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Study on a Nursing Support Program to Alleviate Reality Monitoring Error in Schizophrenic Patients

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Purpose: In a person's experiential memory, the unconscious ability to distinguish between memory traces that derive from perceived events versus from self-generated thought or imagination is called "reality monitoring" (RM) (Johnson et al., 1981; Nakata et al., 2005). Schizophrenic patients are more prone to errors (RMEs) in distinguishing the difference than healthy individuals, due to the effects of positive symptoms (Tanaka et al., 2005). It is likely that RMEs due to symptoms affect how a person understands him/herself. This study was conducted in light of the perceived need for a nursing support program to help alleviate RMEs in schizophrenic patients.

Methods: For the program, it was considered effective to encourage persons with schizophrenia to recognize their own RMEs and learn to readjust their thinking. It was therefore decided to create a program of four sessions for each patient in which the schizophrenic patient would repeat the processes of externalization and reflection based on the experience of their own illness (Okumura, 2002; Ninomiya, 2015). Next, the program was initiated as an intervention for hospitalized schizophrenic patients. Data was collected on the background of subjects—age, sex, hospitalization/treatment status, and symptoms. The effectiveness of the program was verified from field notes taken during the intervention and from semi-structured interviews following the intervention. The researcher received authorization to conduct this study from the researcher-affiliated university and research hospital.

Results: The target of the study was four people (two males and two females). Their average age was 47.75 (SD=6.65). The average time hospitalized at the start of the intervention was 20.75 days (SD=3.95). As for treatment status, there was no significant difference in the dose of antipsychotic medication (CP equivalent) before and after the intervention. Regarding the effectiveness of the program, the field notes showed that for all four individuals, during the second session, there were times that they reflected in a positive way, realizing that their symptoms and experiences before and during hospitalization were probably RMEs. Also, through semi-structured interviews in which questions were asked about becoming aware of or learning things through the program, 10 subcategories were taken from 21 codes, and three categories were extracted: Understanding reality monitoring errors; Changes in perception of one's own condition; and Changes in perception of one's experience of being admitted to the hospital.

Conclusion: In this nursing support program, each subject repeatedly faced the experience of their own illness. After the intervention, it was shown that there was some change in the way schizophrenic patients perceive their illness.

Title:

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Keywords:

Nursing Support Program, Reality Monitoring Error and Schizophrenic Patients

Abstract Summary:

This study was conducted in light of the perceived need for a nursing support program to help alleviate reality monitoring errors in schizophrenic patients. We were created a program of four sessions. Regarding the effectiveness of the program, three categories were extracted.

References:

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Author Summary: Study on psychiatric rehabilitation nursing. Product program to improve meta-cognitive function by intervene the reality monitoring in people with schizophrenia. Study on forensic mental health nursing. Study on nursing for the patient with substance related disorders. Study on nursing care for drug and addiction. Study on association between drinking action of patients and consciousness of children.