

Ways in Managing Hallucination from the perspective of Indonesian Muslim with Schizophrenia

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Abstract: The experience of hallucination among muslim people in Indonesia are influencing by culture and religion. This study aim to explore the experience of muslim people in Indonesia in managing hallucination. 13 Indonesia muslim who experience hallucination was participated in this study. A phenomenological inquiry was used to gain understanding about participant's experiences. Data was analized using Collaizi's method of analysis. Seeking relief in Allah was the main theme regarding culture and religion. The findings of this study have the potential to contribute to new understandings of how muslimpeople in Indonesia live with and manage hallucinations and so enhance client- centered nursing care.

Keyword: Ways, managing, hallucination

Date of Submission: 01-02-2019

Date of acceptance: 18-02-2019

I. BACKGROUND

Indonesia is an archipelago with a total population of 265 million (BadanPusatStatistik, 2019). This large population has impacted on the social welfare of Indonesia. The social welfare of Indonesia is below most Asian countries (Suharto, 2009) as indicated by the HDI rank of Indonesia among Asia Countries. The HDI ranking of Indonesia is 116, Singapore is 9, Brunei is 39, Malaysia is 57, Philippines is 80, Thailand is 83 and China is 86 (Wikipedia, 2018). In 2017, the number of Indonesian people who live in poverty were about 25,67 million (BadanPusatStatistik, 2019). This group of people are at risk of developing a mental illness (Suharto, 2009) because of the shame and low self-esteem related to stigma (Suryani, 2013). The very poor tend to have poorer mental illness as the treatment they received is inadequate because they cannot afford to pay for medical expenses (Pols, 2007)

Beside the issue concerning the social welfare, the daily life of the Indonesian population is primarily governed by religion as the majority of Indonesians are Muslim (New World Encyclopedia Contributors, 2008). Approximately 88 % of Indonesians practice the Islamic faith (New World Encyclopedia contributors, 2008). An ethnographic study by Horikoshi (1979) in West Java found that MuslimSundanese people view mental illness as a result of inadequate religious faith and the imbalance of hot and cold substances. In terms of hot and cold substances,

According to Horikoshi (1979), the process by which mental illness develops begin with the excessive heat of the flesh that is absorbed from Satan. The excessive heat boils the blood and block the major nerve vessels leading to the brain. This results in a lack of fresh blood circulating in the head. Consequently, the mind becomes overheated and cannot recall God's words and wisdom. Deprived of knowledge, the victim is no longer able to ward off evil spirits (Horikoshi, 1979).

Similarly, participants in Saptandari's (2001) ethnographic study in Java reported that weak faith and lack of attention to daily religious practice can result in people developing a mental illness. According to Saptandari, if people are strong in their faith, the possibility of becoming mentally ill is eliminated. The faithful person is protected by God from any form of disturbance that may lead to hearing voices or behaving in strange ways such as talking to oneself.

Schizophrenia is a chronic mental illness. The most common symptom of schizophrenia is hallucination. Symptom presentation in schizophrenia is influenced by the immediate environment and the person's cultural background (Thomas et al. 2007). A study by Barrio et al. (2003) in a USA found that African-Americans experience hallucinatory behaviour more frequently than Euro-Americans. Another study conducted in the Netherlands by Vanheusden et al. (2008) found that the frequency of hallucinations was significantly higher in migrant non-Western people compared to Western migrants and Dutch natives.

In addition, the ways people perceived hallucinations are influenced by ethnicity and culture (Okulate and Jhon, 2003). In their study, Okulate and Jhon (2003) found that among individuals who experience

hallucinations, the voices are more often than not in the person's mother tongue. Yip (2008) examined the influence of religion and superstition on delusions and hallucinations of Chinese patients with schizophrenia in Hong Kong. The findings of the study indicated that the content, manifestation, and meaningfulness of hallucinations and delusions were strongly influenced by the patient's religious beliefs and superstitions

This study explore Indonesia muslim people's experience in managing hallucination. It is the belief of this researcher that a deeper understanding of the experience of managing hallucinations for people diagnosed with schizophrenia is important as understanding this phenomenon can inform the provision of quality appropriate person-centered care.

II. METHOD

This study was qualitative study. The research question which informs this study is : What is the experience of Indonesia Muslim people in managing hallucination? 13 participants were recruited with purposive sampling. The inclusion criteria were Indonesian Muslim who experience hallucination , attending the outpatient department of a mental health facility, able to provide informed consent, and willing to be a participant in this study. Exclusion criteria were living with organic impairment or a co -morbid substance abuse disorder, a primary mood disorder , or having a severe cognitive deficit.Participants were contacted in person by the researcher atthe Outpatient Unit of the West Java Psychiatric Hospital. At the time the participants were informed that they needed to be assessed by the attending psychiatrist to ensure they met the inclusion and exclusion criteria for involvement in this study. Information was gathered through in -depth focused interviews. Each participant was interviewed twice. The first interview was to explore participants' experiences while the the second interview was to provide the opportunity for the participants to review the transcript of interview. All of the interviews were conducted by the researcher.Theinterviews were conducted in the Out -patient Department of the West Java Psychiatric Hospital. With the consent of participants the first interview was audio -taped in order to gain a contextual understanding of the interview dialogue . Information was analysed usingColaizzi' s (1973) seven step approach.Each participant's description was read and re-read for many times to obtain an overall sense of the participant's experience.Then, extracted significant statements and formulated more general statements or meanings for each significant statement, and then organised the aggregate formalized

III. FINDINGS

Almost all participants said that their hallucinations were related to evil and Satan. Participant 1 said: *I think... the voices are Satan's voices... Yes... Satan's voices because they also prohibit me from praying and suggest me to sleep... and sleep.* In a similar vein, Participant 2 stated:*she [the voice] was like Satan... I am scared of Satan... Only Satan interferes with man...I am sure Farida's voice is Satan's voice... I hear Farida' voices every 'maghrib'.* These participants sought help from Allah to dispel the voices.

Participant 2 stated further: *In my experience... if I hear her voice... I directly go to the bathroom to take an ablution and pray. I am afraid...I do not want to hear her voice anymore.*From an Islamic view, *sholat* is an activity that should be performed by all Muslims five times a day. Through *sholat*, a Muslim is able to commune with Allah. *Sholathas* several advantages for the person. Psychologically, the person performing the *sholat* finds relief from the daily troubles of life including anxiety, fear, and pain as all of life's difficulties are placed in the hands of Allah.

Like Participant 2, Participat 4 also prayed to stop hearing voices and to prevent relapse. In sharing her experiences Laura said: *I always prayed and read 'Al Qur'an' when hearing the voices...I simply pray... [and] hope I can recover and never have a relapse.* Laura also turned to reading the Al Qur'an when the voices were present. Such a practice is encouraged by Islam as a means of finding relief and peace in being in communion with Allah.

Participant 3 also found relief by praying. In describing his experience of engaging in prayer, participant 3 spoke of being taught to pray by a nurse in a psychiatric hospital. He said: *I have been trained by a psychiatric nurse to take an ablution when hearing voices and then pray. I never forget to pray.* He stated further:*The hallucinations can be prevented by praying.*

In a similar vein, Participant 5 described how he experienced relief by using 'zikir' (remembering Allah by reading or saying the name of Allah): *I just did 'zikir' by saying AllahuAkbar([Allah is great]) and Subhanallah[Glory to Allah]. I just performed 'zikir' until the voices stopped.*

'Zikir' is usually performed by Muslims after daily prayer. It can also be used in any circumstance or situation such as when a Muslim hopes for something or worries about something. Participant 6 performed Zikir to be free from the voices.

Unlike ,Participant 6, Participant 9 sought relief in Allah not only by *zikir* but also performing 'shalat'. He said: *Yes, I have tried to stop the voice by zikir. Sometimes they disappeared. However, if I lacked concentration in performing shalat and remembering God or if I didn't perform shalat...I heard the voice.*

For Participant 11, saying *astaghfirullah* [Allah forgive me, please] was effective in stopping his wife's voice which began appearing after leaving him to go to Saudi Arabia. He said: *I just say astaghfirullah Yes, I continue saying "astaghfirullah" until the voices stop.*

Invoking the saying *astaghfirullah* is a way a Muslim seeks Allah's forgiveness. It is usually performed after 'sholatwajib' (the obligatory prayers) which are performed each day. It is also performed every time Muslims realize that they have committed a sin. In Participant 11 case, he said *astaghfirullah* when hearing his wife's voice because he felt that he had sinned for not being able to perform his role as head of the household.

Participant 13 discovered that reading *ayat-ul-kursi* and say *Allaahu Akbar* was an effectively means of stopping the voices. She said: *In my experience in order to stop the voice just read 'ayat-ul-kursi' or 'Allaahuakbar', By reading 'ayat-ul-kursi', alhamdulillah (thanks God) I can stop the voices.* She stated further: *No one taught me. I just tried it and it worked.*

Interestingly, Participant 8 said that the voices told her how to stop them. In describing her experiences she related: *The voice's said if you want me to disappear, you have to put part of the text of the Holy Qur'an close to your heart. So... The voices can be stopped by carrying the text of The Holy Qur'an.*

Furthermore, some participants believed the strength of their faith had an important influence over their hallucinations. They believed that if their faith were strong that no voices would be heard. Participant 2 described her experience by stating: *I mean...it depends on how strong my faith is. If my faith was not strong enough, I would die ... yes ... it depends on how strong my faith is... If my faith was not strong enough, I would be finished off by her (a ghost).* Participant 8 shared her wisdom by suggesting: *For patients who have similar experience to me they must always remember God by doing zikir and reading 'al Qur'an'.*

IV. DISCUSSION

As revealed in findings above, the majority of the participants in this study were seeking relief in Allah when experiencing hallucination. They did praying, *zikir*, and read 'Al Qur'an' when hearing the voices. One participant said: *In my experience... if I hear her voice... I directly go to the bathroom to take an ablution and pray.* They found that by praying they can stop the voices as one participant said: *The hallucinations can be prevented by praying.* This finding is consistent with this researcher's previous study where 22.5 % of respondents used praying to expel the voices (Suryani, 2006). This finding is also consistent with a quantitative study by Kirov, Kemp, Kirov and David (1998) with 74 psychotic patients in the UK. They found that about 61.2% of respondents in their study applied a religious approach in coping with their mental illness. Most of them used praying because they believe that praying gave them hope, comfort and strength and that God helps them to heal from their illness.

The finding of this study is also consistent with another study by Yip (2003) in Hong Kong. The study was phenomenological study using 4 participants from psychiatric halfway house and an outpatient clinic. They found that the meaning of the patients' experiences of their hallucinations was influenced by their religious belief and superstition. The study emphasised the importance of taking into consideration the religious beliefs in psychiatric care.

The result of this study also support a comparative study by Wahass and Kent (1997) that compared coping strategies of schizophrenic people from Saudi Arabia with people from the United Kingdom when experiencing hallucination. They found that people from United Kingdom tend to use distraction and physiological techniques while people from Saudi Arabia were more likely to cope with the hallucination using a religious approach.

The reason for the majority of participants in this study tend to use a religious approach in coping with hallucination was related to their belief that the voice that they hear is from a bad spirit such as Satan. One participant said: *I think... the voices are Satan's voices... Yes... Satan's voices because they also prohibit me from praying and suggest me to sleep... and sleep.* Therefore they need to seek relief from Allah. According to Vandebroek (2008), the majority of Indonesian people are Muslim and believe that people suffer from mental illness because they have a weak spirit or lack of ability to believe in Allah. This alleged weakness then causes them to be easily influenced by Satan who always leads people to excess emotions or to do the bad things. Wahass and Kent (1997) found similar finding where their participants from Saudi Arabia believe that their hallucination was caused by Satan.

Furthermore, participants in this study believe that faith has a significant contribution to whether they will hear the voice or not. One participant said: *I mean...it depends on how strong my faith is. If my faith was not strong enough, I would die ... yes ... it depends on how strong my faith is... If my faith was not strong enough, I would be finished off by her (Farida).* This result is consistent with a study by Corrigan, McCorkle, Schell, and Kidder (2003). By doing a survey through a Consumer Operated Service project in USA with 1824 respondents, Corrigan et al. found that people's religiosity has a positive correlation with psychological well being of them. According to this study, people who were religious and spiritual had better outcomes in recovery, subjective and objective social inclusion, hope and empowerment. Another study by KK Garut (2015) also found that spiritual

aspect had a positive correlation with patients' recovery from their illness. These authors believe that survivors who have a strong spiritual believe had better outcomes compare to who have weak one. Another participant in this study who has experienced hallucination for more than 20 years also suggested religiosity as a way to be free from the hallucination. She said: *For patients who have similar experience to me they must always remember God by doing zikir and reading 'Al qur'an'*.

V. CONCLUSION

People's believe in God had significance positive contribution in relieving their frightening experience of living with hallucinations. It is a need for the health professional to recognize and imply religious approach in caring for people diagnosed with schizophrenia who experience hallucinations.

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Suryani. " Ways in Managing Hallucination from the perspective of Indonesian Muslim with Schizophrenia." *IOSR Journal of Humanities and Social Science (IOSR-JHSS)*. vol. 24 no. 02, 2019, pp. 01-04.