

Description Of Schizophrenic Patients In Controlling Hallucinations In Mental Hospitals In Indonesia

Livana PH^{1*}, Sri Mulyani¹, Titik Suerni², Yulia Ardianti³

¹Sekolah Tinggi Ilmu Kesehatan Kendal, Jalan Laut 31A Kendal, Central Java 51311, Indonesia

²RSJD Dr. Amino Gondohutomo Provinsi Jawa Tengah, Jl. Brigjen Sudiarto No.347, Gemah, Pedurungan, Semarang, Central Java 50611, Indonesia

³Universitas Muhammadiyah Kendal Batang, Jl. Pemuda No.42-46, Kersan, Pegulon, Kendal, Central Java 51313, Indonesia

*livana.ph@gmail.com

ABSTRACT

Nowadays, many people feel that they are not accepted or failed in an environment, is unable to control his emotions so that the client feels disturbed and changes behavior marked by the appearance of delusions, thought process disorders and hallucinations. The purpose of the study was to determine the patient's ability to control hallucinations. This research design is a descriptive study research, quantitative research type. The sample of this study amounted to 27 respondents with a purposive sampling technique. The measuring instrumen uses an hallucination control questionnaire that is valid and reliable. Univariate analysis data using frequency distribution. The results showed that the majority of patients were best able to control hallucinations by rebuking them.

Keywords: ability; hallucinations; patient

INTRODUCTION

Mental disorder is a condition in which the client feels that he is not accepted or failed in an environment, is unable to control his emotions so that the client feels disturbed and changes behavior marked by the appearance of delusions, thought process disorders and hallucinations (Tampang, Safaat, & Asmy, 2021). Severe mental disorders are usually known as psychosis and one example is schizophrenia, schizophrenia is a functional psychological form with a major disturbance in a thought process which if not treated seriously will result in psychotic behavior (Stuart, 2016). Hallucinations are a sensory perception disorder in the absence of an external stimulus that can cover all senses which can occur when a person's consciousness is full or good (Yosep, 2011). Individuals who experience hallucinations often assume that the source of the causes of hallucinations comes from their environment while in fact it arises due to various factors including loneliness, fear of being left behind by loved ones, anger, thoughts and feelings themselves (Andika, 2018).

Based on WHO data in 2019, there are data that 35 million people are affected by depression, 47 million people are dementia, 60 million people are bipolar and 21 million people are affected by schizophrenia (WHO, 2019). The Central Java City Health Office (Dinkes, 2013) said that the incidence of people with mental disorders in Central Java ranged from 3,300 to 9,300 people. Data from RSJD Dr. Amino Gondohutomo Semarang obtained medical recap data which showed that there were quite varied cases where hallucinations were the most common nursing problem in patients with mental disorders (Semarang, 2016). Based on research conducted by Diana (2017) on 10 respondents, it was found that as many as 3 respondents had good knowledge regarding how to control auditory hallucinations, 5 respondents had poor knowledge regarding how to control hallucinations and the remaining 2 respondents had sufficient knowledge about how to control hallucinations. Based on the existing phenomena and the description in RSJD Dr. Amino Gondohutomo, Central Java Province, researchers are interested in conducting research related to the description of

schizophrenia patients in controlling hallucinations to determine the patient's ability to control hallucinations.

METHOD

This research uses descriptive study method with quantitative research type. The sampling technique of this study used purposive sampling with a sample of 27 respondents with inclusion criteria of patients with hallucinatory mental disorders, cooperative hallucinatory patients and hallucinatory patients who were willing to become respondents. The data collection tool uses a questionnaire in the form of closed-ended hallucinatory control questions belonging to Islamil (Ismail, 2017) which have been tested for validity and reliability so that they are said to be valid and reliable. The research data were analyzed by univariate analysis using the frequency distribution.

RESULTS

Table 1.
Respondent's age (n=27)

Mean	Median	Standar Deviasi	Minimum	Maximum
25,33	24	5,378	16	36

Table 1 shows that the mean age of the patients was 25 years.

Table 2.
Characteristics of respondents gender, education and marital status (n=27)

Variabel	f	%
Gender		
Man	27	100,0
Woman	0	0
Education		
SD	3	11,1
Junior high school	12	44,4
Senior high school	12	44,4
Marital status		
Married	2	7,4
Not married yet	25	92,6

Table 2 shows that all respondents are male, junior and senior high school education status and the majority are unmarried.

Table 3.
Ability to Control Hallucinations (n=27)

Scribbling Ability	f	%
Capable	21	77,8
Not capable	6	22,2
Conversational Ability		
Capable	19	70,4
Not capable	8	29,6
Ability to Create Daily Activities		
Capable	8	29,6
Not capable	19	70,4

Table 3 shows that most patients' ability to control hallucinations is by rebuking.

DISCUSSION

The results of this study indicate that patients from 27 respondents were on average 25 years old, the youngest was 16 years old and the oldest was 36 years old. This study is in line with research conducted by Hidayah (2015) which said that the majority of the age group who were able to control hallucinations were in the age range of 15-49 years with a total of 10 respondents (100%). Another study conducted by Utami and Rahayu (2018) said that the

majority of respondents who were able to control hallucinations were between the ages of 31-35 years as many as 15 respondents (33.3%). This research is also in accordance with the theory carried out by Yosep (2011) which at this stage of adult development results in hallucinations with a similar process where a person's inability to distinguish between stimuli that arise from an internal source of feelings and thoughts and stimulation external.

The results of the research on gender characteristics showed that the majority of respondents were male as many as 27 respondents (100%). This study is in line with research conducted by Hidayah (2015), the majority of respondents who were able to control the level of male hallucinations were 10 respondents (100%). Another similar study conducted by Purba and Utami (2013) said that the majority who experienced hallucinations were men compared to women. A man who experiences a decrease in social interactions, changes in roles and loses a job, is unable to control his emotions so that it makes a person disturbed and changes behavior. The results of research on the characteristics of education, the majority of respondents with junior high and high school education are both 12 respondents. This study is in line with the research conducted by PH, Ruhimat, Sujarwo, Suerni, Kandar and Nugroho (2018) which said that the majority of respondents' education had graduated from junior high school as many as 8 respondents (40%). Education is an ability both inside and outside school that lasts a lifetime where the higher a person's education, the easier it will be for someone to get information, in this case knowledge is very closely related to the higher a person's education, the more that person will forget his knowledge (Notoadmodjo, 2012).). The higher a person's education, the better his awareness in controlling the situation within himself.

The results of the study on the characteristics of the marital status of the majority of respondents were unmarried as many as 25 respondents (92.6%). This result is not in line with the research conducted by Utami and Rahayu (2018) where the majority of respondents who were able to control their hallucinations were married, 33 respondents (73.3%) and 8 respondents (17.8%) unmarried. Someone who is not married they will find it difficult to express the feelings and thoughts that are in him and end up with the emergence of disorders that they are not able to control on their own.

Ability to Control Hallucinations

Rebuke

The results of this study indicate that from 27 respondents the majority of patients were able to rebuke a number of 21 respondents (77.8%). This study is in line with research conducted by Tampang, Safaat and Asmy (2021) which said that nursing actions in the form of giving SP1 hallucinations by rebuking were carried out well by patients and had a good impact on patients.

Another study conducted by Ervina and Hargiana (2018) said that after the patient was given an intervention in treating hallucinations with SP1 rebuking "go and go" while covering his ears, it was concluded that the patient's ability to control hallucinations using this technique was good and the patient was able to apply it to control hallucinations independently. . The principle of management in overcoming a sensory hallucination disorder is by rebuking hallucinations where this action is an effort to control oneself against hallucinations by rejecting when hallucinations appear (dalami, Susilawati, Rochimah, Ketut, & Wiji, 2010).

Talking

The results showed that from 27 respondents 19 respondents (70.4%) said they were able to control hallucinations with the ability to converse. This study is in line with research conducted by Fresa, Rochmawati and Arif (2017) which said that the ability to control hallucinations by conversing was in the good category of 26 respondents (96.3%). Another

study conducted by Wulandari (2019) said that after giving the application of SP2 hallucinations by conversing, patients were able to control their hallucinations in a good category. The results of research conducted by Fresa, Rochmawati and Arifin (2015) said that of 27 respondents with hallucinatory disorders who were given implementation actions in the form of talking, 26 respondents were able to control their hallucinations in a good category and 1 respondent was able to control them in a sufficient category.

Another study conducted by Ervina and Hargiana (2018) said that the technique used by nurses in patients with auditory hallucinations was to teach conversation techniques when hallucinations appeared, by asking a friend or nurse to accompany them in conversation when they heard voices. there is no form and in conclusion the patient can carry out conversational techniques well and is able to control his hallucinations. In accordance with the theory which says that individual therapy by talking will cause a distraction and the focus of the patient's attention will shift from hallucinations to conversations (Yosep, 2011).

Make a Daily Schedule

The results showed that of the 27 respondents the majority of patients were unable to control hallucinations using a daily schedule of 19 respondents (70.4%). Research is inversely proportional to research conducted by Ervina and Hargiana (2018) which states that nurses in their actions to overcome the problem of hallucinations in patients by making a schedule of activities that aim to make clients able to control themselves from their hallucinatory disorders, invite patients to discuss related activities that can be done during are in the hospital and the patient makes a list of activities that can be done while in the hospital. A similar study was also conducted by Alvi (2022) who said that after being given nursing care in the form of making a daily schedule with nurses, patients were able to control hallucinations by carrying out scheduled activities where in doing this it was done by the help of nurses as well so that patients were able to control hallucinations well.

Medication Compliance

The results of this study indicate that the patient's medication adherence in terms of controlling hallucinations was found in the capable category of 8 respondents (29.6%) and 19 respondents (70.4%) unable to comply with taking medication, so the patient had to be taken to the hospital. because his mental relapse. This study is inversely proportional to the research conducted by Alvi (2022) where in this study the patient was able to control his hallucinations by taking medication regularly. These results are in line with research conducted by Ervina and Hargiani (2018) which said the majority of patients who were re-admitted to mental hospitals were due to their non-compliance in taking drugs and in their actions in research patients were given health education related to the importance, benefits, and goals of taking drugs so that in the final conclusion after being given health education the patient becomes aware of the importance of medicine.

CONCLUSION

The ability to control hallucinations in patients found that the majority of patients were best able to control hallucinations by rebuking.

REFERENCES

Alvi, S. D. (2022). Asuhan Keperawatan Pada Pasien Skizofrenia Dengan Masalah Keperawatan Gangguan Persepsi Sensori: Halusinasi Pendengaran Di Rumah Sakit Jiwa Daerah Surakarta. *Karya Ilmiah*, Universitas Muhammadiyah Ponorogo.

- Andika, R. (2018). Dukungan Keluarga Dengan Kemampuan Pasien Mengontrol Halusinasi Pada Penderita Skizofrenia. *Jurnal STIKeseub*, Vol.2, No.3. <http://www.journal.stikeseub.ac.id>.
- Dalami, E., Susilawati, Rochimah, Ketut, R., & Wiji, L. (2010). *Konsep Dasar Keperawatan Kesehatan Jiwa*. Jakarta: Cv Trans Info Media.
- Diana, A. (2017). hubungan pola asuh keluarga dengan kesembuhan pasien skizofreniadi RSJ HB. SA'Ann Padang. *Jurnal Keperawatan*, Vol.2, No.3.
- Dinkes. (2013). *Profil Kesehatan Provinsi Jawa Tengah*. Jawa Tengah: 74.
- Erviana, I., & Hargiana, G. (2018). Aplikasi Asuhan Keperawatan Generalis Dan Psikoreligus Pada Klien Gangguan Sensori Persepsi: Halusinasi Penglihatan dan Pendengaran. *Jurnal Riset Kesehatan Nasional*, Vol.2, No.2. DOI: <https://doi.org/10.37294/jrkn.v2i2.106>.
- Fresa, O., Rochmawati, D. H., & Arif, M. S. (2017). Efektifitas Terapi Individu Bercakap-cakap Dalam Meningkatkan Kemampuan Mengontrol Halusinasi Pada Pasien Halusinasi Pendengaran Di RSJ Dr. Amino Gondohutomo Provinsi Jawa Tengah . *Karya Ilmiah*, <http://ejournal.stikestelogorejo.ac.id/index.php/ilmukeperawatan/article/view/437>.
- Hidayah, A. N. (2015). Pengaruh Terapi Aktivitas Kelompok Stimulasi Persepsi Sensori Terhadap Kemampuan Mengontrol Halusinasi Pada Pasien Halusinasi Di RSJD Dr. Amino Gondohutomo Semarang. *Jurnal Keperawatan*, Vol.8, No.1. 44-55. .
- Notoadmodjo. (2012). *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta.
- PH, L., Ruhimat, I. I., Sujarwo, Suerni, T., Kandar, & Nugroho, A. (2018). Peningkatan Kemampuan Paisein Dalam Mengontrol Halusinasi Melalui Terapi Aktivitas Kelompok Stimulasi Persepsi. *Jurnal Ners Widya Husada*, Vol.5, No.1, 35-40. DOI: <https://doi.org/10.33666/jners.v5i1.328>.
- Purba, N., & Utami. (2013). Pengaruh Terapi Aktivitas Kelompok Stimulasi Persepsi Terhadap Kemampuan Pasien Mengontrol Halusinasi Di Rumah Sakit Jiwa Tampan Provinsi Riau. *Skripsi*.
- Semarang, R. D. (2016). *Data Rekam Medik RSJD*.
- Stuart. (2016). *Keperawatan Kesehatan Jiwa*. Indonesia: Elsever.
- Tampang, D. V., Safaat, H., & Asmy, U. (2021). Studi Literatur Asuhan Keperawatan Jiwa Dengan Masalah Gangguan Persepsi Sensori Halusinasi Pada Pasien Skizofrenia. *Jurnal Lontara Kesehatan*, Vol. 2, No.1. DOI: <https://doi.org/10.22778/lontara.v2i1.31>.
- Utami, R., & Rahayu, P. P. (2018). Hubungan Lama Hari Rawat Dengan Tanda dan Gejala Serta Kemampuan Pasien Dalam Mengontrol Halusinasi. *Jurnal Keperawatan*, Vol.6, No.2, 106-115.DOI: <https://doi.org/10.26714/jkj.6.2.2018.106-115>.
- WHO. (2019, November 02). Retrieved Juli 28, 2022, from WHO: <https://www.who.int/>
- Wuandari, A. (2019). Upaya Mengontrol Halusinasi Dengan Bercakap-Cakap Pada Pasien Dengan Gangguan Persepsi Sensori. *Tesis*, Institut Teknologi Sains dan Kesehatan PKU Muhammadiyah Surakarta.

Yosep, I. (2011). *Keperawatan Jiwa*. Bandung: PT. Refika Aditama.