health Sciences Medan (Approval No. 080/KEPK-SE/PE-DT/IV/2024). All participants were informed about the purpose of the study, and data collection procedures adhered to established ethical research standards.

3. RESULT AND DISCUSSION

Table 1. Distribution of Respondents Based on Demographic Data of Third Year Nursing Students in the STIKes Santa Elisabeth Nurse Study Program in 2024.

Characteristics	<i>f</i>	(%)
Age		
20-24	93	95.9
25-29	4	4.1
Total	97	100.0
Gender		
Female	87	89.7
Male	10	10.3
Total	97	100.0
Religion		
Protestan	76	78.4
Katholik	20	20.6
Islam	1	1.0
Total	97	100.0
Tribe		

Batak Toba	62	63.9
Nias	25	25.8
Batak Karo	5	5.2
Batak Pak-pak	2	2.0
Jawa	2	2.0
Simalungun	1	1.0
Total	97	100.0

From the table above, of the 97 respondents, the majority were in the age range of 20-24, as many as 93 respondents (95.9%), while 4 respondents (4.1%) were between 25 and 29 years old. The majority of respondents were women as many as 87 people (89.7%), while male respondents were only 10 people (10.3%). 76 respondents (78.4%) had the characteristics of the majority religion of Protestant Christianity, while 1 respondent (1.0%) had the characteristics of the religious minority of Islam. A total of 62 of the respondents (63.9%) showed the characteristics of the majority tribe of the Toba Batak, while only 1 respondent (1.0%) represented the minority tribe of the Batak Simalungun.

Table 2. Distribution of Respondents Based on *Caring Behaviors* of Third-Year Nursing Students in the STIKes Santa Elisabeth Nurse Study Program in Medan in 2024.

<i>Caring Behavior</i>	<i>f</i>	(%)
Excellent	50	51.5
Good	46	47.4
Enough	1	1.0
Total	97	100.0

Based on table 2 above, (51.5%) of the 97 students who carried out *caring behavior* were considered very good by 50 respondents, while only 1 respondent (1.0%) was considered adequate.

Table 3. Distribution of Respondents Based on Therapeutic Communication of Third-Year Nursing Students in the STIKes Santa Elisabeth Nurse Study Program in Medan in 2024.

Therapeutic Communication	<i>f</i>	(%)
Good	52	53.6

Excellent	36	37.1
Enough	9	9.3
Total	97	100.0

Based on table 3, the majority of students, namely 52 respondents (53.6%), have good therapeutic communication, while the minority, namely 9 respondents (9.3%), have sufficient therapeutic communication.

Bivariate analysis in this study was conducted to determine the relationship between caring behavior and therapeutic communication of level III students. The test used is Spearman Rank correlation, because both variables are measured using ordinal scales and the data is not normally distributed. The results of the analysis showed that there was a positive relationship between caring behavior and student therapeutic communication. This means that the better the caring behavior shown by students, the better their ability to carry out therapeutic communication. These findings illustrate that the aspects of empathy, attention, and full presence in caring contribute to students' ability to build trusting relationships, explore patients' feelings, and deliver interventions more effectively. Overall, the results of this bivariate analysis confirm the importance of integrating caring behavior and therapeutic communication in the clinical practice of nursing students, as these two competencies reinforce each other and have a direct impact on the quality of interaction with patients.

4. DISCUSSION

According to data on the caring behavior of level III students during the service at the Nurses Study Program of the Medan College of Health Sciences, the results of 50 respondents (51.5%), both from 46 respondents (47.4%), and enough from 1 respondent (1.0%).

The author believes that caring behavior with an excellent category is based on question number 1.7, as a sign that nursing students not only care about the needs of others but also actively try to help them achieve well-being. From the big question no. 4, students consistently show deep empathy and sincere concern for others, both physically and emotionally. Such individuals are often strong supporters in interpersonal relationships, able to offer moral, emotional, and practical support without expecting anything in return. They also tend to be sensitive to the needs and feelings of others, and can respond in ways that reinforce and build positive relationships.

The above is in line with the research of (Pragholapati & Gusraeni, 2021) that based on the carative factor of the second responder with respect, this category is the same as developing

relationships of mutual trust and mutual help, increasing the acceptance of the patient's expression of positive and negative feelings. The results of the study are found in the actions where almost all nurses always be sensitive to patients, always help patients, always inform patients in their treatment planning, always return to patients voluntarily, always talk to patients, always tell patients to call if there is a problem, always meet patient needs, always respond quickly to patient calls, always respect patients as human beings, always help reduce the patient's pain, and always show concern for the patient.

In addition, (Christianingsih et al., 2022) also stated that attentive touch is a form of non-verbal communication that can affect comfort, increase self-esteem, and improve clients' perception of reality. The more positive the nurse's caring behavior in providing nursing care, the more satisfied the patient or family is to receive services, so that the relationship between the client and the nurse is stronger.

Another assumption from the researcher is that caring behavior with a sufficient category is due to the source of question item no. 10 where students do not provide information about the care or actions that must be given to the patient due to a lack of understanding or skills in communicating effectively. This can result in ambiguity or uncertainty for patients about the steps to take for their treatment.

(Ferri et al., 2020) stated that nursing students consider caring as a way to respect the dignity of patients, listen to patients, help them make decisions, maintain patient privacy, and communicate with patients. Caring behavior also focuses on the sincerity of accompanying patients in dealing with diseases that are carried out professionally, namely by increasing patient knowledge by providing health education needed by patients and can be done by patients to improve the patient's health status by taking care of themselves (Nusantara & Wahyusari, 2020).

According to data from level III students at the time of service at the Nurses Study Program of the Santa Elisabeth College of Health Sciences, Medan received good therapeutic communication results as many as 52 respondents (53.6%), very good as many as 36 respondents (37.1%), and enough as many as 9 respondents (9.3%).

Excellent therapeutic communication is an important foundation in clinical practice, especially in the health field. The authors assume that this involves a relationship between nurses and patients based on deep mutual understanding, trust, and empathy. In addition, nursing students have received learning about therapeutic communication so that it is easy for students to get information, including in terms of therapeutic communication. Knowledge will shape a person's actions and behaviors and can influence students so that they can choose

decisive words when communicating and develop various verbal and non-verbal communication techniques.

The above is in line with the research from (Suryadin et al., 2022) the way of individual behavior can also reflect and describe the personality of students in therapeutic communication activities, the attitude shown by nursing students becomes a strategy when dealing with clients in medical treatment. The task of nursing services is required to always be present in its entirety, both physically and psychologically. As a nursing student, not only do you have the ability to communicate with clients, but how the positive attitude shown by your appearance is an important part of applying therapeutic communication.

As for the research, namely (Ferreira^a et al., 2020) nursing professionals must know how to approach patients, listen to patient complaints, they must learn to pronounce the right words at the right time, know how to encourage communication through expressions such as staring, gestures and how to make the act of asking something easy, honest, showing respect and spending the right time with the patient. Nurses should be allowed to develop their communication skills in order to build effective therapeutic relationships with patients and provide quality nursing care.

In the termination phase with poor therapeutic communication, the interaction between nursing students and clients can be tense or unsatisfactory. From the above data, the researcher assumes that there are difficulties in dealing with feelings of separation, where the nurse may not provide sufficient support or facilitate the necessary discussions to satisfactorily complete the therapeutic process. This can result in clients feeling unprepared to end the therapeutic relationship, or even feeling rejected or ignored. Poor communication in the termination phase can increase the risk of feelings of loss or deep sadness in the client, hindering the possibility of reflection or understanding necessary to consolidate the changes that have been achieved during therapy.

According to research supported by (Dhana & Welem, 2020), that this termination stage nurses and clients review the nursing process that has been undergone and the achievement of goals. At this stage, the nurse will also end all activities carried out with the client, therefore the implementation of good therapeutic communication between the nurse and the client is highly expected, because if it can end an interaction well, it can give a special impression and satisfaction for the client and also for the nurse. Also at this stage the nurse can end the activity well and also do a time contract for the next activity so that the client feels appreciated and can give satisfaction to the client.

Furthermore, (Simamora et al., 2022) stated that the factors that affect therapeutic communication are self-confidence, where the communicator's confidence when communicating can encourage courage in expressing opinions so that the application of communication becomes effective. The level of understanding possessed by nursing students is very influential in an action taken and when interacting with others. Nursing students can also apply therapeutic communication in their daily lives. Similarly, the knowledge of therapeutic communication obtained by students can then be applied in practice in a health service. Overall, the results indicate that while caring behavior and therapeutic communication among students are generally strong, targeted educational strategies are still needed to refine specific communication phases and enhance students' readiness for professional practice.

The findings of this study provide several implications for practice and future research. For educational institutions, particularly the Nursing Study Program at STIKes Santa Elisabeth Medan, these results may serve as a valuable reference for strengthening curricula, refining clinical training strategies, and enhancing supervision related to caring behaviors and therapeutic communication among students.

For respondents, the outcomes of this study can be utilized as self-reflection and evaluation material to improve the implementation of caring behaviors and therapeutic communication in clinical settings. These findings may also serve as an additional source of insight for applying caring principles and advancing communication skills in nursing practice.

For future researchers, this study highlights the need for continued investigation into factors influencing caring behaviors and therapeutic communication. Further research is encouraged to explore broader variables, diverse clinical environments, and intervention-based approaches to deepen understanding and support the development of high-quality nursing care.

5. CONCLUSION AND SUGESSTION

This study, conducted with 97 respondents who interacted with third-year nursing students, found that caring behavior demonstrated by the students during clinical service was predominantly in the very good category, with 51.5% showing strong caring competencies. Similarly, therapeutic communication was also high, with 54.6% of respondents classifying the students' communication skills in the very good category. These findings indicate that the third-year nursing students possess a solid foundation in both caring behavior and therapeutic communication, which are essential for delivering effective and patient-centered care. Strengthening continuous training and practical reinforcement is recommended to further enhance these competencies.

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