

5 **Mozart Music Therapy for Improving Productivity Daily Living on
Schizophrenia's Patient with Bullying Experience Background: A Case Study
in West Java, Indonesia**

Rohman Hikmat ^{1,*}, Taty Hernawaty ², Indra Maulana²

10 ¹ Faculty of Nursing, Universitas Padjadjaran, West Java, Indonesia

² Department of Mental Health, Faculty of Nursing, Universitas Padjadjaran, West Java,
Indonesia

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Abstract

Auditory hallucinations are nursing problems that often occur in schizophrenic patients. These
problems can occur due to traumatic experiences such as bullying and violence. One of the
treatments for auditory hallucinations is nursing intervention with music therapy. The aim of this
20 study was to describe nursing care in patients with auditory hallucinations. The research sample
was one patient with auditory hallucinations at the Klinik Nur Illahie, Indonesia. The data
collection process was carried out by interviewing and observing. The instrument used a mental

assessment questionnaire. The results showed that the patient had a sensory perception disorder: auditory hallucinations. Patients were given nursing interventions, namely hallucinations management and Mozart music therapy. Patients are given deep breathing relaxation exercises prior to music therapy. Mozart music therapy is given to the patient for 10-15 minutes to relax and reduce the patient's hallucinations. After being given nursing intervention for 3 days, the patient is able to control his hallucinations and can be active together with other patients. Nursing interventions with hallucinations management and Mozart music therapy can be given to patients with auditory hallucinations and have been shown to be effective in controlling hallucinations and increasing patient productivity.

Keywords: Hallucination, Music Therapy, Nursing Interventions, Schizophrenia, Patients

history

Schizophrenia is a brain disorder disease characterized by disorganized thoughts, delusions, violent behavior, and strange or catatonic behavior (Gaebel and Zielasek 2015). According to data from the World Health Organization (2019), there are 20 million people, worldwide experiencing schizophrenia (Mohammadzadeh et al. 2019). The prevalence of schizophrenic disorders in Indonesian society in 2018 reached around 400,000 people / 1.7 per 1,000 population (Kementarian Kesehatan RI 2019). As many as 70% of schizophrenic patients experience hallucinations which is a psychotic disorder that can be characterized by major disturbances of thought, perception, emotion and behavior (Guo et al. 2016; Schnack et al. 2016).

Schizophrenia can occur due to traumatic experiences in the past and also genetic factors. Traumatic experiences experienced by patients can result in mental health problems such as stress and depression. Problems experienced continuously can cause psychiatric nursing

problems such as hallucinations, low self-esteem, social isolation, and violent behavior. Traumatic events can be in the form of physical or verbal violence and bullying. This results in patients experiencing mental health problems that continue to become schizophrenia.

50 Hallucinations are the loss of an individual's ability to distinguish between internal stimuli (thoughts) and external stimuli (the outside world) (Ratcliffe and Wilkinson 2016). The symptoms that can be observed in patients with hallucinations include talking or laughing to themselves, getting angry for no reason, pointing in a certain direction, being afraid of something that is not clear, smelling like they are not there, covering the nose (Goghari and Harrow 2016; 55 Schambeck et al. 2022; Yang et al. 2020). The client gives a perception or opinion about something he hears without a real object or stimulus. For example, the patient says and hears something even though no one is speaking (Baumeister et al. 2017; Hugdahl et al. 2015; Scarselli et al. 2022).

 The types of hallucinations that commonly occur in schizophrenic patients are 70% 60 auditory hallucinations, 20% visual hallucinations, and other types of hallucinations, namely pronunciation, tactile, and kinesthetic hallucinations, include 10% (Xie et al. 2018; Yosep, Hikmat, and Mardhiyah 2023). Auditory hallucinations occur in the absence of external stimuli, even though the impact of something imaginary is in the form of human perception (Cai et al. 2022; Cimino 2022; Yosep, Hikmat, and Mardhiyah 2022). The symptoms of patients with 65 auditory hallucinations are the patient seems to be talking or laughing to himself, the patient is angry with himself, and covers his ears because the patient thinks someone is talking to him (Ahn et al. 2022; Hosseini et al. 2021).

 Patients with hallucinations if not handled properly will have bad consequences for the patient himself, his family, others and the environment (Hugdahl et al. 2015). Handling patients 70 with hallucinations can be done with nursing strategies, namely helping clients recognize and control the contents of hallucinations. Previous studies have shown that nursing interventions by

rebuking the contents of auditory hallucinations can reduce hallucinatory symptoms (Yang et al. 2015). In addition, other studies have shown that auditory hallucinations can be overcome with group activity therapy interventions (Aynsworth, Collerton, and Dudley 2017). Another study shows that nurses can provide music therapy to reduce hallucination symptoms in auditory hallucination patients (Štillová et al. 2021). The above data shows that nursing interventions still focus on independent interventions by nurses, so interventions that can be carried out by patients independently are needed.

According to the medical records of the Klinik Nur Ilahie, Garut Regency, Indonesia the prevalence of hearing hallucinations was 18 out of 33 people on June 24, 2022. One of the auditory hallucinations patients was Mr. B who hears whispers like "*Don't lie, don't betray, I'm your God*". Based on these data, nursing interventions are needed to overcome auditory hallucinations in patients at the Nur Divinee Rehabilitation Clinic, Garut Regency, Indonesia. The aim of this study was to describe nursing care with Mozart music therapy on patients with auditory hallucinations in Klinik Nur Ilahie, Garut Regency, West Java.

This study used a case study with qualitative design form using a nursing care approach. Nursing care includes the assessment process, nursing diagnoses, intervention planning, nursing implementation, and nursing evaluation (Toney-Butler and Thayer 2022). The case study subjects used were patients with auditory hallucinations at the Klinik Nur Ilahie, Garut Regency. The case study was conducted for ten days, starting on 27 June to 6 July 2022. Data collection was carried out by observation and interviews. The authors used informed consent to patients before carrying out nursing assessments and interventions for patients. Licensing to carry out the provision of nursing care has been carried out by the Faculty of Nursing, University of Padjajaran to the Klinik Nur Ilahie. The assessment instrument used a mental disorder patient

assessment format from the Faculty of Nursing, Universitas Padjadjaran, as well as a strategy for implementing nursing actions in patients with auditory hallucinations. The data obtained from the results of the patient assessment were adjusted to interviews with nurses and patient medical records. The data are also grouped so that they can formulate a nursing diagnosis. Nursing diagnoses that appear to be a reference for the authors in carrying out interventions and evaluations in patients with auditory hallucinations.

Clinical Presentation

Based on the results of the study, it was found that the patient entered the clinic because he was often daydreaming and angry. This incident resulted from a divorce from his wife. The patient had also been treated in a mental hospital and was diagnosed with schizophrenia. The patient also said that he was often bullied verbally because he was fat and had tattoos. This situation causes patients to be insecure and often attack other people because they do not accept the bullying they receive.

Then the condition was worsened because the patient's biological mother died so that the patient did not take medication regularly. When interviewed, the patient complained of hearing incoherent voices, the last sentence the patient heard was "I am your God". The sentence is heard repeatedly every day, especially when the patient is alone. The patient performs dhikr when auditory hallucinations are felt. Hallucinations sometimes disappear, sometimes not. The medical diagnosis recorded in the patient's medical record was schizophrenia.

Diagnostic testing

Based on the above data assessment, a nursing diagnosis of sensory perception disorder was found: auditory hallucinations. The data that supports the authors in determining the nursing diagnosis of auditory hallucinations is that the client says he hears voices that are not clear. The

120 sentence that is heard is "I am your God". Clients often hear whispers from several people, male
and female. Then the client is difficult to concentrate and easily distracted. The authors used
nursing intervention classification guidelines. Management of hallucinations that are planned to
be carried out on patients include those that are carried out on patients including reviewing
behaviors that show hallucinations, assessing the content of hallucinations, providing a safe and
125 comfortable environment, discussing feelings and responses to hallucinations, recommending
talking to trusted people, teaching how to control hallucinations to collaborate with doctors to
provide drugs.

The authors has intervened by giving the patient an application of Mozart's music for 10
minutes within 3 days. Before being given Mozart music therapy, the patient has been asked to
130 relax by taking deep breaths. Relaxation has been done by patients to increase focus in following
music therapy. This therapy is based on previous research which states that Mozart's music is
effective for calming the nerves, and can help clients who experience auditory hallucinations.
The results of this study indicated that Mozart's music is effective in reducing auditory
hallucinations experienced by schizophrenic patients.

135 After nursing actions and providing music therapy for three days, it was found that the
problem of sensory perception disorders: auditory hallucinations decreased. This can be seen
from patients who are able to control their hallucinations, the frequency of hallucinations has
decreased, and patients have doing activities with other people. So that the provision of nursing
interventions can be continued to overcome the problem of auditory hallucinations.

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Assessments

The assessment carried out on the patient, found the presence of several symptoms that
lead to a diagnosis of sensory perception disorder: auditory hallucinations associated with

145 psychotic disorders. Sensory perception disorders: auditory hallucinations are hearing whispers, feeling appropriate through the sense of hearing, acting as if hearing, having poor concentration, and talking to themselves (Toney-Butler and Thayer 2022). Auditory hallucinations are a condition where patients experience sensory perception disorders with the feeling of hearing voices that are not real and are ordered or called to perform an activity (Serino et al. 2014).

150 Conditions that caused auditory hallucinations are discontinuation of treatment for schizophrenia and problems that trigger stress, namely the death of a parent. In addition, the patient had also experienced a relapse when he divorced his wife. Hallucinations can be caused by several concomitant factors such as not taking medication as recommended, not carrying out regular doctor controls, stopping treatment without the approval of health workers, especially doctors, lack of family and community support, and severe life problems that trigger stress (Toh, 155 Thomas, and Rossell 2015). This is in line with previous research which states that the precipitating factors that cause auditory hallucinations are the absence of communication, closed communication, heredity and family who do not know how to give the right intervention when the client is at home (Baumeister et al. 2017).

160 One of the causes of schizophrenia is traumatic experiences such as bullying. Forms of bullying can be physical or verbal. The form of bullying experienced was verbal. This is in line with previous studies which show that verbal bullying can cause mental health problems such as stress and depression (Singla et al. 2021; Yosep, Hikmat, Mardhiyah, et al. 2022). The impact of mental health that is experienced continuously can cause mental nursing problems such as hallucinations and social isolation (Wu, Luu, and Luh 2016; Yosep, Hikmat, and Mardhiyah 165 2022). Meanwhile, other studies show that the impact of bullying is the emergence of violent behavior in victims (Koh 2016).

The intervention planning that will be given to the patient is the management of hallucinations and music Mozart therapy. The intervention aims to reduce signs and symptoms of

auditory hallucinations, namely decreased whispering, decrease sensory distortion, decrease
170 hallucinatory behavior, increased concentration and orientation. Hallucinations management
interventions are carried out by observing hallucinatory behavior, monitoring the content of
hallucinations, maintaining a safe environment, discussing feelings and responses about
hallucinations (Colucci 2014). This is in line with previous research showing that hallucinatory
management interventions can reduce auditory hallucinations symptoms (Štillová et al. 2021).
175 Hallucinations management therapy has also been shown to be more effective than occupational
therapy in reducing auditory hallucinations symptoms (Moseley et al. 2018; Zhou et al. 2015).

Mozart music therapy is an effective music therapy in reducing the symptoms of auditory
hallucinations. Mozart music therapy performed for 20 minutes can relax patients with auditory
hallucinations. Previous research on Mozart music therapy can also be carried out to reduce
180 stress symptoms (Štillová et al. 2021). Mozart music therapy is also believed to reduce
depressive symptoms in schizophrenic patients (Moseley et al. 2018). The results of previous
studies showed that Mozart music therapy was more effective in reducing the intensity of
auditory hallucinations and sleeping more quietly than classical music therapy (Barus and
Siregar 2020).

185 The results of the case study show that the implementation of hallucinations management
and Mozart music therapy for three days can reduce the symptoms of hallucinations. The patient
is also able to cope with hallucinations, is able to carry out social activities, is able to sleep
peacefully, and concentrates more when invited to a conversation. This is in line with previous
research showing that the management of hallucinations in hearing patients can increase patients
190 to be more productive in their activities (Gawęda et al. 2015; Gawęda, Holas, and Kokoszka
2013). In addition, hallucinating patients who were given hallucinatory management therapy also
reduced symptoms of depression and loneliness experienced by schizophrenic patients (Liao et
al. 2015; Yang et al. 2015). Other studies have also shown that Mozart music therapy can

195 overcome the symptoms of auditory hallucinations if carried out for 3-7 days (Nordberg et al.
2021).

The limitation in this study is that the intervention time is limited to 3 days. So that the implementation process cannot be carried out comprehensively to assess patient habits. This research is also limited to providing nursing interventions that are carried out at 8 am to 5 pm. The patient's progress cannot be monitored outside of this time. The data from the assessment
200 also cannot be compared with data from the family, so there is no supporting data to validate the data obtained.

The results of the study showed that the patient had symptoms of sensory perception disorders: auditory hallucinations which were characterized by the presence of voices that were not clearly heard by the patient. Patients were given nursing interventions, namely
205 hallucinations management and Mozart music therapy. After being given the intervention for 3 days, the patient was able to control the hallucinations, the frequency of hallucinations appeared reduced, and the patient had started participating in activities together with others. The implication of this research is that it can be used as a basis for nurses in performing nursing interventions on hallucinatory patients and can be a guideline for health facilities to make
210 policies for interventions in auditory hallucinations patients.

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