

The Effect of Therapeutic Play on Children's Anxiety in the Inpatient Room at the Dr. Rom. Djoelham Binjai

Domaria¹, Ardianto², Aldiansyah³, Nurul Pratiwi⁴, Selvi Aulia⁵, Selvi Andaresta⁶

D-III Nursing Study Program, College of Health Sciences (Stikes), Putra Abadi Langkat

ARTICLE INFO**Keywords:**

Child,
Therapeutic Play,
Inpatient Room.

ABSTRACT

Children are unique individuals and not miniature adults. Children are also not a parent's property or wealth that can be assessed socio-economically, but the future of the nation who is entitled to individual health services and is still dependent on adults and their environment, meaning that they need an environment that can facilitate them in meeting their basic needs and for independent learning. . The effects of treatment experienced by children when seeking treatment at health care facilities need attention and problem solving so that when undergoing treatment a child knows and is cooperative in dealing with problems that occur during the treatment. Therapeutic play is believed to be able to eliminate boundaries, internal barriers, anxiety, frustration and have emotional problems with the aim of changing children's inappropriate behavior into expected behavior and children who are often invited to play will be more cooperative and easy to work with when undergoing treatment. Research Objectives To determine the effect of therapeutic play on children's anxiety in the inpatient ward of the Dr. RM. Djoelham Binjai and to determine the effect of therapeutic play on children's anxiety in the inpatient room of the Dr. Regional General Hospital. RM. Djoelham Binjai Year 2020. The results of hypothesis testing to see the relationship between variable X and variable Y are with a significant level (α) = 5% (0.05) and $df = 1$, the results are $p.value = 0.000$ at $df = 1$ where $sig < (0.000 < 0.05)$, it can be seen that there is a therapeutic effect of play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai 2020.

E-mail:

Domaria12@gmail.com

Copyright © 2020 Science Midwifery.

1. Introduction

According to the World Health Organization (WHO) in 2018, almost 80% of children experienced hospitalization. It is estimated that more than 5 million children or more than 50% in the United States undergo hospitalization due to surgical procedures, which will experience anxiety and stress. More than 1.6 million children and children aged between 2-6 years undergoing hospitalization due to injury and various other causes (Disease Control, National Hospital Discharge Survey (NHDS), (Ingrith, 2015). In Indonesia the number of visits by pediatric patients for hospitalization hospital stays in 2010 were 1,699,934 while in 2011 there were 1,204,612.

According to the Indonesian Health Department (2015) that 3-10% of children are cared for, both toddlers, preschoolers or school-age children, about 3 to 7% of toddlers and 5 to 10% of preschoolers undergoing hospitalization experience anxiety. Preschool-aged children and school-age children are susceptible to disease, so many children of that age have to be hospitalized and cause the population of children hospitalized to experience a very rapid increase which is accompanied by anxiety.

According to a report from the North Sumatra Ministry of Health (2016), the long-term impact on pre-school age children who experience anxiety due to hospitalization is the inhibition of child growth and development. in 120 pediatric patients in the PICU and pediatric surgical wards. Where 17.5% of patients showed anxiety and fear of medical action 6 months after being discharged from

the hospital and 14% showed fear of continuing medical action 6 months later. Meanwhile, according to a report from the Binjai City Health Office, from 32 children there were 30 children whose anxiety was reduced after receiving the therapeutic play intervention and 2 children having the same anxiety before the therapeutic play intervention. This is supported by Apriliawati's research (2016), with research results showing the average anxiety level of children receiving therapeutic play is 29.27% and the average anxiety level of children who do not receive therapeutic play is 36.07%.

The results of a preliminary study conducted at Dr. General Hospital. RM Djoelham Binjai by researchers obtained data on the amount of anxiety in children as many as 200 people with a total percentage of 115 women (57.5) and 85 men (42.5) this happened because of not doing therapeutic play on children properly at the time of children undergoing hospitalization, out of 10 children who underwent hospitalization 6 of them said that the hospitalization was not carried out properly for children who were undergoing treatment at the hospital.

Children are unique individuals and not miniature adults. Children are also not a parent's property or wealth that can be assessed socio-economically, but the future of the nation who is entitled to individual health services and is still dependent on adults and their environment, meaning that they need an environment that can facilitate them in meeting their basic needs and for independent learning. (Supartini, 2017).

Health facilities such as hospitals for health services for children are important in improving the health status of these children. Treatment in health care facilities is often an anxious experience, for both the child and the parent. The environment of health care facilities is a cause of anxiety for toddlers and parents, both the physical environment of health care facilities such as buildings/treatment rooms, tools, distinctive odors, white clothes for health care facility officers and the social environment such as fellow pediatric patients or the interactions and attitudes of officers. health itself so that children often experience feelings of fear, anxiety, tension, pain and other unpleasant feelings (Ngastiyah, 2017).

In general, children who seek treatment at health care facilities such as hospitals are mostly uncooperative with the nursing actions given, such as when they are injected, a thermometer is installed, when a nurse comes with medicine, when blood is taken for laboratory check, most of the children give a response such as crying, struggling, - thrashing, hugging mother, inviting her home, and screaming. Feeling afraid of doctors, nurses and other health workers.

The effects of treatment experienced by children when seeking treatment at health care facilities need attention and problem solving so that when undergoing treatment a child knows and is cooperative in dealing with problems that occur during the treatment. The anxiety reactions shown by children during treatment are very diverse, such as children who act aggressively, namely as self-defense by issuing hissing and yelling words and closing themselves off and being uncooperative while undergoing treatment (Alifatin, 2016).

Therapeutic play is believed to be able to eliminate limitations, internal barriers, anxiety, frustration and have emotional problems with the aim of changing children's inappropriate behavior into expected behavior and children who are often invited to play will be more cooperative and easy to work with when undergoing treatment (Mulyaman, 2007). 2018).

Anxiety is the most common feeling experienced by children when seeking treatment at health care facilities. Anxiety that is often experienced such as crying, and fear of new people. The response of children's anxiety depends on the stage of the child's age. Children's anxiety due to stress caused by the situation while undergoing treatment will have an impact on the child's level of cooperation with the treatment and care provided if it is not overcome, one of them is play therapy (Hurlock, 2016).

Research on the effectiveness of play therapy has been carried out by Suryanti, et al (2017), regarding the effect of playing coloring and origami therapy on anxiety levels as the effect of hospitalization in pre-school age children at dr. R. Goetheng Tarunadibrata Purbalingga. This study provides results, namely the frequency of anxiety levels suffered by pre-school age children the most is with moderate anxiety levels as many as 16 children (53.3%). Furthermore, the results of the bivariate analysis showed that there was a difference between the level of anxiety experienced by children before therapeutic play was performed and after therapeutic play was performed, with $p = 0.0001$ at significant = 0.05. Other studies such as that conducted by Handayani and Puspitasari (2018) on the effect of therapeutic play on the cooperative level of children treated at Pantj Rapih Hospital in Yogyakarta. The results showed that there was a significant difference in the level of

cooperation in the treated children between before and after the administration of therapeutic play with $p = 0.000$ and $= 0.05$. The results also show that children are more cooperative towards treatment and care after being given therapeutic play.

Based on the events or phenomena mentioned above, the researchers are interested in conducting research on the effect of therapeutic play on children's anxiety in the inpatient room of the Dr. Regional General Hospital. RM. Djoelham Binjai Year 2020.

2. Method

2.1. Conceptual Framework and Research Variables

The conceptual framework in this study was prepared based on a literature review where the researcher wanted to know the effect of therapeutic play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai Year 2020 with research objectives, the variables can be described as follows:

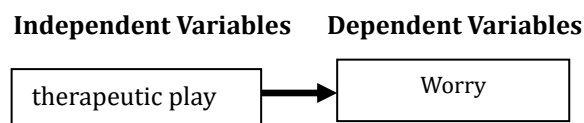


Image 1. Research Concept Framework

2.2. Research Hypothesis

The hypothesis is a temporary answer that must be tested for truth in the research the proposed hypothesis is:

- a. H_0 : No therapeutic effect of play on children's anxiety in the room Regional General Hospital Dr. RM. Djoelha Binjai
- b. H_a : There is a therapeutic effect of play on children's anxiety in the inpatient room Dr. Regional General Hospital stay. RM. Djoelham Binjai.

2.3. Types of research

This type of research is a descriptive study using a cross-sectional study design. The purpose of this research is to determine the effect of therapeutic play on children's anxiety in the inpatient room at the Regional General Hospital Dr. RM. Djoelham Binjai in 2020.

2.4. Place and time of research

The research will be carried out at the Regional General Hospital Dr. RM. Djoelham Binjai and the research was carried out starting in September 2020.

2.5. Population and Sample

The population taken in this study were children who were treated at the Dr. RM. Djoelham Binjai as many as 35 people. In this study, the sampling technique was carried out using a total sampling technique of 35 people. However, researchers still optimize respondents as research objects to explore data. The sample criteria include inclusion criteria and exclusion criteria, where these criteria determine whether or not the sample can be used. The inclusion and exclusion criteria in this study are:

- a. Inclusion criteria are criteria where research subjects can represent in research samples that meet the requirements as samples (Notoatmodjo, 2016), namely:
 - 1) Children treated at the Regional General Hospital Dr. RM. Djoelham Binjai.
 - 2) Willing to be a respondent.
 - 3) Can speak Indonesian
- b. Exclusion Criteria

Exclusion criteria are criteria where research subjects cannot represent the sample because they do not meet the requirements as research samples (Notoatmodjo, 2016). The exclusion criteria for this study were that the respondents did not fill out the questionnaire completely.

2.6. Method of collecting data

The source of data used in this study is primary data, namely data obtained by researchers. The data collection method used in this study is to use questionnaires or questionnaires. Arikunto

(2016) states that questionnaires are a number of written questions that are used to obtain information from respondents in terms of reports about their personalities, or things they know. To facilitate the analysis, a score (scoring) is given to each answer for the independent and dependent variables as follows.

- a. Therapeutic Questionnaire play
According to Arikunto (2016), the research instrument is a tool when research uses a method. The data collection tool used in this study was a questionnaire about training where the questionnaire consisted of 10 statements. The criteria for giving a score of 1 if you answered yes and a score of 0 if you answered no.
- b. Anxiety Questionnaire
The questionnaire on job performance consists of 10 statements. The criteria for scoring a score of 1 if you answer yes and a score of 0 if you answer no.

3. Results and Discussion

3.1 Univariate Analysis

The results of data collection from respondents through this study about the effect of therapeutic play on children's anxiety in the inpatient room at the Regional General Hospital Dr. RM. Djoelham Binjai with 35 respondents can be presented in the form of a table as follows:

TABLE 1
THERAPEUTIC FREQUENCY DISTRIBUTION OF RESPONDENT PLAY IN HOSPITAL
GENERAL DR. RM DJOELHAM BINJAI IN 2020 (N=35)

No	Category	Total (n)	Percentage (%)
1	Are not done	12	34.3
2	Conducted	23	65.7
	Total	35	100

In table 1, it can be seen that from 35 respondents the majority of therapeutic play was carried out by 23 respondents (65.7%) and the minority was not carried out as many as 12 respondents (34.3).

TABLE 2
DISTRIBUTION OF RESPONDENTS' ANXIETY FREQUENCY IN THE ICU
GENERAL HOSPITAL DR. RM DJOELHAM BINJAI YEAR 2020 (N=35)

No	Variable	Total (n)	Percentage (%)
1	Light	25	71.4
2	Currently	4	11.4
3	Heavy	6	17.2
	Total	35	100

In table 2 it can be seen that from 35 respondents the majority of respondents were mild anxiety as many as 25 respondents (71.4%) and moderate minority as many as 4 respondents (11.4%).

3.2 Bivariate Analysis

TABLE 3
FREQUENCY DISTRIBUTION OF THE EFFECT OF PLAY THERAPEUTIC ON CHILDREN'S ANXIETY IN THE ICU
STAYING IN THE REGIONAL GENERAL HOSPITAL OF DR. RM. DJOELHAM BINJAI IN 2020 (N=35)

No	Therapeutic Play	Worry						Total	p.value	df	
		Light		Currently		Heavy					
		n	%	N	%	n	%				
1	Are not done	9	36.0	2	50.0	1	8.3	12	34.3	0.000	1
2	Conducted	16	64.0	2	50.0	5	83.3	23	65.7		
	Total	25	100	4	100	6	100	35	100		

Based on table 3, it can be seen that from the 35 respondents, the majority of therapeutic play was carried out by 16 respondents (64.0%) and the minority was not carried out as many as 9 people (36.0%). The results of hypothesis testing to see the relationship between variable X and variable Y are with a significant level (α) = 5% (0.05) and df = 1, the results are p.value = 0.000 at df = 1 where sig < (0.000 < 0.05), it can be seen that there is a therapeutic effect of play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai in 2020.

3.3 Discussion

The results showed that of the 35 respondents, the majority of the therapeutic play was carried out by 23 respondents (65.7%) and the minority was not carried out as many as 12 respondents (34.3%) and the majority of the anxiety respondents were mild as many as 25 respondents (71.4%) and the minority was moderate as many as 4 respondents (11.4%).

The results of the statistical test showed that by using a significant level of 0.05 and the statistical test results obtained showed that there was a therapeutic effect of play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai in 2019 can be seen from a significant value of $0.000 < 0.05$. The results of hypothesis testing to see the relationship between variable X and variable Y are with a significant level (α) = 5% (0.05) and $df = 1$, the results are $p\text{-value} = 0.000$ at $df = 1$ where $\text{sig} < (0.000 < 0.05)$, it can be seen that there is a therapeutic effect of play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai in 2020.

Children are unique individuals and not miniature adults. Children are also not a parent's property or wealth that can be assessed socio-economically, but the future of the nation who is entitled to individual health services and is still dependent on adults and their environment, meaning that they need an environment that can facilitate them in meeting their basic needs and for independent learning. (Supartini, 2017).

Health facilities such as hospitals for health services for children are important in improving the health status of these children. Treatment in health care facilities is often an anxious experience, for both the child and the parent. The environment of health care facilities is a cause of anxiety for toddlers and parents, both the physical environment of health care facilities such as buildings/treatment rooms, tools, distinctive odors, white clothes for health care facility officers and the social environment such as fellow pediatric patients or the interactions and attitudes of officers. Health itself so that children often experience feelings of fear, anxiety, tension, pain and other unpleasant feelings (Ngastiyah, 2017).

The effects of treatment experienced by children when seeking treatment at health care facilities need attention and problem solving so that when undergoing treatment a child knows and is cooperative in dealing with problems that occur during the treatment. The anxiety reactions shown by children during treatment are very diverse, such as children who act aggressively, namely as self-defense by issuing hissing and yelling words and closing themselves off and being uncooperative while undergoing treatment (Alifatin, 2016).

Therapeutic play is believed to be able to eliminate limitations, internal barriers, anxiety, frustration and have emotional problems with the aim of changing children's inappropriate behavior into expected behavior and children who are often invited to play will be more cooperative and easy to work with when undergoing treatment (Mulyaman, 2007). (2018).

Anxiety is the most common feeling experienced by children when seeking treatment at health care facilities. Anxiety that is often experienced such as crying, and fear of new people. The response of children's anxiety depends on the stage of the child's age. Children's anxiety due to stress caused by the situation while undergoing treatment will have an impact on the child's level of cooperation with the treatment and care provided if it is not overcome, one of them is play therapy (Hurlock, 2016).

Research on the effectiveness of play therapy has been carried out by Suryanti, et al (2017), regarding the effect of playing coloring and origami therapy on anxiety levels as the effect of hospitalization in pre-school age children at dr. R. Goetheng Tarunadibrata Purbalingga. This study provides results, namely the frequency of anxiety levels suffered by pre-school age children the most is with moderate anxiety levels as many as 16 children (53.3%). Furthermore, the results of the bivariate analysis showed that there was a difference between the level of anxiety experienced by children before therapeutic play was performed and after therapeutic play was performed, with $p = 0.0001$ at significant = 0.05.

Other studies such as that conducted by Handayani and Puspitasari (2018) on the effect of therapeutic play on the cooperative level of children treated at Panti Rapih Hospital in Yogyakarta. The results showed that there was a significant difference in the level of cooperation in the treated children between before and after the administration of therapeutic play with $p = 0.000$ and = 0.05. The results also show that children are more cooperative towards treatment and care after being given therapeutic play.

Researchers in this case are interested in seeing whether therapeutic play is carried out and

plays a role in anxiety in their children so that children do not experience anxiety in taking treatment at the hospital. Based on this, it is expected that the hospital management is expected to always provide information related to the implementation of therapeutic play and always involve or involve parents in the treatment process for children.

4. Conclusion

Based on the results of data analysis and discussion, it can be concluded that the majority of therapeutic play was carried out by 23 respondents (65.7%) and the minority was not carried out by 12 respondents (34.3%). The majority of respondents were mild anxiety as many as 25 respondents (71.4%) and a moderate minority as many as 4 respondents (11.4%). The results of hypothesis testing to see the relationship between variable X and variable Y are with a significant level (α) = 5% (0.05) and $df = 1$, the results are $p.value = 0.000$ at $df = 1$ where $sig < (0.000 < 0.05)$, it can be seen that there is a therapeutic effect of play on children's anxiety in the inpatient room at the Dr. RM. Djoelham Binjai Year 2020.

References

- Arikunto, S. (2016). *Research Procedure A Practical Approach*. Jakarta: Rineka Cipta.
- Alifatin Insaatu Irkha. (2016). *Supplier Selection Analysis Using Process Hierarchy Analysis Method At Agricultural Stores and UD Mansur Building Jalan Raya Papar Pare Kediri*. (thesis). Kediri(ID).
- Ardi M (2016). *Growth and Play Therapy in Children*. Jakarta: Salemba Medika.
- Diana Mutiah. (2016). *Psychology of Early Childhood Play*. Jakarta: Kencana.
- Fatimah, S., Nurhidayah, I. and Rakhmawati, W. (2018) *Factors Contributing to the Nutritional Status of Toddlers in Ciawi District, Tasikmalaya Regency*, 10(Xviii), pp. 37–51.
- Hurlock, Elizabeth B. (2016). *Developmental Psychology: A Life Span Approach*. Jakarta : Erlangga.
- Handayani and Puspitasari (2018). *The Effect of Therapeutic Play on the Cooperative Level of Children Treated at Panti Rapih Hospital, Yogyakarta*.
- Lumongga Lubis Namora (2018). *Understanding the Basics of Counseling in Theory and Practice*, Jakarta: Kencana Prenada Media Group.
- Muliaman. (2018). *OJK Public Lecture on Fin Tech*. Retrieved 22 March Sunday, 2019, from IBS Jakarta: <http://www.ibs.ac.id/img/doc/MDH%20%20FinTech%20IBS%20June%202017.pdf>.
- Murtiningsih, Suryanti. (2017). *Child Anxiety in Facing Hospitalization*. Media Library. Jakarta.
- Nursalam. (2018). *Nursing management application in professional nursing practice edition 4*. Jakarta : Salemba Medika.
- Notoatmodjo, S, (2015). *Health Research Methods*, Jakarta: Rineka Cipta.
- I'm sorry. (2017). *Sick Child Care(2Thed)*. Jakarta : EGC.
- JRL Coal. (2017). *Sari Pediatrics*. Volume 12 No. 1 of June 2010. Department of Pediatrics. FKUI/RSCM : Jakarta.
- Singgih D. Gunarsa, (2018). *Child and Adolescent Developmental Psychology*. BPK Gunung Mulia, Jakarta.
- Supartini. (2017). *Textbook of Basic Concepts of Child Nursing*. Jakarta. EGC.
- Suriadi & Yuliani, R. (2016). *Handbook of Clinical Practice : Nursing Care for Children*, Edition : 2, Sagung Seto : Jakarta.
- Soetjningsih. (2016). *Child Development*. Jakarta: EGC.
- Wong, Donna L, (2018). *Wong's Textbook of Pediatric Nursing (6th ed)*. Jakarta: EGC.