



## Therapeutic Communication Strategy in Social Isolation Patient: A Case Study of Mental Health Nursing

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### ABSTRACT

**Objective:** To provide nursing care for socially isolated patients with therapeutic communication strategies for socially withdrawn patients.

**Methods:** The method used is descriptive qualitative with a case study approach. The sampling technique is a therapeutic communication strategy. The sample taken was 1 patient who experienced social isolation disorders. The participants used in this study were the patient Mrs. S is 36 years old, a woman with social isolation mental disorders. The process of assessing and establishing a diagnosis is focused on the main problem. Objective and subjective data becomes a reference for periodic evaluation of nursing implementation. The location of the research was carried out at the BLUD of the Banjar City Hospital on 25-28 May 2022.

**Results:** Based on the results of nursing care found signs and symptoms, namely with subjective data feeling lonely, feeling useless, verbal responses are lacking and very brief, while objective data is the client looks a lot silent and doesn't want to talk, facial expressions are less radiant, less eye contact. The nursing problem found is social isolation. The intervention given is therapeutic communication.

**Conclusion:** Intervention of therapeutic communication strategies to help clients converse and want to get acquainted with their roommates in social isolation patients. This can happen if the patient can focus on doing therapeutic communication.

**Keywords:** communication, mental health, nursing care, social isolation

### Introduction

According to the data from the World Health Organization or the World Health Organization (WHO) in 2019, it was found that there were 264 million people suffering from

depression, 5 million people suffering from bipolar disorder, 50 million people with dementia, and 20 million people suffering from schizophrenia (Sandi, 2021). Schizophrenia is one of the 15 leading causes of disability worldwide and people with schizophrenia usually tend to have an increased risk of suicide (Malfasari et al., 2020). Figures from the American Psychiatric Association (APA) 2014 show that 1% of the world's population suffers from schizophrenia (Gasril et al., 2020). The Basic Health Study (Riskasdas) 2019 found that the prevalence of schizophrenia/psychotic disorders in Indonesia was 6.7% per 1,000 households. This shows that out of 1000 households, 67 have household members (ART) with schizophrenia/severe psychosis (Kemenkes, 2019). According to Riskasdas data from West Java in 2018, the prevalence of depression in the population aged 15 years and over was 7.8% (per mile). Meanwhile, the population of households with schizophrenia or psychosis reaches 5% (Kandar & Iswanti, 2019).

Schizophrenia is characterized by positive symptoms such as hallucinations and delusions, while negative symptoms such as lack of speech, lack of motivation, and withdrawal (Bitter, 2020). The hallmark of schizophrenia is association, specifically the relationship between disturbed thoughts, also known as thought disorders, and loose associations (Sumner et al., 2018). The second, affection, is a flat or inappropriate emotional response (Somers et al., 2021). Third, conflict conditions, where the person has emotional conflicts with others, such as hatred and affection for their relationship (Harvey et al., 2018). Fourth, withdrawal into the fictional world of those who are not limited by logical rules is a symptom of schizophrenia, and is characterized by autism (Sandi, 2021).

Judging from the negative symptoms of schizophrenia, one of the severe mental disorders that often occurs is social isolation by withdrawing (Hamasaki et al., 2021; Porcelli et al., 2019). Social isolation can be caused by the feeling of someone who feels he is not worth it (Suerni & Livana, 2019). Patients find it difficult to form bonds with others and engage in social interactions as a result of this feeling of worthlessness (Wijayati et al., 2020). Patients may eventually become less active and neglect personal hygiene and appearance, which will lead to a lack of self-care. Patients experience hallucinations and an increased risk of aggressive behavior because they are increasingly preoccupied with past activities that do not match reality (Fiantis, 2018). Regardless of differences in social or cultural ranking, there is an average social isolation rate of 0.1 per mile worldwide. According to the National Institute of Mental Health, there are a total of 13,000 diseases, with mental disorders reaching about 25% of them by 2030 (Rinawati & Alimansur, 2016).

A preliminary study of socially isolated psychiatric cases at the BLUD of the Banjar City Hospital noted that there were approximately 12 cases of paranoid schizophrenia or about 6.35% within a period of 2 years, starting from January 2020 to December 2021 and included in the 6th order of the top 10 family diseases. Banjar City General Hospital, Tanjung Ward, Mental Nursing.

## **Objective**

This case study was conducted to describe the application of therapeutic communication interventions in patients with social isolation disorders by withdrawing.

## Method

The research design used is a case study with social isolation nursing problems, especially withdrawal. The method of collection is through observation, interviews and physical examination. This case study uses a descriptive approach, the main purpose of which is to uncover the problem, provide an overview of the case study, and further analyze nursing care with an advanced therapeutic communication strategy in socially isolated patients treated at Bangsal Tanjung RSUD Banjar City.

This study uses a case study design with a qualitative approach and focuses on the application of nursing interventions. The subjects used in this study were the patient Mrs. S, 36 years old, a woman with mental disorders with social isolation behavior withdrew. The assessment and diagnosis process focuses on the main problem. Objective and subjective data become a reference for evaluating the performance of nursing care on a regular basis. The location of the research was carried out at the BLUD of the Banjar City Hospital on 25-28 May 2022.

## Result

### ***Nursing Assessment***

The client named Mrs. S 36 years old a woman, married, housewife work with a high school education from Pamarican, Ciamis at the time of review on May 25, 2022, the client is not cooperative in answering questions, voice is weak, does not make eye contact, the client looks aloof, the client said he did not know his roommate, did not want to hang out with other people, the client said that he was disturbed by the patient in his room because he often had a tantrum. the client is not cooperative in answering questions, the voice is weak, does not make eye contact, the client looks aloof, the client says he doesn't know his roommate, doesn't want to hang out with other people, the client says that he is disturbed by the patient in his room because he often has a tantrum. is Mr. S who is an uncle.

During data analysis, subjective data revealed that customers felt lonely, felt worthless, verbal responses were imperfect and very brief. For objective data, it was found that the client seemed calm and did not want to talk, facial expressions were less radiant, and eye contact was lacking. The treatment used is Risperidone 2 mg when given 1-0-1 Chlorpromazine 25 mg when given 0-0-1/2.

### ***Nursing diagnoses***

*Table 1. Nursing diagnose*

<b>Symptom</b>	<b>Etiology</b>	<b>Problem</b>
Subjectives: 1. The client reports that he is "lazy to communicate with others because it is difficult to initiate communication with others" 2. The client says "prefers to spend time in bed alone than having to interact with other people" 3. The patient said "the ward does not know his roommate and at home the patient says he does not have close friends".	Sensory Perception Disorder	Social Isolation

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4. The patient admitted that he was disturbed in the treatment room because his friend was scolded.

Objectives:

1. The patient is seen sleeping in the room at the time of the assessment, the patient seems to prefer to spend time in his bed.
  2. Eyesight is less focused
  3. The patient when assessing the head down
  4. The patient looks dreamy
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Based on the results of data analysis, it can be seen that the nursing problem that arises is social isolation with impaired perception of withdrawal.

**Nursing Intervention, Implementation and Evaluation**

Nursing interventions in socially isolated patients need to be carried out to carry out therapeutic communication.

*Table 2. Nursing Intervention*

Dx.	Intervention	Implementation	Evaluation
Social Isolation	SP 1 and Therapeutic communication therapy After nursing actions, the client can demonstrate how to communicate by: - Build a trusting relationship - Identify causes of social isolation - Clients can interact with other people	1. Build a trusting relationship - Say therapeutic greetings, greet clients in a friendly manner - Introduce yourself politely - Ask the client's full name and the nickname the clients prefers - Implement timely contracts with patients - Identify with the client the signs and causes of social isolation 2. Identify the causes of social isolation 3. Discuss the advantages of connecting with other people 4. Train the client's ability to communicate by introducing himself to the client	S: - The client says he doesn't want to interact with other people - The client says he doesn't want to interact with other people - The client said he didn't know the friend in the room - The client said he was disturbed by friends in the room - Clients can mention the advantages and disadvantages with other people O:- The client accepts the extended hand for a handshake - clients can introduce themselves - Lack of eye contact - The client always looks down - The client looks aloof - Speak slowly and quietly A: Goal partially achieved P: continue the intervention

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## Discussion

After providing nursing care to Mrs. S aged 36 years with social isolation at the BLUD RSU Banjar City from May 25-28 2022. The process consists of assessment, determination of diagnosis, nursing plan, nursing action and evaluation. The initial phase, namely the assessment during the assessment, found the following data: The client's developmental factors did not have developmental barriers at the adult stage, none of the family's biological or genetic factors experienced, socio-cultural factors The client did not want to socialize with his friends because of that the client became happy aloof. There are several driving factors, namely: Extrinsic Factors Sociocultural stressors, especially stress caused by sociocultural factors including friends in the room. Nursing problems that may arise are: Social interaction, Impaired verbal communication, Impaired patient role, must reach the client's coping even though the meeting is the first meeting.

The second nursing step is to confirm the diagnosis. Based on the results of the assessment and data analysis, the priority of nurse diagnostics for Mrs. S is to eliminate social isolation due to frequent exposure to data and take immediate action to correct the problem. The next third step is to develop a treatment plan based on theoretical social isolation nursing actions, namely SP 1 fostering a trusting relationship, identifying the causes of social isolation in meetings, discussing with clients the benefits of interacting with other people as well as the disadvantages of not interacting with others. SP 2 teaches you how to get to know other people. SP 3 advises clients to get to know each other's roommates, Family Nursing SP 1 Family: health education to families about social distancing issues, causes, social distancing and how to care for social distancing patients, and therapeutic communication strategies. The fourth stage is the implementation of nursing where the author acts according to the conceptual nursing plan, but in this case there are nursing actions that are not carried out because they are based on situations and conditions that are not patient stability. The fifth step is evaluation which is the last step in nursing to assess the impact of nursing actions taken.

An ongoing process to assess the impact of nursing actions on clients, assessments are carried out continuously in response to nursing actions taken, assessments are carried out for nursing actions in socially isolated patients, namely increasing trusting relationships, clients can overcome the causes of social isolation, clients can mention the advantages of interact socially with others, and the disadvantages. So that clients can get to know other people. Nursing actions in socially isolated patients can be achieved by being marked by the client's abilities in terms of the client being able to recognize names and can interact with others through therapeutic communication strategies.

## Conclusion

After nursing care, Mrs. S with social isolation at the Banjar City Hospital, Tanjung Ruang on 25-28 May 2022, the authors can conclude that the application of therapeutic communication has proven effective in communicating between patients with social isolation. During the implementation process, the client is very cooperative in carrying out the recommended nursing actions.

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