

Application of Medication Compliance Therapy and Scheduled Activities: Prayer in Hearing Hallucinations

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ABSTRACT

Objective: The purpose of this study was to provide an overview of health education including medication adherence, planned activities, and spiritual prayer as a means to help people with auditory hallucinations. **Methods:** The research method used is a qualitative method, which is a method used to collect data through observation of people, interviews, or observation of behaviour, conducted in April-March 2024. **Results:** Based on the nursing care case study conducted, from the data analysis obtained data from client 1 and the factors causing hallucinations, the client has experienced losing her husband, while client 2 is the perpetrator who experiences hallucinations because the client has lost the house, namely blown away. Interventions carried out on client 1 and client 2 are Sp 1 to Sp 4 Auditory Hallucinations with additional therapy Application of taking medication and Scheduled activities: Prayer. Implementation is the application of Sp 1 to Sp 4 Hallucinations coupled with the application of compliance therapy taking medication and scheduled activities: Prayers in accordance with the interventions that have been applied. Evaluation is the implementation stage carried out on both clients. **Conclusion:** Both patients experienced the same problem, namely sensory perception disorders, auditory hallucinations and after being given medication compliance therapy and scheduled activities.

Keywords: Hallucinations, medication compliance, nursing care, prayer

Introduction

Mental health, according to the World Health Organization (WHO), is when a person is in good health, able to feel happiness, able to face life's challenges, has positive relationships with other people, and is able to treat other people the way they want (Ayuningtias et al., 2018). The prevalence of schizophrenia in West Java shows 1.7% or around 400,000 people or in other words there are 5.0 per thousand households suffering from schizophrenia. Based on data from the Tasikmalaya City Health Service, (2022) there are 4661 data on mental disorders patients with 2676 men and 1985 women, of which schizophrenia is the largest number of data with 3046 people, of which 1887 men and 1159 women are served at community health centers. The

latest data from the Purbaratu Community Health Center states that there are 64 schizophrenia patients served at the Purbaratu Community Health Center, with 43 men and 21 women. Based on data from the Tasikmalaya City Health Service, it is stated that Purbaratu Community Health Center is the 2nd community health center with the highest data on People with Mental Disorders out of 22 Community Health Centers that serve patients with severe ODGJ cases in Tasikmalaya City.

Apart from that, the Purbaratu Community Health Center is one of the Community Health Centers that serves patients with mental disorders and the Purbaratu Community Health Center is also a Community Health Center that is active in providing guidance to patients and families and routinely makes visits to patients' homes (Cahyati et al., 2021). Schizophrenia is a long-lasting mental disorder characterized by dull or abnormal affect, decreased or difficulty communicating, realistic disturbances (delusions or hallucinations), cognitive impairment or inability to think abstractly. therefore having difficulty carrying out daily activities. Additionally, schizophrenia is a long-lasting illness that affects the way a person thinks, feels, and behaves. Hallucinations are a common symptom of schizophrenia. (Rosyada and Pratiwi, 2021).

Hallucinations occur when a person perceives a stimulus that does not actually exist. The 2020 report shows that 497 patients with major mental disorders who had been treated at the Gramesia Home in Cirebon Regency experienced hallucinations, 80 were at risk of violent behavior, low self-esteem, and 37 were delusions (Firrasya Salsabila 2022). These data show that the percentage of mental disorders, especially hallucinations, is the highest. Apart from that, auditory hallucinations are the most common type in Indonesia with a percentage of approximately 70%; visual hallucinations ranked second with a percentage of 20%; and hallucinations of smell, touch and taste only have a percentage of 10% (Muhith, 2015). When a client hears something that is not actually there, the voice is usually heard calling or telling him to do something that he can imagine himself, even the people around him. This is known as an auditory hallucination. (Hidayati et al., 2014). According to research conducted by Mubin and PH (2019) on the Relationship between Medication Adherence and Recurrence in Schizophrenia Patients, the patient's medication adherence when discharged from the hospital was 100% regular, but after 8 weeks, the patient's medication compliance was only 65.3% and the rest are irregular.

This shows a very significant relationship between patient medication adherence and patient relapse. However, according to research by Astuti et al. (2017), the majority of respondents experienced severe relapses, namely 67 respondents (76.1%), and the majority were less compliant with taking medication, namely 48 respondents (54.5%). The therapy that is often used in psychoreligious therapy is prayer activity therapy (Riyadi et al., 2022). Seeing this, providing psychoreligious therapy in the form of prayer therapy is expected to be an alternative treatment for reducing hallucinations in schizophrenic patients which can be applied either by health workers in hospital institutions or the patient's family at home.

Methods

Research design is a strategy for achieving goals set by a researcher which functions as a research guide (Kartikasari, 2019). The design used in this Scientific Writing (KTI) is qualitative, namely with a case study approach which aims to describe a problem in clients with sensory perception disorders in the form of hallucinations which is carried out using health education techniques by implementing compliance with taking medication and implementing scheduled activities: Prayer to reduce signs and symptoms of hallucinations. A case study topic is an object or person known in case-taking activities (Notoatmojo, 2020). In addition, two

cases of patients diagnosed with Sensory Perception Disorder, a condition characterized by auditory hallucinations, were evaluated at the Purbaratu Community Health Center in Tasikmalaya for this subject. The conditions that are met in this study are that the patient is willing to be a case that is handled for a minimum of five days, the patient regularly takes medication, the patient can still communicate cooperatively, the patient is willing to be a respondent and fill out a consent form, and the patient regularly undergoes examinations at the Purbaratu Community Health Center Tasikmalaya for at least the last three months.

The aim of the research is to provide an overview of health education which includes medication adherence, planned activities, and spiritual prayer as a means of helping sufferers of auditory hallucinations. The information presented includes findings from observations and interviews regarding the patient's ability to adhere to a prescribed schedule, take his medication, and engage in spiritual prayer. Check to see if the individual experiencing auditory hallucinations shows a decrease in signs and symptoms associated with sensory perception problems.

Results

Kiling Process	Research Result	
	Ny. S	Ny. E
Description of the stages of implementing the nursing process for clients with sensory perception disorders: auditory hallucinations after medication adherence therapy and scheduled activities: prayer	<ul style="list-style-type: none"> a. Characteristics Education, client status, content of hallucinations, client response to hallucinations, signs and symptoms of hallucinations, and predisposing factors for each client. b. Data Focus The client experienced psychological and sociocultural disorders where the client had experienced trauma regarding her marriage, because the client was left behind by her husband. In the socio-cultural aspect, clients rarely interact with people around them and clients are often silent, which ultimately results in problems being kept to themselves. c. Nursing Diagnoses Sensory Perception Disorders Auditory Hallucinations. d. Nursing Interventions Strategy for managing hallucinations, with adherence to taking medication and scheduled prayer activities. e. Nursing Implementation 	<ul style="list-style-type: none"> a. Characteristics Education, client status, content of hallucinations, client response to hallucinations, signs and symptoms of hallucinations, and predisposing factors for each client. b. Data focus The client experienced psychological and sociocultural disorders where the client often experienced violence from his father by being hit and cursed at. Since that incident the client has become very traumatized, the client often daydreams and is alone and the client also said that in 2015 the client lost his house because it was blown away by a strong wind. In the sociocultural aspect, clients always harbor problems and do not want to talk to other people c. Nursing Diagnoses Sensory Perception Disorders Auditory Hallucinations. d. Nursing Interventions Strategy for managing hallucinations, with adherence to taking medication and scheduled prayer activities. e. Nursing Implementation Sensory Perception Disorders Hearing Hallucinations, SP 1 to

Sensory Perception Disorders Hearing Hallucinations, SP 1 to SP 4 therapy measures are carried out, namely rebuking techniques, medication compliance, conversation and activities accompanied by several supporting therapies, namely compliance with medication and scheduled prayer activities. Therapy for 5 consecutive days with a frequency of rebuking 2x a day or according to the arrival of hallucinations, compliance with taking medication 2x/day, namely at dawn and breaking the fast, conversing with a frequency of 3x a day, while activity therapy is scheduled to pray with a frequency of 5x/day according to with a prayer schedule and other activities that have been scheduled by the researcher and client.

- f. Nursing Evaluation
Evaluation of the success of clients who have undergone rebuke therapy, compliance with medication, conversation and scheduled prayer activities and other activities, clients are able to control hallucinations and signs of symptoms in both clients have decreased

SP 4 therapy measures are carried out, namely rebuking techniques, medication compliance, conversation and activities accompanied by several supporting therapies, namely compliance with medication and scheduled prayer activities. Therapy for 5 consecutive days with a frequency of rebuking 2x a day or according to the arrival of hallucinations, compliance with taking medication 2x/day, namely at dawn and breaking the fast, conversing with a frequency of 3x a day, while activity therapy is scheduled to pray with a frequency of 5x/day according to with a prayer schedule and other activities that have been scheduled by the researcher and client.

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Discussion

Based on the results of the research, after giving therapy for 5 days, initial data on client 1 showed 14 signs of symptoms and on client 2 there were 13 signs of symptoms. It was found that the final results for the two clients were different, where client 1 still had 4 signs of symptoms, while client 2 had 3 signs of symptoms. So it can be interpreted that the reduction in signs and symptoms for the first client was 70% and for the second client 70%. Clients 1 and 2 experienced a decrease in the same signs of hallucinations, including irritability and hearing things that had no object.

The results of the analysis of the symptoms that differentiate between the two are slow verbal response, disinterest in daily activities, no eye contact, increased pulse, respiration and blood pressure and acting as if filled with something painful. As stated by Alfaniyah and Pratiwi (2022) that after therapy, respondents will experience a decrease in subjective symptoms and differences can be found in the therapy that has been given with the same intervention and dose of action for both respondents, this is in line with both clients experiencing an increase in control. hallucinations, the signs and symptoms of hallucinations decrease. This is supported by family monitoring in paying attention to the client's treatment and ongoing treatment is needed so that the factors that trigger hallucinations do not reappear and the signs of hallucinatory symptoms decrease. This is confirmed in the journal Panni and Santoso, (2021) which states that the family is the smallest unit in society which must be able to be at the forefront of its role in maintaining mental health and providing psychological first aid to family members.

The results of the application of therapy for compliance with taking medication and scheduled prayer activities in clients with hallucinatory sensory perception disorders are the ability to control hallucinations, so the signs of hallucinatory symptoms are decreasing. The results of this study are also in accordance with the opinion of Sapuro (2016) who said that one way to control hallucinations is to obediently take medication. This research is also strengthened by the opinion of Anis (2017) that providing therapy with scheduled prayer activities is effective in reducing signs of hallucinations.

Based on the facts and theories above, the researchers concluded that hallucinations can experience a decrease in signs and symptoms by regularly taking medication and scheduled prayer activities, clients can implement compliance with taking medication to prevent or control hallucinations and scheduled activities are an effort to keep themselves busy. This is in accordance with the opinion of Friedman (2023), with the number of drugs, motivation or family support that are applied together where the side effects that exist are a spiritual dimension that can influence a person's behavioral patterns in living life. Research according to Putri and Hasanah (2021), also states that when clients carry out prayer therapy activities diligently and focus perfect attention (*khusyuk*), it can have an impact when hallucinations appear, clients can eliminate sounds that are not real and can keep themselves busy.

Conclusion

Based on the nursing care case study conducted, from the data analysis obtained data from client 1 and the factors causing hallucinations, the client had experienced losing her husband, while client 2 was the perpetrator who experienced hallucinations because the client experienced losing her house, namely blown away by the wind. Interventions performed on client 1 and client 2 are Sp 1 to Sp 4 Auditory Hallucinations with additional therapy Application of taking medication and Scheduled activities: Prayer. Implementation is the application of Sp 1 to Sp 4 Hallucinations coupled with the application of compliance therapy

taking medication and scheduled activities: Prayers in accordance with the interventions that have been applied. Evaluation is an implementation stage carried out on both clients. The results showed that both patients experienced the same problem, namely sensory perception disorders, auditory hallucinations and after being given medication compliance therapy and scheduled activities.

Suggestion

The role and support of the family, especially communication, is needed in carrying out strategies to control the intensity of hallucinations so that the signs and symptoms of hallucinations are reduced.

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