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Application of General Nursing Intervention Drawing Activities Towards Schizophrenia Patient with Hallucination

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Abstract

Schizophrenia is a mental disorder that is common throughout the world. People with schizophrenia can have difficulty orienting themselves to real life. Schizophrenia is a category of serious mental disorders that impact an individual's ability to feel, think and even behave, characterized by hallucinations, delusions and disturbances in thoughts, perceptions and behavior. Hallucinations are wrong perceptions about objects or events involving the five senses such as sight, sound, smell, touch and taste. Hallucinations have an impact that can make a person lose self-control, feel afraid, suspicious, feel insecure, anxious, confused, self-destructive, lack of attention, unable to make decisions. The aim of this research is to provide an overview of the application of generalist nursing interventions to patients with hallucinations through the application of distraction drawing activities to Mrs. N with hallucinatory nursing problems. The intervention was carried out on September 25-October 5 2023. The level of hallucination intensity was measured using the Psyrats instrument. The results showed that there was a decrease in the intensity level of hallucinations experienced from 31 to 1. This research proves that the application of generalist intervention with a distraction approach to drawing activities for the patient Mrs. N with hallucinatory nursing problems has been proven to reduce the intensity of hallucinations and signs of hallucinatory symptoms, as well as increasing the ability to control hallucinations.

Keywords: Nursing Intervention, Drawing Activities, Hallucinations, Schizophrenia

Introduction

Mental health is a state of mental well-being that enables a person to cope with the stresses of life, realize their abilities, learn and work well, and contribute to the community [1]. Mental health affects the way we think, feel and act, helping individuals handle stress, relate to others and make choices [2]. In this case, mental health is more than just feeling healthy and good, but the successful performance of mental functions demonstrated by productive activities, fulfilling relationships with

others, and the ability to adapt to change and overcome difficulties [3].

The World Health Organization (2022) states that schizophrenia is one of the most common mental disorders worldwide. Schizophrenia is a category of severe mental disorder that affects an individual's ability to feel, think, and even behave characterized by hallucinations, delusions, and disturbances in thought, perception, and behavior [5]. Hallucinations are false perceptions of objects or events involving the five senses such as sight,

sound, smell, touch, and taste [6]. Hallucinations have an impact that can make a person lose self-control, fear, suspicion, feelings of insecurity, anxiety, confusion, self-destructiveness, inattention, and inability to make decisions [6].

Marzoeki Mahdi Hospital (RSMM) Bogor is the oldest national referral hospital in Indonesia. Marzoeki Mahdi Hospital has several psychiatric inpatient rooms, one of which is the Utari room. According to room data recorded in 3 months, June patients amounted to 86 people with 86% of patients having hallucination problems. Then in July there were 93 people with 76.4% experiencing hallucinations and in August there were 106 patients with hallucinations of 86.1%. From the data obtained, the majority of patients in the Utari room have hallucination problems. This is similar to the condition experienced by Mrs. N who has sensory perception problems: auditory hallucinations.

Mrs. N who was 33 years old which was the first time the patient was admitted. The patient was brought to RSMM because of restlessness, raging since 1 month before admission. Since one day SMRS the patient has been raging again, angry at everyone, throwing things that are nearby, and destroying doors. The family said the patient also likes to talk to himself, talk slurred, suddenly cry, and pacing. The family said that these behaviors began to appear after divorcing her husband. The assessment was conducted on September 25, 2023 when the client said that at night she could not sleep because she heard voices.

Nursing actions that can be taken to control hallucinations are by rebuking, distracting being ignorant or talking with others, doing scheduled activities, and taking medication regularly [7].

Scheduled activities can be modified by drawing. In research conducted by Ibrahim and Samiaji (2021), drawing can reduce hallucination symptoms. In addition, in the research of Sukamto et al. (2022), after the application of structured drawing therapy, there were no more signs and symptoms of hallucinations in patients.

Based on the explanation that has been explained, the author provides innovative drawing activity interventions for patient Mrs. N to overcome the problem of hallucinations. The goal is to distract the hallucinations experienced by the patient. So the writing of this Ners Final Scientific Work (KIAN) will contain a nursing care report on patient Mrs. N in the Utari Room of RSMM with schizophrenia and hallucination nursing problems.

Method

The writing of the Ners Final Scientific Paper (KIAN) uses a case study method. Case study is a method of providing nursing care to patients during the treatment period. The author provides nursing care to patients during treatment / the author provides nursing care to patients with hallucination problems by providing innovative or modified interventions in the form of distraction drawing activities that are applied for eight meetings to overcome the problem of sensory perception disorders: auditory hallucinations. Each meeting the patient is given 20 minutes to 1 hour to do drawing activities. Drawing activities begin with providing reality orientation then a comfortable position and place before starting the session. Then the patient is invited to draw according to the example that has been given with the media that has been provided, including paper, markers, and crayons. After the patient is finished, the author conducts an

evaluation through interviews and assessment instruments.

Case History

Assessment of the patient was carried out on September 25, 2023 with observation and interview methods. Patient Mrs. N, 33 years old, female, entered the RSJMM with a diagnosis of unspecified schizophrenia with the nursing problem of auditory hallucinations.

Results and Discussion

The application of interventions is in accordance with the nursing problems they have, but this discussion will only be discussed regarding hallucination nursing care that has been implemented by the author. In the case of Mrs. N, the patient experienced various negative symptoms of schizophrenia and the most affecting her was hallucinations so that various other problems arose in the patient. Interventions given to patients with hallucinations are fostering a trusting relationship, helping patients recognize their hallucinations (content, frequency, time of occurrence, situation, and response to hallucinations), teaching patients to control hallucinations with techniques of rebuking, ignoring, talking, doing scheduled activities, and obeying taking medication regularly. Efforts made by a nurse in handling hallucinations by providing pharmacological therapy in the form of drugs and modality therapy, the therapy used is related to individual therapy and group activity therapy. The results of the study stated that SP1-4 generalist therapy can affect the patient's ability to control his hallucinations (Livana, Rihadini, & Sujarwo, 2020).

The modification of scheduled activities carried out by researchers is drawing activities. The intervention was given for 8 consecutive days with a distraction modification of drawing activities to the patient in an effort to

control hallucinations. This has been shown to be effective as shown by better mood when drawing is done regularly rather than as a form of involuntary activity [10]. The application of distraction drawing activities is carried out with a duration of 30 minutes to 1 hour. The tools provided are markers, crayons, paper, and sample drawings. Patients are instructed to draw according to friends or examples provided [9], so that we can find out drawings that do not match the theme. The themes provided were natural scenes. A study conducted (Joye et al., 2013) showed that looking at natural scenery either in the form of pictures or real can provide visual stimuli that can improve mood and restore stress. In addition, nature images depicting green leaves and blue water can lower blood pressure and calm nervous system activity [12].

The author used instruments to look at the patient's symptoms and ability to control hallucinations. During the 8-day intervention, it was evident that the patient's hallucination symptoms had decreased from a score of 26 to 3. The remaining symptoms included forgetfulness, circumstantiality, and pleasure. The pleasure felt by the patient is indeed due to the stimulus, not because the hallucination pleases him. The patient's development occurred significantly and is getting better every day, this can be seen from the intensity of hallucinations from a score of 31 to 1. Point one is a point of frequency of hearing hallucinations where at point 1 it is written that there are no hallucinations in one week. In the patient's condition, the hallucinations were not felt by the patient for the last two days, so the researcher still has point 1.

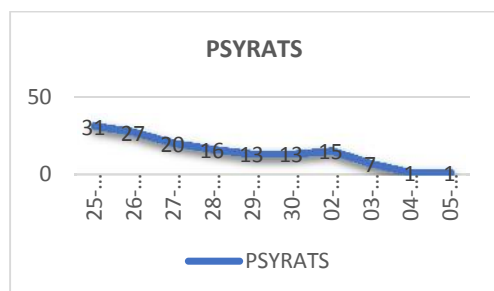


Chart 1. Evaluation of hallucination intensity in Mrs. N

The hallucination intensity score in Mrs. N decreased from a score of 31 to a score of 1, namely at the point of frequency of hearing hallucinations where at point 1 it is written that there are no hallucinations in one week. Where in the patient's condition hallucinations do not exist, namely the last two days.

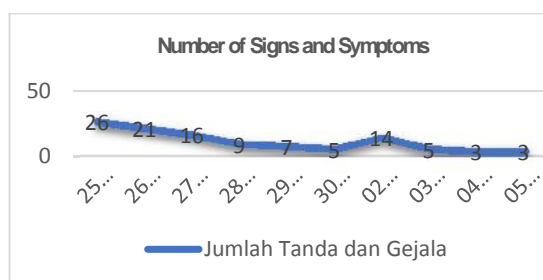


Chart 2. Score of Signs and Symptoms of Hallucinations in Mrs. N

In the signs and symptoms of hallucinations that occurred in Mrs. N, there was a significant decrease from 26 signs of symptoms to 3 signs of symptoms, namely forgetfulness, circumstantial, and feelings of pleasure.

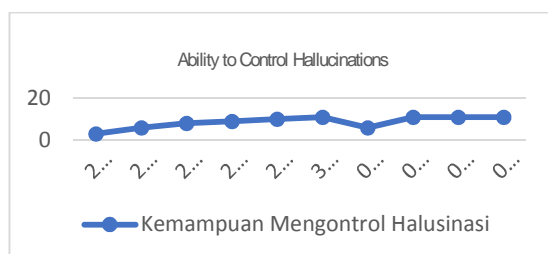


Chart 3. Evaluation of Mrs. N's ability to control hallucinations

The ability to control hallucinations in Mrs. N showed an improvement from a score of 3 to 11.

Conclusions

The interventions given to Mrs. N were carried out in accordance with the generalist mental nursing care standards for each nursing diagnosis that arose as well as a combination of drawing activities to distract the mind centered on the patient's hallucinations. The intervention was given from September 25 - October 05, 2023 in the Utari room of Dr. H. Marzoeqi Mahdi Mental Hospital (RSJMM) Bogor. This intervention is stated to be able to reduce the intensity of hallucinations and signs of hallucination symptoms, and can improve the patient's ability to control hallucinations. This is in line with the results of the evaluation conducted that the patient said that when drawing, he did not hear voices anymore. The patient also said he would use this therapy technique when at home with his child.

Advice

The application of distraction drawing activities that have been carried out can be used as a case example and evaluation material to conduct deeper exploration related to reducing signs of hallucination symptoms. The results of this scientific work are also expected to enrich the science of mental nursing related to the application of distraction drawing activities in patients with hallucinations.

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