

# Management of Visual Hallucinations in Schizophrenia Patients in Mental Rehabilitation Settings: A Nursing Case Study

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**Abstract:** One of the most common positive symptoms is hallucinations, including visual hallucinations, which can significantly interfere with a patient's daily functioning. Proper management of visual hallucinations is essential to improving the patient's quality of life. This case study aims to examine the implementation of nursing care for patients with visual hallucinations due to schizophrenia and to evaluate the effectiveness of the interventions provided in reducing hallucination symptoms. This study uses a case study design with a qualitative approach. The research subject is a 28-year-old male patient who experiences visual hallucinations due to schizophrenia. Data collection was conducted through interviews, observations, and nursing documentation during the treatment period at the Garut mental rehabilitation clinic. The results of the assessment showed that the patient experienced visual hallucinations in the form of black shadows that followed his movements. The main nursing diagnosis that emerged was sensory perception disorder: visual hallucinations. The interventions provided included reality therapy, group activity therapy, health education, and pharmacotherapy. After 14 days of treatment, there was a decrease in the frequency of hallucinations from 8-10 times/day to 2-3 times/day. Comprehensive nursing care with a holistic approach proved to be effective in managing.

**Keywords:** Implementation Strategy, Low Self-Esteem, Psychiatric Nursing Care, Schizophrenia, Visual Hallucinations

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## Introduction

Mental health is a condition in which individuals are in good health in terms of cognitive, emotional, physical, behavioural, and social aspects, enabling them to carry out their responsibilities. In addition, these individuals also function well in their environment, fulfil their roles as people, and feel satisfied in their social relationships (Viedebeck, 2020).

Mental disorders are conditions in which the functions of the mind, emotions, will, and verbal and psychomotor behaviour are impaired, resulting in a series of clinical symptoms in the sufferer, thereby disrupting the individual's human functioning. Mental disorders are characterized as maladaptive responses to

the environment, evident in thoughts, feelings, and behaviours that do not conform to local social and cultural norms, thereby affecting the individual's social, occupational, and physical functioning, commonly known as schizophrenia (Sari and Maryam, 2020). Schizophrenia is a neurological disorder that affects a patient's thinking, perception, communication, emotions, and social behaviour (Zainuddin and Hashari, 2019). The mortality rate among schizophrenia patients is eight times higher than that of the general population. Among schizophrenia patients, 20-30% attempted suicide, and 10% of them survived. Those who experience schizophrenia usually show a tendency to withdraw from social and personal interactions, live in

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their own world, and experience excessive hallucinations. Hallucinations are perceptual disturbances in which a person senses something that is not happening, experienced through the senses without any real stimulation or stimulus (Livana et al., 2018).

Based on the 2018 Basic Health Research (Risksedas), around 20% of Indonesia's total population, which reaches around 250 million, experiences mental disorders. According to data from the West Java Provincial Health Office, health services for severe ODGJ in West Java in 2023 reached 92.71%. Districts/cities reported a target of 69,032 people with severe psychiatric illness and 63,998 received health services. Meanwhile, the prevalence of people with mental disorders receiving services in Garut District from 2023 to 2024 was recorded at around 3,935 people, including 1,988 people with bipolar affective disorder, 1,353 people with schizophrenia, 389 people with drug abuse, and 205 people with mental retardation (Dinkes, 2024).

Based on the report from the Nur Ilahie Assanie Mental Rehabilitation Clinic, data for 2025 shows that the total number of inpatients reached 39 people. Twenty-five people hallucinated, eight people had low self-esteem, three people were at risk of violent behaviour, and three people had delusions. Hallucinations ranked first with the highest number of cases. This could be due to a lack of support and attention from family and the community, which, if not addressed immediately, could lead to an increase in hallucinations in the community. Based on the above background, the author was interested in conducting nursing interventions on clients experiencing hallucinations.

It turns out that hallucinatory mental disorders rank first out of four types of mental disorders. This is because the number of hallucinatory mental disorder cases at the Nur Ilahie Assani Samarang clinic is quite high, and it is necessary to improve mental health to prevent an increase in hallucinatory mental disorder cases if the issue is not addressed immediately.

From the above explanation, it can be concluded that mental disorders involving sensory perception hallucinations are a serious issue that can have adverse effects on individuals experiencing them and their surroundings if not addressed promptly. Therefore, the author feels it is necessary to compile a scientific paper entitled "Mental Health Nursing Care for Mr. Y with Sensory Perception Disorders: Visual Hallucinations with a Diagnosis of Schizophrenia at the Nur Ilahie Assani Samarang Mental Rehabilitation Clinic in Garut District."

## Method

This research uses a descriptive method in the form of a case study through a nursing process approach. Data collection techniques included observation, interview, documentation study, literature method, physical examination, and active participation. Observation was done by directly observing the client's condition, while interviews collected verbal and nonverbal data from clients and nurses. Documentation study included analysis of medical records and client status of Mr Y, while literature method was conducted by reviewing literature from various sources. Physical examination included checking the vital signs and general condition of the client, as well as active participation in the provision of nursing care to obtain direct data.

## Result and Discussion

The case study results show that the client, a 64-year-old male with a medical diagnosis of schizophrenia, experienced two main nursing problems during the assessment on 22 April 2025. The first issue was sensory perception disorder in the form of visual hallucinations, where the client reported frequently seeing shadows of supernatural beings in the form of "jinn" accompanying him, especially when he felt alone or felt that his family was in danger. The second problem was chronic low self-esteem, characterized by feelings of shame in relation to other people, feeling worthless and unappreciated due to the failure of his marriage (divorce) and the stigma of mental illness. Objectively, the client often appeared to be daydreaming, keeping to himself, talking to himself, and showing a lack of eye contact when interacting with others.

The nursing actions carried out over four days included the application of implementation strategies (IS) for both diagnoses. Interventions for hallucinations included four strategies, namely scolding the hallucinations, talking to other people, doing scheduled activities, and adhering to medication. Meanwhile, interventions for low self-esteem focused on identifying positive aspects of the self and training daily activity skills, namely making the bed and playing chess. The final evaluation showed positive results, in which the client was able to control hallucinations, perform daily activities independently and on a schedule, and take medication regularly, so that the nursing problems were resolved.

The discussion on hallucination management shows that the generalized implementation strategy (IS) approach has proven effective in breaking the cycle of hallucinations in patients. The client's ability to distract and shift focus through conversation and scheduled activities helps reduce the frequency of visual

hallucinations. This success is also supported by the client's compliance with pharmacological therapy using Stelosi, Hexymer, and Clozapine, which play a role in stabilizing psychotic symptoms. This confirms that the combination of cognitive behavioural management and medical compliance is key to stability in schizophrenia patients with visual hallucinations.

Regarding low self-esteem, interventions focused on exploring positive aspects have proven effective in boosting clients' self-confidence. Family breakdown, which is a major precipitating factor for clients' feelings of shame, can be mitigated through positive reinforcement when clients successfully perform simple activities such as tidying their beds and playing chess. Involvement in activities that match clients' interests and abilities gives them a sense of self-worth and reduces the feelings of uselessness that previously dominated their thoughts.

An interesting finding in this study is the gap between theory and field conditions regarding the diagnosis of social isolation. Theoretically, patients with schizophrenia who experience hallucinations and low self-esteem are often accompanied by social isolation. However, in Mr Y's case, this diagnosis was not confirmed because the client was cooperative, adaptable, and able to interact well with nurses and fellow patients in the rehabilitation environment. This indicates that a supportive rehabilitation clinic environment and good patient adaptation can prevent the manifestation of socially isolated behaviors even in the presence of other psychotic symptoms.

### Conclusion

Based on the discussion, there is a gap between theory and real cases in the field where the diagnosis of Social Isolation in theory was not found in Mr. Y because the client was able to adapt and socialize well in the clinical environment. The focus of nursing care is directed at two emerging problems, namely Sensory Perception Disorders: Visual Hallucinations (seeing spirits when alone or feeling threatened) and Low Self-Esteem triggered by past domestic failures. The author implemented nursing care using Implementation Strategies (IS) 1 to 4 for hallucinations (shouting, talking, scheduled activities, and medication compliance) and IS 1 and 2 for low self-esteem (training positive skills such as tidying the bed and playing chess). The final evaluation showed that after four days of treatment, the problems were resolved as the client was able to control the hallucinations and perform positive activities independently.

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