

Hearing Voices That Are Distressing

Guided Reflection

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

I didn't realize how much distress people have to go through in life and there is no cure for this diagnosis. I am sure people who have this are so scared and don't seek help early due to the stigma of being called crazy or getting their life taken away and put in a hospital.

2. Give a detailed account of which activity you found most difficult during the voice hearing experience. What was it that you found difficult about this activity?

I, personally did find doing activity hard because I am around an environment where I hear my family non stop crying, laughing, talking etc. So I have learned to adjust to hearing things and still focusing on what task I am doing. I did find reading hard to do because I had to reread the content.

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

I felt like when taking a walk and actually talking to someone or doing something with someone made the voices more tolerable. It was easier to manage the voices and know the more I did everyday tasks with someone the voices felt like they were whispering than shouting.

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.

When do you hear the auditory the most?

What makes the auditory more tolerable?

Who do you turn / what do you turn to when you feel like the auditory is intolerable?

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

Painting or deep breathing, maybe even quality time with a friend. These will help keep them from letting the voices overcome them. I find yoga to be relaxing, calming and a good atmosphere to relax the mind and thoughts.

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

I will never assume a patient is not hearing or seeing things and instead of proving to a patient nothing is there trying to comfort them in a time of hopelessness. Being understanding to patients and advocating ways to help manage patient symptoms. I will do a full history look up on a patient if I see signs or presents of these diagnoses.