

# Occupational Therapy Drawing in Patients with Auditory Hallucinations: Descriptive case study approach

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**Abstract:** Mental disorders are someone who shows changes in behavior and symptoms in thoughts and feelings that cause suffering and prevent them from carrying out activities as they should. Hallucinations are one of the most common mental disorders suffered by hallucination patients, there are various kinds such as auditory, visual, tactile, gustatory, and olfactory hallucinations. The implementation strategy is occupational drawing therapy given to auditory hallucination patients which aims to control hallucinations. The purpose of this case study is Occupational Drawing Therapy in Patients with Auditory Hallucination Problems at Prof. Dr. V. L. Ratumbuysang Mental Hospital, North Sulawesi Province to get an overview of occupational drawing therapy in auditory hallucination patients. The method used is descriptive using a case study approach. Obtained from the application of occupational drawing therapy on 2 subjects, namely verbalization of hearing whispers, sensory distortion, hallucinatory behavior, and decreased daydreaming. Occupational drawing therapy as a complementary therapy in patients with auditory hallucinations is useful for self-control. This case study expected nurses are to apply occupational drawing therapy as part of nursing interventions in patients with sensory perception disorders, especially auditory hallucinations.

Keywords: Auditory Hallucinations, Drawing, Occupational, Therapy

# 1. Introduction

The number of people suffering from mental disorders continues to increase every year and has become a significant health problem throughout the world, including in Indonesia (Latifah, Yolanda, & Indriati, 2025).

According to data from the World Health Organization (WHO), more than one billion people worldwide suffer from mental disorders, or one in eight adults and adolescents. The largest groups are those affected by depression (280 million) and anxiety (301 million) (WHO, 2022). Based on data found at the Mental Hospital of Prof. DR. V. L. Ratumbuysang in 2023, the most patients experiencing mental disorders in North Sulawesi in the last 7 months from July to January were paranoid schizophrenia with 165 male patients and 123 female patients and a total of 288 schizophrenia patients (RSJ Prof. DR.V. L. Ratumbuysang).

Hallucinations are a type of mental disorder frequently experienced by patients. Auditory hallucinations account for approximately 70% of cases, with individuals hearing voices, particularly other people's voices speaking their thoughts and giving instructions to perform certain actions (Sulastri, et al., 2023). Nurses integrate their understanding of the psychosocial and neurobiological aspects of mental health to support patients' mental and physical well-being (APNA, 2019). Occupational drawing therapy is one type of therapy that can help people who experience auditory hallucinations because it involves patients in activities they enjoy to help them feel better and help them prepare for treatment (Gustiana, Martina, & Aiyub, 2024).

The results of research on schizophrenia patients showed that occupational therapy drawing activities had a very significant effect on changes hallucinations; respondents experienced a decrease in hallucination symptoms after occupational therapy drawing activities (Herlina, Hasanah, & Utami, 2024). The aim of this case study is to find out how occupational therapy describes drawing in patients with auditory hallucinations..

### 2. Materials and Methods

The method used is descriptive analytical with a case study approach. This case study was conducted at the Mental Hospital. Prof. Dr. V.L. Ratumbuysang, North Sulawesi Province in the Kabela room. The case study was conducted for 3 days starting on May 11-13, 2025. The subjects used were 2 patients who met the inclusion criteria, namely patients with a diagnosis of Schizophrenia who experienced nursing problems of auditory hallucinations, cooperative patients, female gender, patients aged 19-59 years. Exclusion criteria were patients who were unwilling to be respondents, patients who could not control hallucinations. Data collection techniques used interviews to obtain information from patients. The instruments used were a mental assessment format, self-control observation sheets, SOPs and a set of drawing tools. The limitations of this case study only used 2 patients and a time of 3 days as well as unstable and changing moods. The ethics of the case study use the Right to fair treatment, the right to protection and discomfort and loss, the right to anonymity and confidentiality. The outcomes of this researched measured by Self-Control Observation Sheet and analyzed using descriptive analysis.

## 3. Results and Discussion

The implementation of occupational drawing therapy was carried out six times in three days on patients with auditory hallucinations. The results of the assessment of both patients determined the priority nursing diagnosis of Sensory Perceptual Disorder: Auditory Hallucinations.

| Data criteria               | Subject I                      | Subject II                         |  |  |
|-----------------------------|--------------------------------|------------------------------------|--|--|
| Age                         | 37 years old                   | 37 years old                       |  |  |
| Latest Education            | Senior High School             | Senior High School                 |  |  |
| Religion                    | Protestant Christian           | Protestant Christian               |  |  |
| Job                         | Female migrant worker          | Restaurant employee                |  |  |
| Reasons for hospitalization | She heard a whisper asking her | The patient often heard people     |  |  |
|                             | to get into a water tank and   | talking but there was no one, the  |  |  |
|                             | stab her eye                   | patient also heard a voice calling |  |  |
|                             |                                | the patient's name                 |  |  |

|    |                                   | Day I    |    | Day II   |     | Day III  |     |
|----|-----------------------------------|----------|----|----------|-----|----------|-----|
| No | Outcome Criteria                  |          |    |          |     |          |     |
| •  |                                   | Yes      | No | Yes      | No  | Yes      | No  |
| 1. | Verbalization of hearing whispers | ✓        |    | <b>√</b> |     |          | ✓   |
| 2. | Sensory distortion                | <b>√</b> |    |          | ✓   |          | ✓   |
| 3. | Hallucinatory behavior            | √        |    | ✓        |     |          | ✓   |
| 4. | Daydream                          | <b>√</b> |    |          | ✓   | <b>√</b> |     |
|    | Total                             | 100%     | 0% | 50%      | 50% | 25%      | 75% |

Table 1. Self-Control Observation Sheet (Subject I)

Table 2. Self-Control Observation Sheet (Subject II) (Tim POKJA PPNI, 2018)

|                                   | Day I   |  | Day II   |   | Day III   |   |
|-----------------------------------|---|--|--|---|---|---|
| Outcome Criteria                  |   |  |  |   |   |   |
|                                   | Yes   | No   | Yes  | No  | Yes   | No  |
| Verbalization of hearing whispers | ✓   |  |  | ✓   |   | ✓   |
| Sensory distortion                | ✓   |  | ✓  |   |   | √   |
| Hallucinatory behavior            | <b>√</b>  |  |  | ✓   |   | <b>√</b>  |
| Daydream                          | √   |  |  | <b>√</b>  |   | √   |
| Total                             | 100%  | 0%   | 25%  | 75%   | 0%  | 100%  |
|                                   | Verbalization of hearing whispers  Sensory distortion  Hallucinatory behavior  Daydream | Outcome Criteria  Yes  Verbalization of  hearing whispers  Sensory distortion  ✓  Hallucinatory behavior  ✓  Daydream  ✓ | Outcome Criteria  Yes No  Verbalization of hearing whispers  Sensory distortion  Hallucinatory behavior  Daydream  ✓ | Outcome Criteria  Yes No Yes  Verbalization of hearing whispers  Sensory distortion  Hallucinatory behavior  Daydream | Outcome Criteria  Yes No Yes No Verbalization of hearing whispers  Sensory distortion  Hallucinatory behavior  Daydream  Ves No Yes No  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓  ✓ | Outcome Criteria  Yes No Yes No Yes  Verbalization of hearing whispers  Sensory distortion  Hallucinatory behavior  Daydream  Ves No Yes  V  V  V  V  V  V  V  V  V  V  V  V  V |

#### Discussion

A case study on occupational drawing therapy for patients with auditory hallucinations revealed changes in the patient's abilities before and after occupational drawing therapy was performed on Subjects 1 and 2, both of whom experienced auditory hallucinations. The treatment lasted for 3 days. Subject 1 & I2 received occupational drawing therapy on the first day, May 11th, 2025, from 9:00 AM to 9:35 AM, second day: May 12th, 2025, from 8:00 AM to 8:40 AM, occupational drawing therapy was performed, and the patient continued to hear whispers and experienced hallucinatory behavior. The third day, May 13th, 2025, from 9:15 AM to 9:50 AM, occupational drawing therapy was performed, and the patient continued to daydream but no longer heard whispers.

On the first day, Subject I drew a mountain and rice field scenery. On the first day, the patient drew but seemed to be daydreaming, but continued to draw and color the mountains and rice fields. On the second day, the subject drew a sunflower. While drawing, the subject appeared happy and enjoyed drawing the flower. The subject also colored the sunflower according to the

sunflower's color. On the third day, the subject seemed very happy, the subject drew an elementary school building and colored it with the patient's favorite colors such as red, green, black, yellow, and brown, and on the third day, the subject asked the researcher to leave a drawing book, pencil, and colored pencils for the subject to use in everyday life. Because the subject was already interested in drawing so that they had other activities for the subject to do. When asked by the researcher about the three drawings, the subject only answered that he liked them without explaining the reason for the drawing.

On the first day, subject II drew a landscape that included mountains, the sea, and a farm. On the first day, subject II said he didn't really like drawing and the subject seemed to be daydreaming while drawing, but the subject was able to complete the drawing well. The colors used also match the landscape image. On the second day, the subject said he had started to like drawing and looked happy while drawing. He drew flowers in pots, leaves, and shapes like love, circles, and squares. The colors used were according to the subject's wishes. On the third day, the subject drew a coconut tree and his favorite tree. The colors used also matched the color of the tree. The subject seemed to like drawing more and looked happy. On the third day, the subject asked the researcher to leave a drawing book, pencil, and colored pencils for the subject to use daily. Because the subject was already interested in drawing. When asked by the researcher about the meaning of the three drawings, the subject said the drawings he drew were his favorites when he was a child. The results of this study are in line with research and have been carried out (Herlina, Hasanah, & Utami, 2024).

Over the course of three days, occupational drawing therapy was able to control hallucinations in patients with auditory hallucinations. After three days of occupational drawing therapy, Subject I S: The patient stated that he was calmer and felt happier. O: The patient seemed enthusiastic about participating in occupational drawing therapy. A: Sensory perception disorder, auditory hallucinations. P: The patient continued to draw on his own to distract himself from his hallucinations. Subject II underwent occupational drawing therapy for three days. Subject II S: The patient stated that he had begun to enjoy drawing. O: The patient seemed more focused on drawing. A: Sensory perception disorder, auditory hallucinations. P: The patient continued to draw on his own to distract himself from his auditory hallucinations. Both subjects were enthusiastic and cooperative during the three days of drawing therapy.

This statement is supported by findings from a case study conducted by (Firmawati, Syamsuddin, & Botutihe, 2023), result has been shown to have an impact on shifting the signs and symptoms of hallucinations in patients with sensory perception disorders, particularly auditory hallucinations. Another study conducted after occupational drawing therapy showed that clients were able to follow the appropriate therapy and program effectively (Shidqiyyah, 2021). Drawing can help patients manage thoughts and feelings that have been influencing their behavior without their awareness. It provides enjoyment, entertainment, and shifts the patient's focus to a world they create for themselves. Drawing can also help them build self- confidence, learn to trust others, and become more approachable (Agusman & Dekawaty, 2024). Drawing occupational therapy can be use by Nurse as non farmalocology therapy. Nurses can implementate this therapy to help patients release their emotions, express themselves, reduce stress, and be a place to build interaction and increase engagement in individuals with mental health nursing problems. This research limited in two subject and a short time, in the future research can be involve over 2 subjects and long time.

#### 4. Conclusions

The results of occupational drawing therapy for P1 and P2 showed a decrease in signs and symptoms such as verbalization of hearing whispers, sensory distortions, hallucinatory behavior and daydreaming. The results of observations of both subjects showed that from the first to the third

day they were very cooperative during therapy, the patient said he would continue drawing when he felt he heard something, and this case shows that auditory hallucinations can be accompanied by occupational drawing therapy. Drawing therapy can stimulate the brain to control the production of norepinephrine and beta-endorphin, which produces a balance that can increase body energy and improve mood. Drawing therapy can reduce patient interaction with hallucinations and help eliminate negative thoughts and emotions that affect patient behavior (Harkomah, 2023).

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