

E-ISSN:..... Vol 1, No. 1 Maret 2023 Prefix Doi : 10.52221/asyjstn Submission : January 2023 Revision : February 2023 Available online : March 2023

Images Of Self-Treatment In Patients Of Hallucinations Aap Apipudin¹, Irpan Ali Rahman² Dede Sumiati³, Dini Nurfauziyah⁴, Fanny Khaifa Latifah⁵

^{1,2,3,4} STIKes Muhammadiyah Ciamis, Ciamis, Indonesia
⁵ Jenderal Achmad Yani University, Bandung, Indonesia
*Correspondensi: apipudinaap67@gmail.com

ABSTRACT

Purpose: this study was to describe the knowledge of self-care in patients with hallucinatory mental disorders such as bathing, dressing and decorating, eating and drinking, defecating and urinating, nail clippers, and toothbrushes. **Methods**: this research is a quantitative descriptive method using a cross sectional design. The sample in this study were 20 respondents with hallucinatory mental disorders at the Mentari Hati Tasikmalaya Foundation. **Results**: description of self-care knowledge in hallucinatory patients with 20 respondents. In the female sex, as many as 15 people got an average self-care knowledge of 34%, while in men there were 5 people with an average more than women, namely 35. For the average self-care knowledge of men and female is 34.5. **Conclusion**: this study shows that self-care knowledge in hallucinatory mental disorder patients is lacking.

Key words : Self-care, Hallucinations

Introduction

Mental disorder is a neurological disease that affects the patient's perception, mental thinking, emotional disturbance, and social behavior (Indriani et al., 2021). The symptoms that appear are mental disorders, mental disorders, and decline in communication skills, realism difficulties, emotional disturbances and blunting, cognitive impairment, and experiencing difficulties in carrying out daily activities (Hastuti Yuli, Retno & Basuki, 2018). The purpose of this research is to find out about mental disorders and self-development knowledge about mental disorders and hallucinations such as take a bath, eat and drinking, defecating in urination, clipping nails, and brushing teeth.

Based on WHO data (2016) and Maksum (2018), it is estimated that mental disorders in 13% of mental disorders will increase to 25% in 2030. These events will increase

the prevalence of mental disorders from year to year (Indriani et al., 2016). Riskesdas (2018) the prevalence of mental disorders with mental illness in the Indonesian population experiencing addiction. Primary data obtained from Kabupaten Tasikmalaya who experienced mental disorders with a total of 545 people experiencing mental disorders, as many as 244 experiencing severe mental disorders in 301 mild mental disorders. There are several stages of mental disorders. Ranging from stress, depression to psychosis or severe mental disorders (Tasikmalaya City Health Office).

Knowledge is the result of "sensation" and this occurs after the person has sensed a particular object. Sensing of objects occurs through the sensory sensory terminals, namely the sense of sight, hearing, smell, sensation and feeling alone. The process of sensing as well as producing this knowledge is also influenced by the intensity of perceptual attention to objects. According to Notoatmodjo, knowledge about illness and disease includes: causes of disease, symptoms or signs of disease, how to treat or where to seek treatment, how to transmit it, how to prevent it. One's knowledge of mental disorders contains two aspects, namely positive aspects and negative aspects. These two aspects will determine a person's attitude, the more positive aspects and objects that are known, the more positive attitudes towards certain objects will arise (Alfrinal et al., 2019).

Self-preparation is a skill in a person's experience of birth in the ability to do it and then completes the activities of life one day independently. Unstable desire to wash regularly, not combing hair, dirty skin, bald, lazy, in an unhealthy appearance (Martini & Watiningsih, 2019). Factors that affect the ability to think is in the surrounding environment, especially in the family. Those who have mental illness have low intellect in slow thought processes that cause mental distress, experience delays in doing activities, good health, namely in the hall of self-care such as toileting, bathing and rituals (Iskandar & Febriani Eka Putri, 2011).

Preliminary care is needed to provide preliminary thinking skills and increase practice in fulfilling self-cleanliness for patients with mental disorders or hallucinations in the form of knowledge-based knowledge of practice strategies in fulfilling personal hygiene needs. The strategy for implementing mental paldal palsy is mentally disturbed, namely by training phalanxial pallial internal hygiene, training patients with internal and external hygiene, training patients with internal internal hygiene, training patients with internal and external hygiene in all internal mental health. To optimize the patient's ability to clean themselves.

Method

The research method used in this research is a qualitative descriptive method using a cross-sectional design. The sampling technique used experimentally and with a sample of up to 20 people suffering from hallucinations. This research was carried out at the Tasikmalaya Mental Health Center in June 2022.

The instrument used in this research is a questionnaire. Data analysis in this research uses univariate analysis which is presented to describe the each variable by using the frequency distribution through the percentage measurement.

Results

Shurdeteristies of Respondents Dused on Ge		
Gender	Frequency	Persentage
Man	5	25 %
Women	15	75 %
Total	20	100 %

Table 1. Characteristics of Respondents Based on Gender Type

Based on table 1. it shows that the majority of respondents are women, at least 15 people (75%).

Gender	Frequency	Results Average Knowledge of Self Care
Woman	15	34
Man	5	35
Total	20	34.5

Table 2. An overview of self-care knowledge in hallucinatory patients

Based on table 2. it is known that as many as 15 women have an average knowledge of self-care, namely 34, while for men there are 5 people with an average more than women, namely 35. For the average self-care knowledge of men, male and female ie 34.5.

Discussion

Based on the results of the research, it is known that the lack of knowledge of selfprevalence and hallucinations with as many as 20 respondents. The types of gender women are at least 15 people in get averages of self-knowledge are 34 whereas males with an average of 5 individuals with average knowledge of self-preparation are 35. For males with average knowledge of self-preparation of males in women which is 34.5.

In Herdman's research (2018) he explains that as a result of hallucinatory sufferers recognizing self-perceptions, they often find hallucinations in carrying out hallucinatory activities as well as hallucinations that cause sufferers of hallucinations to fail as hallucinations and hallucinations. each requires balance in doing his daily tasks including hallucinations in smooth self-perception with aldalism in totality in addition to palsied hallucinations that are unable to do and don't want to take care of themselves.

Because of this, mental deficits in self-preparation in schizophrenic palsy should be considered as a mental issue which is important to do. Ultimately, impaired cognitive function which is controlled by poor orientation actually leads to a decrease in the client's level of irritation in carrying out self-preparations such as eating, bathing, dressing, resting, and ups and downs. Deficit self-preservation is a paldal condition for a person who experiences weakness and inability to do self-care, as well as completes self-preservation activities such as bathing (hygiene), exercise/medication, eating and defecating (toiletting) (Direjal, 2015). Self-preparation is the ability to take care of yourself in accordance with his mental condition, the patient is considered to be disturbed in his own mental health if he is not able to carry out self-preparation, in the normal course of life.

The results of Trihalrdalni's research (2015) identified self-prevalence which consisted of malkaln, bathing, toiletting in personal hygiene in schizophrenic palsy in hospital, showing that 38% of schizophrenic sufferers were in the category of mild adversity, 28% were in the adversity category of adversity, 13% were in the category of adversity. high, 13% are in the total dependency category and 3% are in the independent category. The

research conducted by Andayanni (2015) shows that the level of self-preparation skills: 40.7% of respondents require low-level self-preparation skills in the elimination of deficiencies of 61.6%, 1%. Based on the overall analysis of the level of self-preservation ability in general, 37.2% of respondents required additional assistance in 35.6% required assistance from others for support, control, education.

Abdul Jallil's research (2016) showed that at least 114 people (40.1%) experienced a decline in self-preparation. Unfortunately, deficits in self-care in schizophrenic palsy cannot be underestimated, if medical intervention is not carried out, then there is a possibility that the patient may experience a high risk of social isolation (Fitrial, 2015). The manifestations of physical self-care deficits are skin integrity disorders, oral mucosal membrane disorders, risk of oral infection in the ear, and physical disorders of the nail beds. Apart from that, it also has psychosocial aspects, such as emotional and emotional needs, the need to be loved in loving, the need for self-esteem, self-actualization in social interaction (Parendrawati, 2014).

According to Videbeck (2015) schizophrenia palsient need a countermeasure in the initial self-experiencing of self-practice caused by the calrenal causes of schizophrenia mental disorder including chronic psychotic disorder, there are severe symptoms, inability of the patient to self-control, inability to work (lack of energy and persistence). Schizophrenic clients with negative symptoms (default in thinking, self-preservation deficits, self-withdrawal), and cognitive symptoms (lack of thinking ability to use informality and difficulty focusing) affect the behavior of the client's ability to predict himself.

Conclusion

Based on the results of the study, it was concluded that there were 20 respondents to know the description of self-care knowledge in hallucinatory patients. For women, 15 people got an average knowledge of self-care, namely 34, while for men, there were 5 people with an average more than women, namely 35. For the average self-care knowledge of men and women that is 34.5% .

References

- Annisa, F. (2018). Beban Perawatan Pada Keluarga Dengan Penderita Gangguan Jiwa Di Desa Kebonsari. Nurse and Health: Jurnal Keperawatan, 7(1), 8–12. https://doi.org/10.36720/nhjk.v7i1.27
- Barus, N. S., & Siregalr, D. (2019). the effectiveness of classic music Therapy towards auditory hallucination in schizophrenia patient. *Keperawatan Jiwa*, 7(2), 48–57. Retrieved from ojs.uph.edu
- Erna Irawan1. (2016). Pengaruh terapi penerimaan dan komitment (acceptance dan commitment theraphy) pada penurunan nilai bprs pada pasien dengan gangguan sensori persepsi : halusinasi, IV(2).
- Feist, J. G. J. F. (2020). Teori Kepribadian: Theories of Personality. (Salemba Humanika, 2010). *Keperawatan*, 1(2), 1–13.
- Gusti, N., Dwi, K., Komang, N., Resiyanthi, A., Made, D., & Dwi, A. (2021). Personal hygiene pada pasien skizofrenia di uptd rumah sakit jiwa provinsi bali factors that are related to the ability to personal hygiene in the skizofrenia patients in uptd hospital in bali province. *Keperawatan*, 2(1), 1–18. Retrieved from http://repository.stikeswiramedika.ac.id

- Gusti Putu Mahindhu et al. (2021). Implementation strategy (sp i-iv) nursing in helping to control hallucinations in halucinatory patients: literature study. *Jiwa*, *1*(3), 1–13. Retrieved from <u>http://repository.stikeswiramedika.ac.id</u>
- Hastuti, R. Y., & Rohmat, B. (2018). Pengaruh Pelaksanaan Jadwal Harian Perawatan Diri Terhadap Tingkat Kemandirian Merawat Diri Pada Pasien Skizofrenia Di Rsjd Dr. Rm Soedjarwadi Provinsi Jawa Tengah. *Gaster*, *16*(2), 177-190.
- Heryanto et al. (2021). Perawatan halusinasi, dukungan keluarga dan kemampuan pasien mengontrol halusinasi: literature review. *Keperawatan*, 10(2), 272–284. Retrieved from htpp://jurnal.stikescendekiautamakudus.ac.id
- Indriani, B., Fitri, N., & Utami, I. T. (2021). penerapan aktivitas mandiri : kebersihan diri terhadap kemandirian pasien defisit perawatan diri di ruang kutilang rsj daerah provinsi lampung. *Cendikia Muda*, 1(September), 382–389. Retrieved from <u>http://jurnal.akperdharmawacana.ac.id/index.php/JWC/article/view/228/139</u>
- Iskandar, R., & Putri, F. E. (2021). Hubungan Dukungan Keluarga Dengan Personal Hygiene Pasien Jiwa Di Wilayah Kerja Puskesmas Wara Kota Palopo Tahun 2020: The Relationship between Family Support and the Personal Hygiene of Mental Patient in Wara Public Health Centre, Palopo City In 2020. Jurnal Ilmiah Keperawatan (Scientific Journal of Nursing), 7(2), 226-230.
- Juniarti, S., & Hendri, E. (2017). Analisis Faktor Karakteristik Individu Yang Mempengaruhi Kinerja Pegawai (Septi Juniarti, Edduar Hendri). *Jurnal Media Wahana Ekonomikal*, 14(1), 42–56.
- Kristina. (2020). Hubungan Dukungan Keluarga Dengan Intensitas Kekambuhan Gangguan Halusinasi Pendengarandi Poliklinik Rumah Sakit Jiwaprof. Dr.Muhammad Ildrem Tahun 2019. *All Ulum Seri Salinstek*, *VIII*(2), 50–62.
- Martini, M., & Watiningsih, A. P. (2019). The Influence of Economic Token Therapy On The Improvement Of Personal Hygiene In Patients With Self Deficit in Mental Hospital of Bali Province. Jurnal Kesehatan MIDWINERSLION, 4(1), 58–63. Retrieved from http://ejournal.stikesbuleleng.ac.id/index.php/Midwinerslion/article/view/120/41
- Missesa. (2020). Beban Dan Koping Caregiver Dalam Merawat Klien Gangguan Jiwa Di Kecamatan Pahandut Kota Palangka Raya. *Keperawatan Mersi*, *IX*(1), 43–51. Retrieved from http://repository.stikeswiramedika.ac.id
- Mulyono, E. 2019. (2019). Hubungan Dukungan Keluarga Dengan Tingkat Kemampuan Klien Mengontrol Halusinasi. *Hubungan Dukungan Keluarga Dengan Tingkat Kemampuan Klien Mengontrol Halusinasi*,1.
- Nursalam. (2013). Metodologi Penelitian Ilmu Keperawatan. Jakarta: Salemba.
- Parendrawati, D. P. (2014). Efektifits Terapi perilaku: Token Ekonomi Pada klien Defisit perawatan diri (DPD) di Rumah Sakit Marzoeki Mahdi Bogor. *Jurnal Media Ilmu Keperawatan*, 7(1).
- ramdani. (2017). Upaya penurunan frekuensi halusinasi penglihatan dengan komunikasi terapeutik di rsjd surakarta. *Keperawatan*, 2(3), 1–10. Retrieved from http://eprints.umpo.ac.id
- Rani Renjani, 2019. (2019). Mentari hati, (18), 1–33.
- Reyes, G., & Enrique, L. (2018). Gambaran Kejadian Kurang Energi Kronis Di SMKN 1 Tepus Gunung Kidul. Journal of Chemical Information and Modeling, 53(9), 1689– 1699.
- Ridha Nikmatur. (2017). Proses penelitian, masalah, variabel dan paradigma penelitian. *Hikmah*, 14(1), 62–70. Retrieved from http://jurnalhikmah.staisumateramedan.ac.id/index.php/hikmah/article/view/18
- Sugiyono. (2013). Metode Penelitian Kuantitatif Kualitatif Dan R&D. Bandung: Alfabeta.

- Yanti et al. (2020). halusinasi pendengaran pada pasien dengan gangguan jiwa. *Kefarmasian Indonesia*, 3(1), 1–10.
- Yanti, R. D., & Putri, V. S. (2021). Pengaruh Penerapan Standar Komunikasi Defisit Perawatan Diri terhadap Kemandirian Merawat Diri pada Pasien Skizofrenia di Ruang Rawat Inap Delta Rumah Sakit Jiwa Daerah Provinsi Jambi. Akademka Baiturrahim Jambi, 10(1), 31–38. <u>https://doi.org/10.36565/jab.v10i1.266</u>