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Nursing Care for Sensory Perception Disorder in Auditory Hallucinations with Occupational Therapy: Case Study

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Abstract: This paper aims to analyze mental health nursing care in patients experiencing sensory perception disorder, specifically auditory hallucinations, who receive occupational therapy through drawing at the Camar Room of the West Java Provincial Mental Hospital. The research method employed is a descriptive approach with a case study involving one patient, supported by Evidence-Based Practice (EBP). The findings suggest that occupational therapy through drawing is effective in reducing the symptoms of auditory hallucinations in schizophrenia patients. This therapy can be considered as a non-pharmacological alternative for managing auditory hallucinations in patients with sensory perception disorders.

Keywords: Auditory Hallucinations, Schizophrenia, Occupational Therapy Drawing

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Introduction

Mental health disorders, particularly those involving sensory perception disturbances such as auditory hallucinations, represent a significant public health concern. Sensory perception disorders occur when individuals experience changes in the type and number of stimuli they receive, either from external or internal sources, leading to exaggerated, diminished, or distorted responses. This can result in symptoms like hallucinations, where patients may talk to themselves, laugh without reason, or respond to voices that are not real. Schizophrenia is one of the most common mental illnesses associated with sensory perception disturbances, especially auditory hallucinations, which affect up to 70% of individuals with this condition. Even after receiving antipsychotic medication, approximately 50% of patients continue to experience recurrent auditory hallucinations (Sari et al., 2022).

One promising non-pharmacological approach to managing hallucination symptoms in schizophrenia is occupational therapy through drawing. This therapeutic activity utilizes art as a medium to help patients express emotions, manage behaviors, enhance self-awareness, and develop social skills. Drawing therapy also aims to improve reality orientation, reduce anxiety, and boost self-esteem. Research has demonstrated that drawing interventions can significantly reduce the signs and symptoms of auditory hallucinations in patients with schizophrenia. For example, a study conducted Daerah (RSJD) at Rumah Sakit Jiwa Provinsi Lampung found that seven days of drawing occupational therapy led to a reduction in auditory hallucination symptoms by 66% in one patient and even 100% in another (Sari et al., 2022).

The effectiveness of drawing occupational therapy is further supported by other studies showing a

significant decrease in hallucination scores before and after the intervention, with strong statistical significance (*p* < 0.05) (Sari et al., 2022; Yuliana & Wahyuni, 2020). This therapy not only helps reduce the frequency and intensity of hallucinations but also positively impacts patients' ability to divert attention from hallucinations and improve their emotional expression. Therefore, drawing occupational therapy can serve as a valuable adjunct to pharmacological treatments, assisting patients with schizophrenia in managing auditory hallucinations and enhancing their overall quality of life and well-being.

Method

This study was a descriptive study design with a case study approach, focusing on a single mowan patient, who received treatment at Provincial Mental Hospital. The patient was diagnosed with schizophrenia and experienced auditory hallucinations. Occupational therapy through drawing was implemented over four days, with each session lasting 45 minutes. Data was collected through direct observation, patient interviews, and hospital records to evaluate the patient's condition before and after the intervention. Evidence-Based Practice (EBP) principles were incorporated into the therapy plan to ensure that the approach is both effective and grounded in the latest research.

Result and Discussion

The observations revealed a significant decrease in the frequency and intensity of auditory hallucinations in Mrs. D after undergoing occupational therapy through drawing. Initially, the patient reported hearing commanding voices that instructed her to perform specific actions, which caused considerable distress and anxiety. These symptoms are consistent with the diagnostic criteria for schizophrenia, particularly symptoms such as auditory hallucinations (American Psychiatric Association [APA], 2022). However, during the therapy sessions, Mrs. D was able to focus on drawing as a form of creative expression, which provided a healthy distraction from her hallucinations. This shift in attention helped reduce her engagement with the voices, suggesting that the therapy facilitated cognitive refocusing - a mechanism supported by previous studies (Sari et al., 2022). Furthermore, Mrs. D demonstrated improved mood and emotional regulation following the intervention. This aligns with research indicating that art-based therapies can enhance emotional processing and reduce affective symptoms in schizophrenia (Uttley et al., 2015).

These findings contribute to the growing body of evidence supporting the efficacy of non-pharmacological interventions for schizophrenia,

particularly for patients with residual symptoms despite adequate antipsychotic treatment (Jauhar et al., 2022). While antipsychotics are effective in managing positive symptoms such as hallucinations and delusions, many patients continue to experience debilitating negative symptoms (e.g., social withdrawal, avolition) and cognitive impairments, which are less responsive to medication (Galderisi et al., 2021). This underscores the need for adjunctive therapies that target functional recovery and quality of life.

Occupational therapy, particularly through art-based interventions such as drawing, has demonstrated significant benefits in both symptom management and psychosocial rehabilitation (American Occupational Therapy Association [AOTA], 2020). Structured creative activities like drawing can enhance emotional regulation, reduce stress, and improve cognitive flexibility by engaging neural pathways involved in executive functioning and emotional processing (Uttley et al., 2015). Moreover, art therapy has been shown to improve self-efficacy—a critical factor in recovery—by providing individuals with a sense of mastery and accomplishment (Chiang et al., 2019).

Beyond symptom relief, occupational therapy promotes functional recovery by facilitating social engagement and community reintegration (Hancock et al., 2023; Lee et al., 2021). Group-based art interventions, for instance, create opportunities for interpersonal interaction, thereby reducing social isolation—a common challenge in schizophrenia (Richardson et al., 2017). Such approaches align with recovery-oriented care models, which emphasize personal empowerment, skill-building, and meaningful participation in daily life (Slade et al., 2017; Leamy et al., 2015; Tse et al., 2016).

Given these benefits, integrating occupational therapy, including creative modalities like drawing, into standard treatment protocols may offer a more holistic approach to managing schizophrenia. Future research should further explore optimal implementation strategies and long-term outcomes of these interventions.

Conclusion

In conclusion, occupational therapy through drawing proved to be an effective method for reducing auditory hallucinations in schizophrenia patients. This intervention can serve as a valuable non-pharmacological option in the treatment of sensory perception disorders, particularly in mental health care settings. Given the positive results observed in this case study, it is recommended that mental health institutions consider incorporating occupational therapy through drawing as part of their therapeutic practices. Future research with larger sample sizes and diverse patient

groups is needed to further explore the long-term benefits and generalizability of this therapy.

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Author Contributions

For research articles with several authors, a short paragraph specifying their individual contributions must be provided. The following statements should list the different contributions of individuals to a research project. It includes conceptualization, methodology, software, validation, formal analysis, investigation, resources, data curation, writing, visualization, supervision, project administration, and funding acquisition. All authors have read and agreed to the published version of the manuscript.

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Conflicts of Interest

The authors declare no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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