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EFFECT OF COGNITIVE BEHAVIOUR THERAPY (CBT) TOWARD PATIENTS WITH RISK FOR VIOLENCE AND HALLUCINATIONS IN dr. RM SOEDJARWADI KLATEN MENTAL HEALTH HOSPITAL

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ABSTRACT

Background: Most of patients diagnosis in dr.RM. Soedjarwadi Klaten mental health hospital are schizophrenia. They were treated because of their symptoms such as violence behavior and hallucination (43, 48%). CBT is effective for reducing symptoms and signs of violence behavior and hallucination in schizophrenia. This study aimed to describe the effect of CBT for changing the cognitive, affective and psychomotor patients with risk for violence behavior and hallucination who treated in inpatient ward dr.RM.Soedjarwadi Klaten mental health hospital. Methods: The design used in this study was Quasi Experimental Pre-Post Test with Control Group. Purposive sampling was used for taking respondents. A number of 56 respondents were divided into 28 cases and 28 control group. Data were analyzed by dependent and independent t-test. Results: CBT decreased symptoms of risk for violence behavior and hallucinations for patients (p-value < 0.05). The ability of adaptive cognitive, affective and behavioral patients who have treated with CBT were increased significantly (pvalue of <0,05) Decreasing symptoms of risk for violence behavior showed around 48% and hallucination around 47%. Increasing the ability of cognitive, affective and behavioral patients with violent behavior and hallucinations up to 57%. Conclusion: CBT was recommended as a therapeutic nursing intervention for patients with risk for violence behavior and hallucinations in dr. RM.Soedjarwadi Klaten mental health hospital.

Keywords: Schizophrenia, risk for violence behavior, hallucinations, cognitive behavior therapy (CBT).

Introduction

Schizophrenia is a severe mental health disorder with violent behavior and hallucinations as the main problem of their behavior. Ministry of Health (2003) noted that 70% of Indonesia's largest psychiatric disorder is schizophrenia. Mental health hospital Dr.RM.Soedjarwadi Klaten have patients who were treated with the risk for violence behavior, hallucinations and low self esteem up to 27.98%, patients with risk violence behavior and low self-esteem around 28.54%, patients with the risk for

violence behavior and hallucinations were 43,48% (reports from each ward of mental health hospital Dr. RM. Soedjarwadi Klaten, 2013). Mental health nurse give cognitive behavior therapy as treatment for schizophrenia patients with hallucinations and risk for violence behavior (Varcarolis, Carson & Shoemaker, 2006). The research have been conducted by Fauziah (2009) shown that 13 patients with schizophrenia who have experience of being treatment with CBT can shown that their symtomps violence behaviors that CBT can improve

the cognitive abilities of 60% and 66% of the patients's behavior. Wahyu (2010) in his study of 28 patients who had hallucinations of schizophrenia found that cognitive behavior therapy (CBT) can reduce the symptoms of hallucinations by 34.5%, while the ability to control hallucinations increased to 18%. This shows that CBT is effective in reducing symptoms of signs of violent behavior and hallucinations in schizophrenia patients.

Methods

Quasi Experimental Pre-Post Test with Control Group was used in this study. The case group was patient schizophrenia that Cognitive Behaviour Therapy (CBT) was given to them by mental health nurse speciaist. The sampling technique used in this research is purposive sampling. Respondents were 56 people which it was consist of 28 people into a control group and 28 people as a case group. Statistical analysis used univariate, bivariate analysis of the dependent and independent sample t-test, and Chi-square test to explain data analysis.

Results and Discussion

Characteristics of a patients with risk for violence behavior and hallucinations as case group in this study shown that sex males up to 24 (85.7%), high school education 11 (39.4%), respondents who they don't have any job were 16 (57.1%), unmarried status were 15 (53.6%). And the demographic data of control group were sex male were 19 (67.9%), high school education up to 12 (42.9%), and number of respondents who they have job were 16 (57.1%) and marital status as married were 50 %.

The average age of schizophrenia patients with risk for violence behavior and hallucinations in the intervention group and the control group were 32.4 years old or they were in the productive ages (the age range of 18 years as early adulthood to 55 years as the age of late adulthood). Frequency of hospitalization in mental health hospital of patients with risk for violence behavior and hallucinations were less than 3 times.

CBT can reduce signs and symptoms of patient with risk for violence significanly. Cognitive response patients have been decreased from 15.25 to 10.29 (p value = 0,05), emotional response have been decreased from 18.68 to 11:25 (p value=0,05), behavioral responses were significantly decreased from 16.00 to 10:36 the p value $\leq \alpha$ 0:05, social response patients dropped dramatically from 19.48 into 12.68 with p value $\leq \alpha$ of 0.05 and the physiological responses of patients have been decreased significantly from 8.46 to 5:21 to 0:05 p value $\leq \alpha$ and composites decreased patients Violence Behavior significantly from 77.86 to 49.79 that shown by p values 0:05 (p value $\leq \alpha$). Based on the results of statistical tests above it can be concluded at a 5% there is a significant reduction in symptoms (low category), both from the response of cognitive, emotional, behavioral, social, physiological and composites patients violent behavior with violent behavior after they have been given CBT therapy. CBT could decrease signs and symptomp of patients with hallucinations significanly. Cognitive response patients have been decreased from 10.29 to 8.25 (p value $\leq \alpha$

0.05); emotional responses of patients decreased significantly from 8.29 to 4.18 (p value $\leq \alpha$ 0.05), behavioral responses have been decreased significantly from 7, 79 to 4.79 with a p value $\leq \alpha$ 0:05, social response patients have been decreased from 7.93 to 4.00 with a p value $\leq \alpha$ of 0.05 and the physiological response of patients have been decreased significantly from 8.39 to 5.71 with p value $\leq 0.05 \alpha$ and composite Behavior patients Violence have been decreased from 40.64 to 23.75 with 0:05 p value $\leq \alpha$. Based on the results of statistical tests above it can be concluded at a 5% there is a significant reduction in symptoms (low category), both from the response of cognitive, emotional, behavioral, physiological and composites patients violent behavior with violent behavior after CBT therapy have been given to them.

Changes in cognitive abilities, affective and schizophrenic behavior on patients with nursing problems of violent behavior after being given CBT

- a. Cognitive changes: In this study is able to increase from 23.32 to 41.07
- b. Affective changes: In this study is able to increase of 17.14 to 29.93
- c. Changes in behavior: In this study is able to increase of 22.32 to 37.32

Based on the multiple linear regression correlation is known that age and marital status affect the patients's increased ability patients behavior with violent behavior and hallucinations (p value <0.05), with the value of r=0447 (the relationship being). Age and marital status affect the increased ability of the patients's behavior

amounted to 19.9% (R2 = 0.199). These results indicate differences in ability between the mating behavior of the patients with no mating of 6903 after being controlled by the age factor. Patients who married her ability is greater than unmarried after controlling age.

Rueckert (2000) suggest that CBT therapy can significantly reduce the anger, guilty feeling and low self-esteem. Beck said that the emotional and behavioral difficulties experienced by a person in his life due to the way how they interpret their experiences. The application of CBT in this study were trained patients recognize the events that occurred in his life including unpleasant events. Patients are also taught to recognize the feelings that arise from the way the patients to interpret the events that happened and the actions taken after experiencing these feelings. Through CBT therapy patients are trained to be able to evaluate themselves by identifying events that never happened, irrational thoughts that interfere incurred related to the incidence and affects the patients's feelings so well behaved not actually undesirable. Patients are trained to change the minds of irrational becomes rational mind so that the feeling of getting better and show adaptive behavior.

Patients will eventually realize that interpret unpleasant incident may negatively interfere with the feeling that will be pushed to do good violent behavior directed at oneself, others and the environment. This incident caused the patients group were not trained how to prevent anger with positive thinking and rational in the face of the disturbing events

as well as how to practice changing negative behaviors with positive behavior is more acceptable to other people and the environment.

CBT influence on reducing the symptoms of hallucinations in this study together with the response assessed on the symptoms of violent behavior are cognitive, emotional, symptoms of behavioral, social, and physiological. A symptoms the decrease hallucinations patients in this study is quite high and reaches a low level. This study proves that with CBT for symptoms of hallucinations can be decreased significantly even if the patients has problem, namely violent behavior. Rogers et al. (1990 in Birchwood, 2009) says that violent behavior often occurs due to the content of hallucinations in the form of an order to hurt himself or others. The threat of violence can be prevented if the patients do get optimal CBT treatment.

Stuart (2009) states CBT therapy aims to change the irrational beliefs, reasoning errors and negative statements about the existence of the individual. CBT focuses on changing the interpretation of the patients to the incident or event. Interpretation does not correspond to reality will lead to changes in emotion and behavior toward maladaptive. Frogatt (2005) also confirmed that CBT is based on the concept that emotions and behavior is the result of a thought process. The symptoms of hallucinations patients may decline due principally CBT therapy serves to change the thinking function of the patients in a positive

direction and eventually cause a pleasant feeling. Feelings that arise from positive thinking will make the patients behave constructively so that even though the patients is experiencing hallucinations but the event was not to make the patients think negatively about him. Acts of violence are often carried out by the patients schizophrenia not only because of command hallucinations but can be caused by negative interpretations of himself as a result of having hallucinations. Negative assessment of her patients are especially common in patients who have chronic hallucinations.

Improving the ability of cognitive, affective and behavioral patients Results showed that there was a significant increase in the ability of cognitive, affective, and behavioral patients in the group given CBT after intervention. The patients's ability cognitive, affective and behavioral after getting higher CBT is at a high level before the intervention while the average capacity of the patients is at a low level. Bloom (1956 in Kasan, 2005) classifies the purpose of providing education into three domains, namely cognitive, affective and psychomotor. Bloom theory underlying the assessment of the ability of a patients in this study. Cognitive abilities include intellectual aspects such as knowledge and thinking skills, the ability affective emphasis on the feelings and emotions. The ability of the latter is the behavior of emphasis on aspects of motor viewed from the patients's ability to implement CBT like to write in the workbook and the schedule of daily activities.

Increased ability significant patients group given CBT therapy because during the implementation process of therapy patients always motivated to exercise independently the tasks of the home (home work) are evaluated continuously by using a daily activity schedule, workbooks, and report cards patients development, Exercise is very important in the learning process. This statement is in accordance with that proposed by Notoatmojo (2007) which states exercise is the improvement potential of existing personnel by repeating a particular activity. Exercise is an activity which is expected to become a habituation or familiarization. Familiarization will make patients become self-sufficient in the face of events or unpleasant events including hallucinations events that can trigger violent behavior.

Improving the ability of the patients to therapy CBT can also be affected by the process of establishing new behaviors behavior through modification. Researchers applying the principles of behavioral theory to provide reinforcement (reinforcement) positive to positive behaviors that do patients and provide negative feedback to the unwanted behavior. Videbeck (2008) suggests behavior modification is a method that can be used to reinforce the desired behavior or response by providing feedback both positive and negative. Researchers also apply the principle of economy tocen the form of giving the gift of personal hygiene tools if desired behaviors performed by the patients after collecting at least 50% points star for one week. This is in accordance with the principles put forward by Stuart and Laraia (2005) which states that

specialist nursing actions that can be given to the patients with violent behavior of one of them is the token economy. Token economy in the process of implementing CBT is one type of contingency contracting where reinforcement is given in accordance with the desired behavior (Townsend, 2009). Giving token economy and reinforcement motivates the patients to implement the desired positive behavior so that ultimately the ability of cognitive, affective and behavioral therapy CBT patients after the increase which is expected to be entrenched in the patients's life even if the token is not given.

Characteristics of patients who contribute. The result showed that the age of the patients associated with an increase in the ability of the patients's behavior. Jean Peaget (1980 Fontaine, 2003) with a cognitive theory states that individuals build cognitive abilities through selfmotivated action on the environment. Adult age in its development, including formal operational period. Characteristic of this period is to obtain the ability to think abstractly, reason logically, and draw conclusions from the available information. Ability at this developmental period that makes patients better understand and be motivated implementing CBT therapy. Patients in the development stage are able to analyze that CBT therapy is given if executed properly in everyday life will help him in the face every stressors experienced.

The result showed that marital status contributed to the improvement of the ability of the patients's behavior. Patients who were married increased ability

behavior towards cognitive behavior therapy is greater than unmarried after controlled by age. Individuals who are married have a claim to be against his family. These responsibilities may motivate them to improve relationships with others including the grind to achieve the welfare of the family. CBT therapy is one way for them to re-execute its role in the family so that such obligations can be carried back.

Conclusions

Results from this study indicate that data demographic of the 56 respondents in this study shown the average of age were 33.21 years old with the youngest 18 years old and the oldest 55 years old, sex, more men, the job status were unemployement, educational status most of them were high school level, most of them unmarried status, the frequency of hospitalized an average of 2 times. Based on the results of statistical tests it can be concluded at α = 5% there was significant reduction of the signs and symptoms (low category), both from the response of cognitive, emotional, behavioral, social, physiological and composites patients with violent behavior after being given CBT therapy. While the symptoms of hallucinations occurred both a significant reduction of the response of cognitive, emotional, behavioral, social, physiological and composite symptoms of hallucinations in the group who did not receive CBT treatment after the group receiving CBT therapy intervention. For the ability of respondents it can be concluded at a 5% increase in cognitive ability, affective, and behavioral patients violent behavior and hallucinations up to 108.32 after receiving CBT which is at a

high skill level. patients's age and marital status affect the increased ability of the patients's behavior with violent behavior and hallucinations (p value <0.05), with the value of r 0447 (the relationship being). Age and marital status affect the increased ability of the patients's behavior amounted to 19.9% (R2 = 0.199). These results indicate differences in ability between the mating behavior of the patients with no mating of 6903 after being controlled by the age factor. Patients who married her ability is greater than unmarried after controlling age.

Based on the results of this study, CBT can be given to patients with mental disorders. For increasing ability of mental nurse in using CBT can be given by provide CBT training to mental health nurses. For supporting CBT therapy, Standard Operational Procedure (SOP) is needed to guide practices of CBT intervention at Dr. RM. Soedjarwadi Klaten Mental Health Hospital.

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