

IM 6 Guided Reflection Questions

Hearing Voices That Are Distressing

1. How has this experience influenced your perception of people who hear voices that are distressing?

This experience has taught me how real and distressing these voices can be. For me I could always turn them off so it was a lot better but for these people they cannot. I now understand a little more of what these people actually go through and why it is so important that we help them the best we can. These voices can be very distracting and affect the way you think and how you perceive things. I also now realize my own prejudices.

2. Give a detailed account of which activities you found most difficult during the voice hearing experience. (Computation, puzzles, reading, writing, patient teaching or interview questions). What was it that you found difficult about this activity?

The most difficult activity was reading for me. I could read fine, but I could tell I was not retaining anything I read. I luckily was able to easily find all the answers to our quiz, but the reading was still hard. I could tune out most of the voices but retaining the information was still harder than it usually is. I also felt like I was reading slightly slower. Looking back, I do not remember anything that the voices were saying or what I read. It was doable but it was a lot harder so I can see why people that hear voices can have a much harder time.

3. What are some communication strategies that you could use with a patient experiencing hearing voices that are distressing? Be specific and give examples.

One thing you can do is show that you expect that they hear the voices but not reinforcing them. This means that with a patient you talk to them and show that you know that they are hearing voices but still orienting them to the fact that they

are hallucinations. Another is actually talking to the patient. Being in the hospital can be isolating and scary so you need to talk to the patient and allow them to tell their side of what is going on. This also leads to another strategy which is asking how the patient usually deals with the voices and if there are any things that make them worse. This allows for the nurse to individualize care so that they get the maximum benefit of care. Nobody is exactly the same, so you need to know specific things for each patient. Also, you need to ask the patient what the voices are saying. This is important to see if the voices are saying anything like hurt yourself or other harmful things. You can then implement therapeutic communication to make sure the patient is safe. Finally, this also leads to asking if the patient has a plan to kill themselves if the voices are telling them to or if they are suicidal. This allows you to properly help a patient and keep them safe when they have these thoughts. You can be with the patient and get any other help that is needed to ensure the patients safety.

4. What are some assessment questions that you would anticipate asking a patient for whom you are providing care and who is experiencing unwanted auditory hallucination? List at least 3 questions.
 - a. What are the voices telling you?
 - b. What are things you usually do to cope with the voices?
 - c. Are there any times that the voices are more prevalent or louder?

5. What are some therapeutic nursing interventions that might be used for a patient who is experiencing unwanted auditory hallucination?

One simple thing you can do is reduce any other stimulus that could be making them worse. Asking how the patient usually deals with them and using what they say to plan care more specific for the patient. Using therapeutic talk and actually talking to the patient. Observing for signs of hearing voices so that you can properly ask if they are and what the voices are saying so that you can properly protect the patient if they are saying something harmful. Showing that you except that they hear the voices but not reinforcing them. Also making the environment safe for the patient especially when the voices are telling them to hurt themselves and properly observing them. Depending on the patient you can explain the reason they are hearing the voices scientifically and ask the patient why they may

be occurring. Suggesting coping strategies that may benefit the patient like listening to music. Lastly you need to treat the patient as a person so that they still have control of their life and we can be seen as allies just trying to help them.

6. How will this experience influence your future nursing practice?

I will be more understanding when I do have a patient that hears voices since I know a little bit more of what they experience. I will also be understanding and properly communicate with the patients so that they get the best care that is possible. I know how hard it is because these patients cannot just stop hearing these voices so I will always try to understand them. I will remember that these patients are still people and their diagnosis does not define who they are.