

# Description of Schizophrenia Patients in Controlling Hallucinations in Mental Hospitals in Indonesia

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Livana PH<sup>1\*</sup>, Sri Mulyani<sup>1</sup>, Titik Suerni<sup>2</sup>, Yulia Ardianti<sup>3</sup>

<sup>1</sup>STIKES Kendal, Jawa Tengah, Indonesia

<sup>2</sup>Dr. Amino Gondohutomo Regional Mental Hospital, Semarang, Indonesia

<sup>3</sup>Universitas Muhammadiyah Kendal-Batang, Central Java, Indonesia

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## Corresponding Author:

Livana PH

STIKES Kendal, Jawa Tengah,  
Indonesia

## Email:

livana.ph@gmail.com

## You Have to Know!

1. This study aimed to assess the ability of patients to control hallucinations using a validated hallucination control questionnaire.
2. Conducted with 27 respondents through a descriptive, quantitative approach, the results showed that most patients were best able to control hallucinations by rebuking them.
3. Strengthening patients' ability to rebuke hallucinations is important for improving emotional regulation and reducing the impact of thought disturbances on mental health.

## Abstract

**Introduction:** 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. **Methods:** 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 instrument uses an hallucination control questionnaire that is valid and reliable. Univariate analysis data using frequency distribution. **Results:** The results showed that the majority of patients were best able to control hallucinations by rebuking them. **Conclusions:** This approach involves confronting the hallucinations by verbally telling them to stop or go away. However, some patients struggled with more complex methods of control, such as confronting or challenging the hallucinations directly or employing cognitive strategies to manage the experience.

**Keyword:** Ability, Hallucinations, Patient

## How to Cite:

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## 1. 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.<sup>1</sup> 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.<sup>2</sup> 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.<sup>3</sup> 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.<sup>4</sup>

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.<sup>5</sup> The Central Java City Health Office said that the incidence of people with mental

disorders in Central Java ranged from 3,300 to 9,300 people.<sup>6</sup> Data from RSJD Dr. Amino Gondhohutomo 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.<sup>7</sup> 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 hallucination.<sup>8</sup> This research provides novel insights into how schizophrenia patients in Indonesian mental hospitals manage hallucinations, addressing gaps in previous studies by focusing on socio-cultural factors, limited healthcare access, and the role of coping strategies and social support in these settings. Based on the existing phenomena and the description in RSJD Dr. Amino Gondhohutomo, Central Java Province, researchers are interested in conducting research related to the description of Prevention in schizophrenia patients in controlling hallucinations to determine the patient's ability to control hallucinations.

## 2. METHODS

### 2.1. Study Design and Sample

This study employed a descriptive research design with a quantitative approach aimed at providing a systematic and factual description of the characteristics of schizophrenic patients in controlling hallucinations.

The target population consisted of patients diagnosed with hallucinatory mental disorders in a mental hospital setting. The sampling technique used was purposive sampling, with a total of 27 respondents selected based on the following inclusion criteria: (1) diagnosed with hallucinatory mental disorders, (2) cooperative in communication, and (3) willing to participate as respondents in the study.

### 2.2. Data Collection

Data were collected by directly administering the questionnaire to the respondents who met the inclusion criteria. Prior to distribution, informed consent was obtained, and confidentiality of responses was ensured throughout the data collection process. As the respondents have mental disorders, they were likely assisted by trained professionals to ensure accurate completion of the questionnaire.

### 2.3. Data Analysis

Univariate analysis was conducted using frequency distributions to describe the demographic characteristics of the respondents and their responses related to hallucination control. The characteristics of the respondents include age, gender, education, and marital status.

## 3. RESULTS

The results indicate that the mean age of the patients was 25 years, as presented in Table 1. All

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

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

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

Variabel	n	%
Gender		
Man	27	100,0
Woman		
Education		
Elementary School	3	11,1
Junior high school	12	44,4
Senior high school	12	44,4
Marital status		
Married	2	0,74
Not Married Yet	25	92,6

**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

respondents in this study were male, with the majority having completed junior or senior high school education, and most of them were unmarried, as shown in Table 2. Furthermore, the most common method used by patients to control their hallucinations was through verbal rejection or rebuking, as illustrated in Table 3. There is a type of hallucination control that most respondents cannot perform. The most commonly reported method that patients struggled with was direct confrontation or challenge of the hallucinations, as they found it difficult to assert control over the experience.

#### 4. 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%).<sup>9</sup> 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%).<sup>10</sup> 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.<sup>3</sup>

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%).<sup>9</sup> 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.<sup>11</sup> This study is in line with the research conducted by PH, Ruhimat, Sujanvo, 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%).<sup>12</sup> 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.<sup>13</sup> 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%) unmarned. 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. Marital status affects hallucinations because unmarried individuals may struggle with emotional isolation, making it harder to express their feelings and thoughts, which can lead to mental health issues, including hallucinations.<sup>10</sup>

#### 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 givmg SPI hallucinations by rebuking were carried out well by patients and had a good impact on patients.<sup>1</sup>

Another study conducted by Ervina and Hargiana (2018) said that after the patient was given an intervention in treating hallucinations With SPI 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.<sup>14</sup> 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.<sup>15</sup>

### 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%).<sup>16</sup> 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.<sup>17</sup> 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.<sup>16</sup>

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.<sup>14</sup> 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.<sup>18</sup>

### 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.<sup>14</sup> 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.<sup>19</sup>

### 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.<sup>19</sup> These results are in line with research conducted by Ervina and Hargiana (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.<sup>14</sup>

## 5. CONCLUSION

The average age of the respondents was 25 years, all of whom were female. The majority of the respondents had completed junior and senior high school, and most were not married. The ability to control hallucinations in patients found that the majority of patients were best able to control hallucinations by rebuking. This approach involves confronting the hallucinations by verbally telling them to stop or go away. However, some patients struggled with more complex methods of control, such as confronting or challenging the hallucinations directly or employing cognitive strategies to manage the experience. These patients may have found it difficult to assert control over their hallucinations, suggesting that further therapeutic interventions are needed to help patients develop more effective coping mechanisms.

Further research should explore the impact of coping strategies, social support, and educational interventions on hallucination control, particularly in young, unmarried individuals with lower education

levels. Future studies could also assess the effectiveness of therapies like cognitive-behavioral therapy (CBT) and family-based interventions.

## 6. CONFLICT OF INTEREST

No conflicts of interest

## 7. ACKNOWLEDGEMENT

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## 8. ETHICAL CONSIDERATION

This study has been approved by the Health Research Ethics Committee of Sekolah Tinggi Ilmu Kesehatan Kendal.

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