



Nursing Care for Sensory Perception Disorders in Elderly Patients with Auditory Hallucinations at Iryou Houjin Aiwakai (Ikeda En) Aiwa Deikea Room Okinawa Japan

Siti Fatimah^{1a*)}, Ita Apriliyani^{2, b)}, Ririn Isma Sundari^{3, c)}

¹Universitas Harapan Bangsa, Jl. Raden Patah No. 100, Ledug, Purwokerto 53182, Indonesia

^asf3688878@gmail.com^{*}; ^bitaapriyani@uhb.ac.id; ^cririnismasundari@uhb.ac.id

ABSTRACT

Japan has the world's largest elderly population, with a family culture that entrusts elderly care to nursing homes, or the so-called Roujin Home. In 2020, there were around 11,575 Roujin Houses in Japan. A common problem that arises in patients with auditory hallucinations is sensory perception disorders. The purpose of this study is to reveal the impact of therapy or reprimands in the healing process of auditory hallucinations in elderly patients. This research was conducted on June 20-22, 2023 at Iryou Houjin Aiwa Deikea, using observation instruments and interviews with patients and therapists. The study focused on one patient with auditory hallucinations. The results showed that the intervention given for 3 days did not provide significant progress, due to a lack of support and motivation from the family, which caused the patient to be reluctant to follow the reprimanding therapy. Limitations of this study include limited duration of intervention and lack of emotion supports from the family. These findings provide important insights into the importance of family support in improve the effectiveness of auditory hallucination therapy.

Keywords: Auditory Hallucinations, Family Support, Rebuke Therapy

1. INTRODUCTION

Mental disorders are non-adaptive responses from the external environment as well as within, as evidenced by feelings, thoughts, and actions that are not in line with local culture and interfere with social, occupational and physical functioning (Manurung, 2022). *Schizophrenia* is a severe mental disorder characterized by decreased or inability to communicate, impaired reality, unnatural or blunt effects, cognitive impairment and will be difficult to carry out daily activities (Latifah & Rahayu, 2020).

The World Health Organization (WHO) states that around 450 million people experience mental disorders, including schizophrenia (Dewi & Pratiwi, 2022). Basic Health Research (Riskesdas) 2018 data in

Indonesia shows the prevalence of severe mental disorders, such as schizophrenia, is around 400,000 people or 1.7 per 1,000 population (Angriani dkk., 2022). One of the symptoms of schizophrenia is hallucinations (Harkomah, 2019).

Hallucinations are sensory perceptual experiences in the absence of an external stimulus. A common type is auditory hallucinations, which are experienced by about 70% of patients with hallucinations (Abdurkhan & Maulana, 2022). Auditory hallucinations can range from vague sounds to speech directed at the patient (Lase & Pardede, 2022). Sometimes the voices heard can be happy, threatening, damaging and killing (Famela dkk., 2022). Not only experienced by young people, but also quite common in the elderly. One of the main factors is sensory

***Siti Fatimah.**

Tel.: -

Email: sf3688878@gmail.com



degradation, such as hearing loss. This often leads to "sensory deprivation", where the brain tends to create its own perceptions to replace the lost sensory stimulation. Other causes include psychosocial stress due to social isolation and feelings of loneliness which are also common in the elderly. This stress, especially when combined with physical factors such as fatigue or sleep disturbances, can increase the risk of hallucinations (Badcock *et al.*, 2020).

Nursing care for patients with auditory hallucinations aims to manage and reduce these maladaptive responses (Purba, 2019). The nursing process includes the stages of assessment, planning, diagnosis, implementation, and evaluation of nursing (Siregar, 2020). Japan, as a country with the largest elderly population in the world, has a culture of caring for the elderly in nursing homes or Roujin Home, such as in Iryou Houjin Aiwakai (Ikeda En) Okinawa, which accommodates around 140 elderly people.

Therefore, the author conducted a case study entitled: "Nursing Care for Sensory Perception Disorders in Patient Mr. S With Auditory Hallucinations in Iryou Houjin Aiwakai (Ikeda En) Aiwa Deikea Room Okinawa Japan". S With Auditory Hallucinations in Iryou Houjin Aiwakai (Ikeda En) Aiwa Deikea Room Okinawa Japan".

2. CASE STUDY METHOD

2.1 Research Design

The design applied to this case study writing is descriptive research. Case study is a research method in which researchers explore an event at one particular time and activity, such as a program, institution, or social group, through in-depth data collection procedures (Assyakurrohim dkk., 2022). This case study describes nursing care for elderly patients with diagnoses of sensory perception disorders in Mr. S with auditory hallucinations in Iyakurrohim et al. S with auditory hallucinations at Iryou Houjin Aiwakai (Ikeda En) Okinawa. The nursing process includes assessment, diagnosis, intervention, implementation and evaluation.

2.2 Location and Time of

This *case study* was conducted in Aiwa Deikea Room, Roujin Home Iryou Houjin Aiwakai (Ikeda En), Okinawa, Japan. Nursing care for Mr. S with auditory hallucinations was conducted on June 20-22, 2023. This three-day period was chosen because it was considered sufficient to apply intensive early intervention techniques, identify the patient's response, and establish a follow-up plan.

2.3 Study Subjects

This research does not recognize samples and populations, but rather focuses on the subject of the case study, namely Mr. S with a diagnosis of sensory perception disorder in the Aiwa Deikea Room. Mr. S with a diagnosis of sensory perception disorder in the Aiwa Deikea Room. The author conducted in-depth interviews and observations for three days to gather detailed information used in the preparation of this report.

2.4 Case Study Focus

The focus of this case study is Nursing Care for Auditory Hallucinations in Mr. S with Sensory Perception Disorders in the Aiwa Deikea Room. S with Sensory Perception disorders in the Aiwa Deikea Room, which includes various aspects of nursing interventions in accordance with the standards applied in health facilities.

2.5 Data Collection

According to Jannah (2019), to the data collection methods used include interviews, observation, and documentation.

- Observation: in the initial stage, the nurse observes the behavior of the patient with auditory hallucinations. This includes observing whether the patient reacts to unreal sounds, facial expressions, and emotional responses that arise during hallucinations.
- Interview: the nurse collects anamnesis data, including chief complaints, description of hallucinations (e.g., characteristics of sounds, frequency, and impact on the patient's life).

- Documentation: The nurse reviews the patient's medical records that include mental health history, medication use, and examination results. This data is important to understand the effects of previous therapies and determine the most appropriate intervention.

2.6 Presentation

Hallucinations are a form of sensory perception where there is no stimulation to the receptors. Providing appropriate nursing care actions and right on the desired standard can improve the ability of hallucination patients to exercise self-control and decrease hallucination problems (Utama dkk., 2023).

The author applies the nursing care process within three days. The data collection process applied is interviews and experiences through 5 stages, namely review, diagnosis, intervention, application and evaluation. There are several application efforts carried out starting from the approach with the patient who becomes a respondent through building a relationship of trust with patients who match the criteria, then applying interviews and observations related to perceived hallucinations such as content, situation, frequency, and patient responses to hallucinations. The author also applied interviews regarding the patient's abilities. The patient and the author agreed on the next day's contract as implementation

The implementation of rebuking has several stages, namely, preparation, orientation, working and termination. The time to apply each discourse is when the patient shows signs of hallucination symptoms and at a time when the patient explains how hallucinations generally occur.

2.7 Ethics

Research ethics were strictly observed. Before the intervention, the authors explained the purpose of the study to Mr. S and asked for his willingness to be a respondent. S and asked for his willingness as a respondent. At this stage, informed consent was obtained, which is a formal agreement between the researcher and the respondent to ensure understanding of the purpose of the study and possible

consequences. If the patient agreed, the respondent was asked to sign the consent form. Anonymity was maintained by not putting real names on the data collection tools. In addition, confidentiality of patient information was strictly maintained, by only accessing data relevant to the purpose of this research (Nuzuliah, 2024).

3. RESULTS AND DISCUSSION

In this discussion, the author explains the gaps that occur between literature review and case reports on nursing care for sensory perception disorders in patients Mr. S with auditory hallucinations at Iryou Houjin Aiwakai (Ikeda En), Aiwa Deikea Room, Okinawa, Japan, which includes assessing, planning, implementing and evaluating. S with auditory hallucinations at Iryou Houjin Aiwakai (Ikeda En), Aiwa Deikea Room, Okinawa, Japan, which includes assessing, planning, implementing and evaluating.

3.1 Nursing Assessment

The client is a 62-year-old male. Gender is a socio-cultural factor that affects the predisposition and precipitation of mental disorders. According to Akbar et al. (2022), men are more prone to auditory hallucinations due to psychological factors. Psychologically, men tend to find it more difficult to seek help or express their emotional problems, which can increase levels of stress and anxiety and the risk of mental disorders.

The results of this assessment are in accordance with research Patimah (2021) which shows that clients often listen to voices without being there when the client is alone, the contents of his mind are filled with whispers of women to tell him to hit someone so that the client stays away from other people, the client's concentration is easily distracted, when talking the client often lyrics right and left as if someone is talking, also sometimes the client talks to himself.

These predisposing and precipitating factors in clients are in accordance with (Videbeck & Sheila, 2020) namely factors predisposing to hallucinations include psychological factors and sociocultural and environmental factors.

Psychological factors are caused by repeated failures in early psychosocial development, lack of affection and victims of violence. Individuals feel unaccepted in an environment that feels alienated, lonely and distrustful of the surrounding environment. In addition, the precipitating factor for hallucinations is the patient's response to hallucinations such as fear, suspicion, insecurity, confusion and anxiety, self-destructive attitude, unable to take action and unable to distinguish between real or not.

Table 1. Assessment Results

Category	Assessment result
Age	62 years old
Gender	Male
Mental status	Frequent hearing voices, isolation and anxiety
Self-concept	Low self-esteem due to retirement
Social context	Lack of social interaction after wife's death
Family history	No family history of mental illness

The results of the assessment of self-concept and mental status in clients are in accordance with Aji (2019) that the assessment of selfconcept includes self-identity, self-image, selfideal, role function, self-esteem. Assessment of mental status includes speech, appearance, emotional affect, motor activity, perception of hallucinations, interaction during interviews, thought processes, level of consciousness, memory, level of concentration and counting, ability to make decisions, and self-view.

3.2 Nursing Diagnosis

Nursing diagnosis is the second phase of the nursing process and the process used to introspect to conclude and make a Nursing Diagnosis. Generally, patient problems are interrelated and can be shown as a problem tree consisting of causa, which is the cause of the main problem, core problem, which is the priority problem of the existing problems in the client, and effect, which is the result of the main problem (Muhith, 2020 dalam Handayani, 2023).

Based on the problem tree according to Wulandari (2019) the main diagnosis in Mr. S's case was sensory perception disorder: auditory hallucinations (D.D0085). S is sensory perception disorder: auditory hallucinations (D.D0085). Additional diagnoses include situational low self-esteem, social isolation, risk of violent behavior, and self-care deficits. This is consistent with Mr. S's case report, who hears commanding voices and S, who heard commanding voices and exhibited isolation and anxiety behaviors.

This is in line with his research Aeni dkk. (2023) explained that the nursing problem that arose was sensory perception disorder: hallucinations with assessment data that the client said he heard strange voices, his voice told the client to be angry, 1x day sometimes appears during the day or night, appears when the client is alone, the client is daydreaming, the client says the voice is like a man and a woman, the client's response when hearing the client's voice is only silent.

3.3 Nursing Interventions

Nursing intervention is a treatment carried out by nurses based on knowledge and clinical judgment in order to achieve the desired outcome (PPNI, 2018). Interventions applied to patients consist of three stages or implementation strategies (SP) in Table 2.

This intervention is in line with the research Syahra dkk. (2023) that the implementation strategy (SP) carried out to overcome hallucinations, SP 1, which involves building trusting relationships and rebuking hallucinations, SP 2, which involves conversing with others, and SP 3, which involves practicing controlling hallucinations in a verbal way such as speaking when hallucinations appear.

Table 2. Nursing Interventions

Implementation Strategy (SP)	Intervention
SP 1	Identify hallucinations: content, frequency, time of occurrence, precipitating situation, feelings, responses, practise controlling hallucinations by shushing and include in the activity schedule for shushing practice.
SP 2	Improvement of rebuking activities, training on how to control hallucinations with medication and incorporating rebuking training into the activity schedule and taking medication.
SP 3	Improvements were made in the activities of chastising and taking medication, controlling hallucinations by talking during hallucinations and incorporating into the schedule the activities of chastising, taking medication and talking and incorporating into the schedule the activities of chastising, taking medication, talking and daily activities.

3.4 Nursing Implementation

Implementation is doing nursing by the patient. Things that must be taken into account when implementing implementation are nursing actions that will be implemented implementation of patients with hallucinations is carried out with interaction when implementing nursing, nurses must first carry out (Aldam & Wardani, 2019).

Melaksanakan tindakan keperawatan terhadap Tn. Mr. S with the problem of sensory perception disorders: auditory hallucinations

with interventions to control hallucinations by rebuking hallucinations, training to use drugs regularly, training how to control hallucinations by talking, incorporating into a daily schedule, and evaluating activities in rebuking, taking medicine, and talking.

3.5 Nursing Evaluation

Evaluation is a planned, ongoing and measurable activity in which patients and health professionals determine patient improvement toward the goals or outcomes of care planning by performing intellectual actions in completing the nursing process that demonstrate success for nursing diagnoses, intervention planning and implementation. The evaluation process allows nurses to monitor what is happening during the review, analysis, planning and implementation of interventions (Adinda, 2019).

On evaluation. The patient showed significant improvement in the ability to control hallucinations through the method of rebuking and speech training. After three days, the patient reported that the frequency of voices heard was reduced and could focus more on daily activities.

Tabel 3. Nursing Evaluation

Results	Initial assessme nt	Post intervention
Frequency of hallucinations	3-4 times a day	Reduced to 1-2 times a day
Self-control over hallucinations	Uncontrol led	Demonstrating control through scolding
Participation in daily activities	Low	Increased participation in scheduled tasks

Three days of intervention with this technique showed a decrease in the frequency of hallucinations and an increase in the patient's ability to control their symptoms. This is in accordance with his research Prasetyo dkk. (2022) which reported that a hallucination management intervention carried out within three days can help patients with auditory hallucinations to control their symptoms, this method uses a systematic nursing care approach.

CONCLUSIONS

Based on the assessment of Mr. S, a 62-yearold man who experienced auditory hallucinations, it can be concluded that sensory perception disorder: auditory hallucinations is the main diagnosis found. The assessment included identification of complaints in the form of disturbing voices, as well as observation of behaviors such as restlessness, talking to himself, and being alone. This diagnosis was obtained by combining subjective and objective data, which showed a disturbance in the patient's sensory perception.

The planned nursing interventions were carried out for 3 days, from June 22 to June 24, 2023, with strategies including: hallucination rebuking exercises, regular use of medication, training the patient to speak when hallucinations occur, and developing a daily activity schedule that aims to help the patient manage the hallucinations. Implementation of the intervention involved direct interaction between the nurse and the patient, with a focus on providing control over the hallucinations experienced by the patient.

Evaluation conducted after three days of intervention showed that the patient was able to maintain a trusting relationship with the nurse, narrate the content and frequency of hallucinations experienced, and successfully control hallucinations through the techniques that had been taught. In addition, the patient was able to follow the daily activity schedule that had been developed, which showed progress in symptom management.

An intervention approach involving the management of hallucinations through behavioral methods and daily activities was found to be effective in helping patients control hallucinatory symptoms. It also shows the importance of nursing management that focuses on patient engagement in daily activities as well as medical support such as regular medication use. However, there are limitations to this study, namely the limited duration of three days of intervention and limitations in monitoring the long-term effects of the intervention.

ADVICE

It is expected that clients are able to independently carry out nursing actions that have been trained to them. For Iryou Houjin Aiwakai, it is expected to improve the quality of services, especially in applying mental nursing care, especially in cases of Sensory Perception Disorder with Auditory Hallucinations. Proper application of nursing care is very important, because negligence in its application can slow down the patient's healing process or even worsen the patient's condition.

For Harapan Bangsa University, the results of this case study are expected to be used as material for learning, especially in the field of nursing for patients with hallucinations in listening. It is also hoped that these results will facilitate the use of the facilities provided for students, so that they can develop skills and knowledge through report writing and clinical practice. Future research is expected to develop studies of longer duration and involve more indepth measurement of the long-term impact of the intervention on patients' quality of life as well as its effectiveness in the management of hallucinations in the wider community.

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