

CHAPTER I

INTRODUCTION

A. Background

Schizophrenia is a chronic mental disorder characterized by disturbances in individual thinking, perception, emotions, and behaviors that cause a decrease in the ability to carry out social functions and daily activities. People with schizophrenia often experience psychosis symptoms such as hallucinations, delusions, and thinking disorders that make it difficult for individuals to distinguish between reality and their internal experiences (World Health Organization, 2025). Globally, schizophrenia is still one of the significant mental health problems with about 23 million people in the world living with schizophrenia or about 1 in 345 people in the global population (World Health Organization, 2025). The high number shows that schizophrenia is still a challenge in mental health services, including in Indonesia.

Based on the 2023 Indonesian Health Survey (SKI), the prevalence of households with members with severe mental disorders such as psychosis or schizophrenia is recorded at around 4.5 per 1,000 households at the national level (Ministry of Health of the Republic of Indonesia, 2023). Based on the 2024 report of the Bengkulu Provincial Health Office, there are 3,651 people with severe mental disorders, and as many as 3,140 people (86%) have received health services. Data obtained from the Soeprapto Bengkulu Psychiatric Hospital (RSKJ) in 2024 shows that the total number of inpatients is 1,664 people, with the number of patients diagnosed with schizophrenia as many as 1,233 people. This condition is inseparable from the complexity of the causes of schizophrenia which involves various factors that interact with each other.

Schizophrenia is a disorder that has a multifactorial etiology that involves the interaction between biological, psychological, and environmental factors. Biological factors such as genetic predisposition and neurotransmitter imbalances in the brain, especially dopamine, are known to play a role in the emergence of this disorder. In addition, psychosocial factors such as severe

stress, traumatic experiences, and a less supportive social environment can also increase the risk of schizophrenia in vulnerable individuals (Stuart, 2021). The complexity of these causative factors contributes to the appearance of various symptoms experienced by schizophrenic patients.

The symptoms of schizophrenia are generally classified into positive symptoms, negative symptoms, and cognitive symptoms. Positive symptoms include hallucinations, delusions, and disorders of disorganized thought processes, while negative symptoms are characterized by reduced emotional expression, decreased motivation, and a tendency to withdraw from the social environment. Meanwhile, cognitive symptoms are related to impaired attention, memory, as well as decision-making ability (Townsend & Morgan, 2021). Of these various symptoms, hallucinations are one of the most frequent and most disturbing symptoms of the patient's condition.

Hallucinations are sensory perceptions in the absence of a real external stimulus, which can occur in various forms such as hearing, sight, smell, touch, and taste. However, in schizophrenia patients, auditory hallucinations are the most dominant type, with about 70–80% of patients experiencing it (Stuart, 2021). Auditory hallucinations are usually voices that speak to the patient, make comments, or even give specific commands. This condition is not only the main symptom, but also has the potential to cause various adverse impacts for patients.

Auditory hallucinations can have a significant impact on a patient's psychological and social condition. Patients often experience anxiety, fear, concentration disorders, and difficulty in carrying out daily activities. In addition, hallucinations that are commanding in nature can also increase the risk of aggressive behavior or actions that harm oneself and others. This impact shows that auditory hallucinations are a serious problem that requires proper and effective treatment.

Management of hallucinations in schizophrenia patients requires a multimodal approach that includes pharmacological and nonpharmacological interventions. Pharmacologically, the main recommended therapy is the administration of antipsychotics, both typical and atypical, such as risperidone,

olanzapine, haloperidol, or clozapine for resistant cases (APA, 2022). Meanwhile, nonpharmacological interventions to address the symptoms of psychosis, including hallucinations, can be carried out through various approaches such as family therapy, group therapy, activity therapy, cognitive therapy, and environmental therapy. In addition, there are also forms of expressive therapy and other activities that are often used in psychiatric nursing services, such as art therapy, game therapy, deep breathing relaxation, gymnastics or light physical activity, as well as occupational therapy such as drawing, coloring, and making crafts. In recent developments, a number of individual expression-based therapies are also widely applied, including art therapy, music therapy, and expressive writing therapy (EWT), which help patients manage emotions and distract from hallucinating experiences (Ulvita et al., 2024; APA, 2022).

Music therapy is one of the nonpharmacological interventions that is widely applied in the treatment of schizophrenia patients. The auditory distraction mechanism produced by music therapy works by blocking intrusive internal stimuli so that the patient can shift his focus away from hallucinating sounds. This is supported by research by Wawo and Raya (2025) which shows that the application of classical music therapy with a duration of 15 minutes for six consecutive days is able to significantly reduce the intensity, frequency, and duration of auditory hallucinations in schizophrenia patients. Research by Lindriyani et al. (2025) revealed that music therapy given regularly can dampen psychotic symptoms, including hallucinations and delusions, as well as improve the social and emotional functioning of schizophrenic patients. In addition, research by Aditiyana et al. (2024) reported that the administration of classical music can reduce the signs and symptoms of auditory hallucinations, as well as improve patients' ability to identify and control their hallucinations.

In addition to the relaxation approach through music, EWT is a potential psychotherapy modality to complement the management of hallucinations through cognitive and emotional approaches. Through EWT, patients can channel negative emotions and traumatic experiences in writing as a form of

catharsis that has an impact on reducing the psychological stress that causes hallucinations. The effectiveness of this method was confirmed by Nurjannah et al. (2024), which found that the application of EWT for six sessions was able to reduce hallucination signs and symptoms and improve patient self-control. In addition, EWT also plays a role in increasing self-esteem (Mustofa et al., 2024) and self-disclosure abilities (Nisaa et al., 2022), both of which strengthen patients' ability to control responses to hallucinations.

Music therapy and EWT have different approaches but complement each other. Music therapy focuses on distraction and relaxation to reduce hallucination stimuli directly, while EWT focuses on internal processes through emotional expression and processing. The combination of the two theoretically allows the patient not only to divert hallucinations, but also to understand and control them more deeply. Nevertheless, most previous studies have still examined the two therapies separately. Research that examines the combination of music therapy and EWT on the level of auditory hallucinations in schizophrenic patients is still very limited, especially in Indonesia and has not been widely conducted at the Soeprapto Hospital in Bengkulu Province.

Based on the results of observations and interviews with researchers during practice at Soeprapto Hospital, Bengkulu Province in October 2025, the management of schizophrenia patients with auditory hallucinations is still dominated by the application of generalist nursing interventions through Implementation Strategies (SP) 1–4. However, non-pharmacological actions in the form of music therapy or EWT have not been carried out as companion therapy in overcoming auditory hallucinations. In practice, patients are still found who have not been able to control hallucinations optimally, characterized by responses to internal stimuli and persistent concentration disorders. Meanwhile, research on more specific nonpharmacological interventions such as music therapy and EWT is still relatively limited in Indonesia and is mostly conducted with a small sample size and examines the two therapies separately. In fact, both therapies have complementary mechanisms in reducing hallucinations through distraction, relaxation, and emotional expression.

Therefore, the researcher is interested in conducting research on the effect of music therapy and expressive writing therapy on the level of auditory hallucinations in schizophrenia patients at Soeprapto Hospital, Bengkulu Province.

B. Problem Formulation

Auditory hallucinations are one of the most common symptoms found in schizophrenia patients undergoing inpatient treatment at the Soeprapto Hospital, Bengkulu Province. However, the treatment provided still focuses on generalist interventions (SP1-4), while complementary nonpharmacological therapies have not been widely researched. In fact, several studies have proven that music therapy and expressive writing therapy are effective in reducing auditory hallucinations.

Based on this phenomenon, the researcher formulated the problem "Is there an effect of the combination of Music therapy and Expressive Writing Therapy on the hallucination score in schizophrenic patients at RSKJ Soeprapto, Bengkulu Province?"

C. Research Objectives

1. General Purpose

To determine the effect of Music therapy and EWT on auditory hallucination scores in schizophrenia patients at Soeprapto Hospital, Bengkulu Province.

2. Special Purpose

- a. Knowing the characteristics of respondents based on age, marital status, length of time treated, frequency of treatment at RSKJ Soeprapto, Bengkulu Province.
- b. To determine the average auditory hallucination score before and after being treated in the intervention group and control group at RSKJ Soeprapto, Bengkulu Province.
- c. To find out the difference in average auditory hallucination scores before and after treatment in the intervention group and the control group at RSKJ Soeprapto, Bengkulu Province.
- d. To find out the difference in average hallucination score differences before and after treatment in the intervention group and the control group at RSKJ Soeprapto, Bengkulu Province.

D. Research Benefits

1. For Soeprapto Psychiatric Special Hospital Bengkulu Province

The results of this study can be used as a source or reference in conducting music therapy and EWT in schizophrenia patients with auditory hallucinations.

2. For Nursing Students

The results of this study can add insights, references, and scientific experience regarding psychiatric nursing interventions, especially related to schizophrenia.

3. For the Next Researcher

This study can be a reference and preliminary data for future studies that examine the influence of music therapy and EWT on hallucination scores in schizophrenia patients.