

Case Study of Individual with Paranoid Schizophrenia in X Mental Hospital

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Abstract: Schizophrenia, a complex mental disorder with multiple causes and diverse symptoms, is a prominent illness in X Mental Hospital, with a higher prevalence in men. Paranoid schizophrenia, characterized by delusions and hallucinations, is the most common subtype, often observed in men. This qualitative study uses a case study approach to explore the disorder, focusing on a 37-year-old male patient diagnosed with paranoid schizophrenia. Data was collected through observation and interviews with both the patient and his close contacts, analyzed thematically. The subject exhibited symptoms such as anger, isolation, and delusional beliefs that others were conspiring against him, likely triggered by lifelong psychosocial and economic stressors. Erikson's Psychosocial Development Theory suggests that unresolved crises during adolescence and early adulthood contributed to the subject's psychological state. The study concludes that the subject's mental disorder aligns with schizophrenia's diagnostic criteria, influenced by significant life events and unresolved psychosocial conflicts.

Keywords: ; *Development Theory; Hallucinations; Schizophrenia*

1 INTRODUCTION

Schizophrenia comes from the Greek words “schizo” meaning split and “phren” meaning soul. The word is used to characterize the divided or fragmented cognition of individuals with this illness. The word schizophrenia does not include the presence of multiple personalities in a person. The definition of schizophrenia is still undergoing revision as new clinical signs are identified. PPDGJ-III defines schizophrenia as a syndrome characterized by multiple causes and diverse symptoms. The onset of schizophrenia is influenced by various factors, including genetic, socio-cultural, and physical effects. Schizophrenic illness may develop as a result of the combined effects of multiple risk factors. Schizophrenia is the dominant psychotic illness diagnosed in patients at X Mental Hospital. The prevalence of schizophrenia is higher in men, specifically affecting 12 million people, compared to 9 million women. The annual incidence rate is 15.2% per 100,000 population. The onset of the condition is common in males between 15 and 24 years old, and in females between 25 and 35 years old. The onset of schizophrenia symptoms usually occurs during late adolescence or early adulthood. Males are more likely to experience cognitive impairment and have worse outcomes than females. Men have a higher susceptibility to mental illness than women due to their role as the main breadwinner in the household, making them more vulnerable to life stresses. In contrast, women are less likely to experience mental illness because they have a greater capacity to accept life circumstances than men (Zahnia et al., 2016). The lifetime risk of morbidity due to schizophrenia is about 0.85% for both men and women. The highest incidence of this mental condition is observed in late adolescence or early adulthood. In Indonesia, the prevalence of schizophrenia is estimated to affect around 1-2% of the population. There are nine different forms of schizophrenia that have been recognized, which include paranoid schizophrenia, hebephrenic schizophrenia, catatonic schizophrenia, nonspecific schizophrenia, post-schizophrenic depression, residual schizophrenia, schizophrenia simplex, other schizophrenia, and unclassified schizophrenia. Among the nine types of schizophrenia described, paranoid schizophrenia was the most frequently diagnosed disease in patients, accounting for 40.8% of cases.

According to the World Health Organization in 1990, Paranoid Schizophrenia is the main schizophrenia subtype observed in various countries (Yudhantara et al, 2018). Patients with paranoid schizophrenia have prominent symptoms

of paranoid delusions and are more common in males, with a rare occurrence at a young age. Patients are often immersed in their delusions, exhibiting behaviors such as hostility or excessive self-centeredness. These delusions may manifest as a strong belief that others are discussing them, a belief that there is a conspiracy against them or a plan to harm them, or a belief that there is an external force controlling their actions, often the patient themselves being the target.

2 MATERIALS AND METHODS

The type of research used in this study is qualitative research, using a case study approach to explore Paranoid Schizophrenia disorder. According to (Creswell, 2018) a case study is a qualitative approach that aims to explore a case in depth and detail on an issue or problem. Case studies were chosen because they are able to provide a clear picture of the context in which a situation can occur, so that the results can be interpreted by considering environmental and situational factors. This is important to provide an understanding of how contextual variables affect the situation under study. It allows the researcher to explore the phenomenon in its natural context, providing an in-depth understanding of the impairment experienced by the research subject.

The subject in this study is a male with 37-year-old characteristics who has been diagnosed with Paranoid Schizophrenia and has no neurological disorders or other significant developmental disorders. Primary data was taken from the research subject and secondary data was obtained from significant others, namely nurses, doctors, and the subject's younger siblings. Secondary data is needed to perform member checking on the validity of the data. The use of pseudonyms was used to maintain the privacy of the data provided for research purposes.

Data collection strategy is a method used by researchers to collect research data. Data collection is done through several methods, namely direct observation and interviews. Direct observation is a type of observation in which the researcher directly observes the research subject at the location and time of the event. The researcher is physically present at the location and records detailed data about the subject's activities or behavior. This method provides rich and contextual data, because researchers can interact directly. (Gay et al, 2012) define direct observation as an observation conducted by physically presenting the researcher at the location systematically and recording the observed behavior in a natural context. Interviews allow researchers to explore the perspectives, experiences and views of individuals that cannot be obtained through other data collection methods.

Data analysis in this study aims to assist researchers in obtaining conclusions. To get the right conclusion, the right strategic data analysis is needed. In this study, thematic analysis was used to analyze the collected data. Thematic data analysis includes identifying, analyzing, and reporting patterns (themes) in the data. This technique is used to organize data and interpret various aspects of a research topic. (Creswell, 2018) explains that the steps in thematic analysis are preparing the data to be processed by reading and analyzing to find out the meaning of the data that has been collected. The collected data is reduced to data to obtain important points which are then grouped based on themes or coding. This coding process will produce new themes which are then used by researchers to make a brief description and end by interpreting the data to make it easier to understand.

3 RESULTS

The main complaint of the subject came to X Mental Hospital because of anger. There have been changes in behavior since 2-3 months. These behaviors include shouting, talking dirty, and slamming things. The subject damaged the motorcycle, said it was repaired but could not return it to its original state. The subject carries sharp weapons such as sickles, mines, etc. which are put in the room. If taken by the family, the subject returns it to its original place. The subject talks to himself and rambles, and hits the family. When he was taken to X Mental Hospital, the subject did not want to go, so the security forces were involved. The subject once wandered off and could not return at night. Interaction with others decreased, did not want to meet people, and when spoken to only daydreamed. The subject said that he could not sleep at all since 5 days and was angry in the morning. The subject does not want to worship at all, often forgets to throw things at home, matches are put in the freezer. The subject had a cough and an injury to the left wrist from having his hands tied and an injury to his leg from being hit by a shard.

The subject likes to be alone, causing prejudice with his neighbors, such as suspecting that he will be hurt or killed, and suspecting that his neighbors gossip that he is not married and not as successful as his neighbors and relatives. The subject feels that he is given privileges by God, considers himself the smartest.

The subject since childhood was raised with harsh parenting by his late father and his mother only acted as if she did not know his father's nature like that. Until when the subject was studying at the junior high school level, the subject's father had a severe stroke. The subject helped take care of his sick father for months until his father passed away. As a result, the subject had to help earn a living because he was the only male in the family. When he returned home from school, the subject immediately worked in the fields. The subject never enjoyed adolescence like his peers. The subject was bullied by his friends because he was considered poor and ugly, which made him inferior so that he never knew women. There were problems in the subject's extended family so he preferred to work until he migrated to Kalimantan. In addition, related to economic problems. The subject once exerted himself in the fields but still repeatedly failed to harvest watermelons and suffered considerable losses due to harvesting with the wrong rules. Many failures, difficulties, and unfulfilled needs and desires experienced by the subject triggered complaints of unreasonable behavior during these 2-3 months.

4 DISCUSSIONS

Erikson stated that individuals grow based on epigenetic principles. This means that the ego develops over a period of time and in a certain way (Boeree, 2007). This theory says that an individual's personality develops in eight stages, each of which is determined by the success or failure of the previous stage. At each stage of development there are tasks that are psychosocial in nature. Successful management of these challenges can help individuals gain psychosocial benefits and resilience, thus helping them progress to the next stage. However, if an individual does not make it through a certain stage, they will grow into maladaptation or malignancy (always in a state of suspicion).

Erikson divided the human life span into eight stages of crisis, in each phase there is individual psychosocial conflict. Lifelong development consists of eight stages, each of which has a strength value that forms a positive or negative personality, when weaknesses appear negative traits dominate a person's growth (Krismawati, 2014). Erikson believed that each crisis phase has basic virtues that individuals achieve when successful in the opposition of the crisis phase, but if failed to achieve will reduce the individual's ability to complete the next crisis phases.

In this case, the subject cannot complete stages V to VI of development properly so that the subject's ego becomes unadaptive in various problems in his life. This poorly resolved stage of development can cause the subject to experience psychopathology.

1. Trust vs Mistrust

From childhood, the subject's relationship with his mother went well because the subject's mother could take the time to take care of the subject. From a young age, the subject has been cared for and taught by the subject's mother. The role of the mother is very important to love and provide affection where the basic needs of the baby are met and consistent and good quality care provides the basis for the development of trust (Fitrikasari et al, 2021). This event shows that the subject can develop a sense of trust in his environment.

2. Autonomy vs Shame and Doubt

Children's independence can be optimized and developed when they receive support and encouragement from their parents for their efforts (Holis, 2007). The subject was raised with firm yet tolerant parenting so that the subject could develop balanced autonomy and shyness. A little shyness and hesitation is something that should be considered normal. Without it, children will develop maladaptive tendencies that Erikson called impulsiveness, which is doing something without thinking (Mokalu, 2021).

3. Initiative vs Guilt

The subject developed into an initiative person because the subject's parents encouraged and encouraged the subject to explore things within himself. There are no demands or restrictions on the subject in trying things that the subject is interested in. So that the subject develops an attitude of initiative.

4. Industry vs Inferiority

When he was in school, the subject was a person who was only active in the academic field and never participated in non-academic activities. The subject is a mediocre person regarding grades, not a smart one but also not one who cannot keep up with the lessons. The subject knows the interest he has in the automotive field so when he will continue to the secondary school level, the subject enters an automotive vocational high school. If individuals are encouraged and reinforced on their own initiative, they begin to feel diligent (competent) and confident in their ability to achieve goals.

5. Ego Identity vs Role Diffusion

In this fifth stage, the subject is already a teenager. This period is the time to find identity. At this time the subject is faced with discovering his own existence. When adolescents search for their identity and relate to a

good environment, a good identity also emerges. If not, there will be an identity crisis (Kitchens & Abell, 2020).

When the subject was a teenager, the subject's father passed away due to a severe stroke which caused the subject to spend more and more free time in the fields, farming to earn money because there was no longer a father figure as the head of the family who provided for him. The subject said he accepted his situation but there were feelings of sadness and disappointment with the situation. The subject feels that he bears the burden of being the only male in the family who must fulfill all daily needs and send his younger brother to college. The subject feels unable to enjoy adolescence like his peers who can play and don't need to work.

At this stage, the subject was also bullied by his friends because he was from a poor family, his parents were only farmers, he went to school using an ontel bicycle when his friends his age were already using motorcycles. The subject was also bullied for moving from an MI school, which was considered private and not top, to a public school. When bullied, the subject did not do anything to the bullying friend, but there were feelings of sadness and shame. As a result, the subject became insecure because he felt ugly and always labeled himself poor. This event made the subject become a role diffusion/identity crisis. This is likely to lead to a weak sense of confidence, role diffusion, and lack of direction in adulthood. Role diffusion involves the subject being unsure about himself or his position in the environment. a person who has difficulty in finding his own identity may feel detached from reality and may develop irrational or even paranoid beliefs. They may feel that they have meaning or power that others do not, or may have a drastically different perception of reality.

6. Intimacy vs Isolation

In this sixth stage, a person develops long-term relationships with others. Those who fail to complete the previous stages and do not have a strong sense of identity are unable to establish close relationships with others.

At the age of 37, the subject is not married and has never dated because the impact of bullying in the previous stage made him insecure and did not dare to get to know women. The subject has negative beliefs about themselves that developed as a result of the bullying treatment received previously. The subject became upset and disliked seeing the closeness of couples who were making out, felt jealous seeing friends his age who already had wives and children while he was still single like this. The subject also said that he was embarrassed if a man would propose to his sister and see that his sister was still single at this age.

The subject has difficulty completing this stage well because in the previous stage, the subject was unable to find his personal identity. Therefore, the subject tends to isolate themselves and rarely interact with the environment. If the subject has difficulty forming intimate relationships at this time due to a previously unresolved identity crisis or fear of rejection, then the subject may experience isolation which refers to the inability to form meaningful and intimate relationships with others. This can lead to feelings of loneliness, isolation, and ostracization.

Eventually, symptoms of fear of being gossiped about by neighbors for not being well-established and unmarried at the age of 37, anger at seeing a partner, and sexual fantasies emerged. This is also related to the subject's hope to work hard to be established and be able to establish a relationship to the level of marriage. In the case of the subject who was suspicious of being hurt and gossiped about for being unmarried and unestablished at the age of 37, psychosocial conflict occurs when the subject feels pressured by social or cultural expectations to achieve a certain level of success in adult life, such as getting married and gaining economic stability. Delusions about being hurt or gossiped about by others are manifestations of insecurity and anxiety that arise from feeling unestablished or not meeting these expectations.

When looking at the definition of schizophrenia, the characteristics that appear in the subject are distortions in thoughts, perceptions, emotions, speech, and behavior. According to (Yudhantara et al, 2018) schizophrenia is a severe mental disorder that can affect individual feelings, thoughts, and behavior. Schizophrenia is also one part of a psychosis disorder which can be characterized primarily by a loss of understanding of reality and reduced insight. Characterized by the subject's disorganized way of thinking, difficulty processing information consistently or logically.

When looking at the factors of schizophrenia according to (Zahnia et al, 2016), the factors that stand out in the subject are psychosocial factors. In addition, seen from the factors of schizophrenia according to (Prihananto, 2018) the economic level is a prominent causative factor. So that when there is a disturbance in these factors, it causes a mental imbalance in the subject which eventually leads to symptoms of schizophrenia in the subject.

There are positive symptoms of schizophrenia in the subject involving separation from reality (Nevid et al, 2014)), namely delusions or delusions of self-belief that the subject is given privileges by God because he is sensitive and feels smarter than others so that he does not want to accept help from others. There is a chasing delusion that the subject believes that he will be hurt by neighbors / people around him. There are auditory hallucinations such as hearing a female voice when the subject is masturbating even though there is no woman there, visual hallucinations see a neighbor couple having sex in front of the subject. The subject sometimes says or wants things that do not make sense such as there is a big tree that contains a ghost, seeing blood so you feel pain, not daring in your own home, Japan is said to be stupid, and says there is such a thing as a poor country.

In addition, there are negative symptoms that affect the subject's ability to function and live his life (Nevid et al, 2014). Symptoms that stand out in the subject are separating themselves from the social environment tend to close themselves, lose their ability to think, and lose their initiative or laziness to do something.

According to (Maramis, 2012), states that psychotic symptoms in individuals who have schizophrenia mental disorders that match the characteristics of the subject are general appearance and behavior that are not prominent and social withdrawal. This is found in the observation of the subject, where when in the inpatient room the subject rarely interacts with patients or nurses in the room. Most interactions start from other people. In addition, there are perceptual disorders related to auditory and visual hallucinations, and thought disorders in the form of delusions of grandeur and delusions of pursuit.

5 CONCLUSIONS

The subject with the initials ANH is a 37-year-old male. The physical characteristics of the subject, which are 163 cm tall and 50 kg in weight, are seen based on the patient's nutritional check data. The subject has short thin hair, a thin beard, a sharp nose, fair skin, and has an injury on the left wrist because the subject rebelled so that the subject's hands were tied by a neighbor before being taken to the X Mental Hospital. While in the X room, the Subject rarely interacts with friends around him, more often alone in the garden and tends to close himself. Sometimes, the subject only talks to one of the patients he knows.

This is the first time the subject has been admitted to a mental hospital. The precipitating factor for the subject to enter the psychiatric hospital was psychological factors, namely because the subject had a prejudice that he was gossiped about by neighbors and suspected that someone wanted to harm him. The reason is that the subject is 37 years old and until now unmarried, when his friends his age are married and well-established. Many failures, difficulties, and unfulfilled needs and desires from within the subject experienced by the subject have triggered complaints of unreasonable behavior for the past 2-3 months. The symptoms shown are anger, damaging things, and distancing themselves from the social environment. The subject was diagnosed with mental disorder F20.0, namely paranoid schizophrenia with the symptoms shown were delusions, delusions of grandeur and pursuit, and auditory and visual hallucinations. The most apparent personality traits in the subject are suspicion and excessive vigilance.

The development of the subject's mental disorder is obtained from the accumulation of events that occur in the subject's life. At the time of the examination, it was found that the clinical mental disorder in the form of self-understanding (insight) was at the fourth level / degree, namely the subject had realized the disorder experienced until he was in this hospital, but the subject did not understand the cause of the pain he was experiencing. So it can be concluded that the personality that appears on the subject is in accordance with the definitions, factors, symptoms, and criteria that have been discussed. The subject's behaviors are also in accordance with the criteria for the diagnosis of schizophrenia. The process of mental disorders in the subject can also be explained through Erickson's Psychosocial Development Theory. Analysis of the subject matter in the subject occurs in stages V-VII.

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