Occupational Therapy for Schizophrenia Patients in Increasing Independence in Daily Living Activities at X Mental Hospital

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Introduction

Occupational therapy is therapy to help someone master fine motor skills better. Occupational therapy is carried out to help strengthen, improve coordination and muscle skills to train motor skills.¹ Occupational therapy is a form of supportive psychotherapy in the form of activities that generate manual, creative and educational independence to adapt to the environment and improve the patient's physical and mental health.² Occupational therapy aims to develop, maintain, restore function and/or seek compensation/adaptation for daily activities, productivity and free time through training.

It is hoped that mental occupational therapy can be the right solution to overcome the

Abstract

Background: Occupational therapy is a therapy that helps someone master fine motor skills better. Occupational therapy is carried out to help strengthen, improve coordination and muscle skills to train motor skills.

Objective: This research aims to identify the effect of occupational therapy on schizophrenia patients to increase independence in daily living activities.

Method: Experimental research using pre-experiment design with pre-test and post-test research design. The sample in this research was 15 respondents with a sampling technique using Total Sampling. Data collection techniques use observation and interviews. The collected data was then processed and analyzed using the paired t-test statistical test.

Results: Based on the pre-test results, the mean (average) value before was 5.067 and after was 9.133, the median value before was 5 and after was 9, the minimum value before was 2 and after was 7 and the maximum value before was 9 and after was 11. This shows that there is a comparison before and after carrying out occupational therapy training for the independence of occupational therapy patients in the Turtledove room at DR Mental Hospital. Suharto Heerdjan Jakarta in 2021. Statistical tests show that a p-value of 0.000 means P<0.05.

Conclusion: There is an influence of occupational therapy on the independence of daily living activities in schizophrenia patients at Dr. Suharto Heerdjan Hospital.

Keywords: daily living activities, independence, occupational therapy
problems of independence, health and also improve the economy of ex-ODGJ so that they can be accepted in society and can continue living like normal people in general.\textsuperscript{3} People with Mental Disorders (ODGJ) are someone who experiences disorders of thought, behavior and feelings which are manifested in the form of a collection of symptoms and changes in behavior that have deep meaning, and can cause suffering and obstacles in carrying out their functions as human beings.\textsuperscript{4}

Schizophrenia is a chronic mental illness that causes disturbances in the thought process. People with schizophrenia cannot differentiate between reality and fantasy. This disease causes sufferers to not have the ability to think, remember, or understand certain problems.\textsuperscript{5} Paranoid schizophrenia is the type of schizophrenia that is most often found in society. The most characteristic symptom of paranoid schizophrenia is hallucinations. That is why people with paranoid schizophrenia tend to hear voices in their minds and imagine things that are not real.\textsuperscript{6} Schizophrenia is a disease that cannot be completely cured. However, some symptoms can be treated with medication and cognitive behavioral therapy, so that sufferers can carry out activities more easily.\textsuperscript{7} Based on the majority of clients with mental disorders who underwent ECT, the medical diagnosis was paranoid schizophrenia (F20.0) (53.1%). The indication for ECT for schizophrenic clients is primarily in patients with acute schizophrenic symptoms, marked positive symptoms, catatonia or affective symptoms considered most likely to respond to ECT.\textsuperscript{8}

Based on a preliminary study conducted by researchers on October 20, it was seen that nurses never carried out occupational therapy, it was only seen that patients communicated a lot with students who were practicing, and occasionally during the week patients were seen being given group activity therapy by students in terms of occupational therapy, based on observations. and saw the patient while eating being guided and directed and those who were bathing were also told that they didn't have the initiative. The aim of this research is to identify the effect of occupational therapy on schizophrenia patients in order to increase independence in daily living activities.

**Method**

This research uses descriptive research with the type of experimental research using a pre-experiment design with a pre-test and post-test research design.\textsuperscript{9} In this pre-experimental research design, this type of research aims to prove the influence of the independent variable on the dependent variable, because in this method nothing is controlled and the sample selection has been determined by the researcher according to the criteria. The design used in this research is pre-experimental design or pre-experimental method.\textsuperscript{10} The population in this study was 15 social isolation patients at Dr. Suharto Heerdjan Hospital. The sample in this research was 15 respondents with a sampling technique using Total Sampling. Data collection techniques use observation and interviews. The collected data was then processed and analyzed using the paired t-test statistical test. This research has passed the ethical test at the University of Advanced Indonesia ethics commission with number: 143/Sket/Ka-Dept/RE/STIKIM/I/2022.

**Results**

**Univariate Analysis**

**Table 1. Pre-Test**

<table>
<thead>
<tr>
<th>Pre-test</th>
<th>Frekuensi</th>
<th>%</th>
<th>Valid %</th>
<th>Kumulatif %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helped</td>
<td>2</td>
<td>13,3</td>
<td>13,3</td>
<td>13,3</td>
</tr>
<tr>
<td>Helped</td>
<td>13</td>
<td>86,7</td>
<td>86,7</td>
<td>1000,0</td>
</tr>
<tr>
<td>Depends</td>
<td>15</td>
<td>100,0</td>
<td>100,0</td>
<td></td>
</tr>
</tbody>
</table>
The table above shows the effect of independence before carrying out occupational therapy exercises on schizophrenia patients. Based on the pre-test results, the mean (average) value before was 5.0667, the median value before was 5, the minimum value before was 2 and the maximum value before was 9.

**Table 2. Post-Test**

<table>
<thead>
<tr>
<th>Post-test</th>
<th>Frekuensi</th>
<th>%</th>
<th>Valid %</th>
<th>Kumulatif %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helped</td>
<td>13</td>
<td>86,7</td>
<td>86,7</td>
<td>86,7</td>
</tr>
<tr>
<td>Depends</td>
<td>2</td>
<td>13,3</td>
<td>13,3</td>
<td>100,0</td>
</tr>
<tr>
<td>Amount</td>
<td>15</td>
<td>100,0</td>
<td>100,0</td>
<td></td>
</tr>
</tbody>
</table>

The table above shows the effect of the patient's ability to be independent after occupational therapy, based on the post-test results, the mean (average) value is 9.333, the median value is 9, the minimum value is 7 and the maximum value is 11.

**Bivariate Analysis**

**Table 3. Shapiro – Wilk Normality Test**

<table>
<thead>
<tr>
<th>Normalitas</th>
<th>Statistic</th>
<th>Df</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>938</td>
<td>15</td>
<td>.356</td>
</tr>
<tr>
<td>Post-test</td>
<td>925</td>
<td>15</td>
<td>.230</td>
</tr>
</tbody>
</table>

Based on the results of the Normality test, the sig value is known. > 0.05 then the results are declared to be normally distributed.

**Table 4. Bivariate Analysis**

<table>
<thead>
<tr>
<th>Independence Activity Daily Living</th>
<th>N</th>
<th>Mean Differences</th>
<th>Correlation</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before and after</td>
<td>15</td>
<td>-4.2667</td>
<td>0.384</td>
<td>0.000</td>
</tr>
</tbody>
</table>

Based on table 4, it is known that the comparison between before and after carrying out occupational therapy exercises: Patient independence after carrying out occupational therapy is known. The mean value between the results before and after is -4.2667, meaning it is negative, so there is a tendency to increase the number of independence after carrying out occupational therapy exercises with an average increase of 0.384. Based on the results of the correlation test, it is known that the correlation coefficient value is 0, meaning that the effect before and after carrying out occupational therapy training is 38.4%. The results of statistical tests show that a p-value of 0.000 means P<0.05, so it can be concluded that there is a comparison before and after carrying out occupational therapy exercises: Independence of Occupational Therapy patients in the Turtledove Room at DR Mental Hospital. Suharto Heerdjan Jakarta in 2021.

**Discussion**

Based on the pre-test and post-test tables, it is known that the comparison before and after carrying out Occupational Therapy Exercises: Patient Independence Performing Occupational Therapy is known. The mean value between the results before and after is -4.2667, meaning it is negative, so there is a tendency to increase the number of Independence: after being carried out Occupational Therapy Training with an average increase of 0.384. Based on the results of the correlation test, it is known that the correlation coefficient value is 0, meaning that the effect before and after carrying out occupational therapy training is 38.4%. The results of statistical tests show that a p-value of 0.000 means P<0.05, so it can be concluded that there is a comparison before and after occupational therapy training: Independence of occupational therapy patients in the Turtledove Room at DR Mental Hospital. Suharto Heerdjan
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Jakarta in 2021.

According to basic health research findings in 2013, the prevalence of serious mental illness in the Indonesian population was 1.7 per million people, and emotional mental problems reached 6.0 percent of the population. Even more surprising, 4% of this group presented late for treatment and received no follow-up care. One problem is the dearth of mental health care. The global economic crisis has also had a significant impact on the increase in the number of people suffering from mental illness, especially in Indonesia, where it is estimated that at least 50 million people or 25% of the population suffer from mental disorders such as schizophrenia. Symptoms of schizophrenia include hallucinations, mental distortions (delusions), distortions in thought processes and language, distortions of behavior and self-control, restrictions on emotional expression, and limitations on cognitive productivity. People who suffer from schizophrenia will show cognitive, emotional, perceptual and behavioral abnormalities. Distortion of negative thoughts in schizophrenic clients can cause mental stress, giving rise to anxiety, melancholy, or even suicidal ideation.

Hallucinations are one of the symptoms that are often found in clients with mental disorders, hallucinations are often identified with schizophrenia. Of all schizophrenic clients, the majority experience hallucinations. Other mental disorders that are also accompanied by hallucinatory symptoms are manic depressive disorder and delirium. Hallucinations are perceptual disorders where the client perceives something that is not actually happening. An application of the five senses without any external stimulation. An appreciation experienced by a perception through the five senses without external stimulus, false perception. The high number of people with mental disorders who experience hallucinations is a serious problem for the world of health and nursing in Indonesia. Suffering from hallucinations, if not handled properly, will have bad consequences for the client himself, his family, other people and the environment. It is not uncommon to find sufferers who commit acts of violence because of their hallucinations. Efforts to optimize the management of clients with schizophrenia in treating hallucinatory disorders in hospitals include implementing standard nursing care, group activity therapy and training families to care for patients with hallucinations. Implementation strategies for patients with hallucinations include activities to recognize hallucinations, teach patients to rebuke hallucinations, take medication regularly, chat with other people when hallucinations appear, and carry out occupational therapy to prevent hallucinations.

According to the researchers' assumption, routine occupational therapy has proven effective for schizophrenia patients in improving independence in daily living activities. One of the types of occupational therapy given to schizophrenia patients is occupational therapy or activities which are starting to be widely used, especially to help sufferers carry out their daily activities. Routinely carrying out occupational therapy aims to teach independence in daily living activities and reduce or avoid empty thoughts, and increase the ability to be independent in daily living activities and patients have a sense of responsibility towards themselves. Research shows that there is an influence of occupational therapy on the independence of daily living activities in schizophrenic turtle dove patients at Dr. Mental Hospital. Suharto Heerdjan Jakarta in 2021.

Conclusion

Based on research that has been conducted on the effect of occupational therapy on independence in daily living activities in schizophrenia patients, the conclusions are:

Based on the pre-test results, the mean (average) value before was 5.067, the median was 5, the minimum value was 2, and the maximum value was 9. Based on the post-test results the mean (average) value afterward was 9.133, the median value afterward was 9, the minimum
value afterward is 7 and the maximum value afterward is 11. There is an influence before and after carrying out occupational and occupational training: on independence in schizophrenia patients in the Turtledove Room at DR Mental Hospital. Suharto Heerdjan Jakarta in 2021 with a p value of 0.000.

**Conflict of Interest**

The researcher stated that this research was independent, did not involve communities and organizations.

**Acknowledge**

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**References**