

Application Of Busy Book Play Therapy In Nursing Care For Preschool Children Who Experience Anxiety During Hospitalization At Menggala Regional Public Hospital

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ABSTRACT

Background & Objective: Hospitalization is an emergency or planned process that requires children to stay in the hospital to undergo treatment and care procedures until the child's condition improves and can be returned home. One of the consequences that can occur in children who undergo hospitalization is anxiety. Interventions that can be done to reduce children's anxiety levels while undergoing hospitalization are by doing busy book play therapy. The purpose of this study was to determine the effect of the application of busy book play therapy on the anxiety level of children undergoing hospitalization. **Method:** This research method uses a descriptive approach with a case study design. Respondents in this case study were two preschool-age children who were indicated to experience anxiety. The intervention provided is busy book play therapy which is carried out once a day for 15 minutes. The level of children's anxiety was measured before and after the implementation of play therapy. **Result:** The results of the analysis show that there is a decrease in the level of children's anxiety after busy book play therapy. **Conclusions:** Busy books as one of the creative media that can be used to reduce children's anxiety levels during hospitalization.

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Introduction

Hospitalization is a condition due to planned or emergency reasons that requires a child to be hospitalized in order to receive treatment that can provide some psychological changes in the child (Abdullah & Nursanti, 2022). Hospitalization is a condition where a person enters the hospital to receive diagnostic examinations, surgical procedures, medical care, medication, stabilize the body's condition and monitor a person's condition during treatment (Novianti & Shahroh, 2020).

Hospitalization is an emergency or planned process that requires a child to stay in the hospital to undergo treatment and care procedures until the child's condition improves and can be returned home (Kusumaningtiyas & Priastana, 2020).

Based on the results of a survey by the United Nations International Children's Emergency Fund (UNICEF) in 2019, data was obtained that 84% of children experienced anxiety during hospitalization and based on data from the World Health Organization (WHO) in 2019, 5-10% of children in Europe experienced stress during hospitalization (Yazia and Suryani, 2024). In Indonesia, the percentage of hospitalization in children continues to increase every year, namely 3.49% in 2018, 3.84% in 2019 and 3.94% in 2020 with the percentage of hospitalization of children aged 0 - 4 years as much as 6.22% in 2018 and 6.99% in 2019 and increasing to 7.36% in 2020 while for ages 5 - 9 years the data obtained was 2.89% in 2018, 3.01% in 2019 and 3.14% in 2020 (Badan Pusat Statistik, 2020). In Indonesia, the percentage of hospitalization in children continues to increase every year, namely 3.49% in 2018, 3.84% in 2019 and 3.94% in 2020 with the percentage of hospitalization of children aged 0 - 4 years as much as 6.22% in 2018 and 6.99% in 2019 and increasing to 7.36% in 2020 while for ages 5 - 9 years the data obtained was 2.89% in 2018, 3.01% in 2019 and 3.14% in 2020 (Badan Pusat Statistik, 2020). At Menggala Regional Hospital, based on data from Medical Records, data was obtained on the increase in the number of children treated in the last three years, namely 196 children were treated in 2021, this number increased to 539 children in 2022, and in 2023, 710 children were recorded as being treated and hospitalized at Menggala Regional Hospital.

Interventions that can be done to reduce children's anxiety levels during hospitalization are by conducting play therapy that can be adjusted to the child's condition when sick and hospitalized. Play therapy is an effective action to reduce anxiety levels in children (Mulyanti and Kusmana., 2018). Through play activities, aspects of child development can grow optimally and inviting preschool children to play has been proven to improve mental development and increase children's intelligence even though the child is malnourished (Ardiana, 2020).

One of the media that can be used for children's play activities is a busy book, namely a media in the form of a book with colored pictures, picture puzzles, matching pictures, and containing interactive and educational games (Afrida, et al., 2021). Playing busy books in preschool children can increase creativity as a means of learning activities that teach the concepts of counting, reading, children's language skills, stimulate children's thoughts, feelings and can help children solve problems through play activities (Purnamasari, Murniasih & Chumaerotusyfa, 2021).

Objective

This research is a case study research which aims to determine the effect of busy book play therapy on the anxiety level of preschool aged children undergoing hospitalization in the children's inpatient room at Menggala Hospital, Lampung.

Method

The method used in this case study is a descriptive approach with a case study design. The respondents who were used as case management in this final scientific work were pre-school aged children (3-6 years) who were hospitalized for the first time and were indicated to be experiencing anxiety based on nursing assessment.

The actions taken in this case study were initiated by conducting an assessment on all preschool-aged child patients who were treated to obtain anxiety percentage data. Two child patients in the preschool age category (3-6 years) who experienced anxiety after obtaining consent to become respondents from the patient's parents were then subjected to an in-depth assessment in terms of physiological, behavioral, cognitive, and affective aspects including data on the child's anxiety level using the Preschool Anxiety Scale (PAS) Parent Report questionnaire. After the assessment data was obtained, nursing interventions were then prepared based on the nursing diagnoses that emerged, namely in the form of anxiety reduction using busy book play therapy. Before busy book play therapy was carried out, the child would first be introduced to busy books.

Busy book play therapy was carried out on the child's bed accompanied by a nurse and the patient's parents. This play therapy was carried out once a day for 15 minutes for two days. Nursing evaluation was then carried out on the third day the child was treated. The evaluation was carried out based on the criteria for the results that had been achieved, complete with a re-assessment of the child's anxiety level using the Preschool Anxiety Scale questionnaire. The decrease in anxiety levels will be recorded and then compared to before the implementation of busy book play therapy. This assessment and re-measurement of anxiety levels is carried out to assess the effectiveness of providing therapy for children's anxiety.

Results

The characteristics of the clients in this case study are preschool-age male children, aged 3.8 years in case I and 3.9 years in case II. Both clients were hospitalized for the first time and had no previous experience of being hospitalized. Both clients were admitted with different medical diagnoses. The client in case I was hospitalized with a medical diagnosis of Febrile convulsions while the client in case II was treated with a medical diagnosis of Unspecified head injury. Both clients have similarities in terms of developmental ability based on the KPSP questionnaire, namely that both clients tend to be children who are not yet independent. The anxiety levels of the two clients are different, the client in case I has a severe anxiety level with a score of 71, while the client in case II has a moderate anxiety level with a score of 42. For the level of education, the parents of the clients in cases I and II both have elementary education levels. The complaints felt by both clients that lead to anxiety are the same, namely sleep disturbances, decreased appetite, and feelings of fear or even crying when being examined by a doctor or nurse.

After the assessment was conducted, several nursing problems emerged, namely anxiety, hyperthermia and diarrhea in case I, while the nursing problems that emerged in case II were anxiety, acute pain and impaired skin integrity. This anxiety data is also based on the results of the calculation of the Preschool Anxiety Scale (PAS) Parent Report questionnaire. Complaints that lead to anxiety based on the assessment conducted are that children tend to cry when being examined by a doctor or nurse, have difficulty sleeping, are afraid of being left by their parents and even refuse to eat. These complaints were observed to be more dominant in both cases compared to the other two nursing diagnoses. The determination of anxiety as the main nursing problem in these two cases is also based on several things. Case I, a child with a medical diagnosis of Febrile convulsions or febrile seizures, does have other nursing problems, namely hyperthermia and diarrhea, but the nursing assessment in this

study was conducted on the second day the child was treated where on the second day, the researcher observed that the hyperthermia in the child in case I had been handled well. The child's temperature in case I was monitored in the good category and never reached above 38 ° C with intravenous paracetamol administration. In addition, the child in case I also did not show signs of severe dehydration due to diarrhea.

In case II, the child with a medical diagnosis of Unspecified injury of head did have a history of head injury which was the main reason the child was hospitalized. However, the researcher observed that the pain complaints experienced by the child in case II were still in the mild pain category with a pain scale at the time of the assessment being on a scale of 2. The child's expression was neutral, occasionally smiled, still wanted to talk and play. The results of the radiological examination also showed that there was no epi/subdural or intraparenchymal bleeding. Another diagnosis in the child in case II, namely impaired skin integrity, was observed to be still in the controlled stage and did not interfere with the child's activities. Because of this, the researcher concluded that anxiety in both cases was the main nursing problem.

The implementation of the application of busy book play therapy in this case study began with identifying changes in the child's anxiety level by observing whether or not the child was interested in the busy book game which also showed data on the child's separation phase with the environment whether the child was in the protest phase or despair phase or was already in the denial phase. The results in both cases showed that the child in case I was in the protest phase towards the despair phase. Meanwhile, the child in case II was recorded as having passed the protest phase and despair phase.

During implementation, the researcher also monitored the signs of verbal and non-verbal anxiety in the child during the play therapy process. The implementation of play therapy was carried out in a therapeutic environment by removing medical objects from the child's bed environment such as examination tools and bringing the busy book closer to the child accompanied by the child's parents. Busy book play therapy was carried out once a day for 2 days with a duration of 15 to 20 minutes adjusted to the child's condition.

The busy book used in this case study is a 30-page book for ages 3 and above that contains colorful pictures that can be easily removed and reattached. The game materials in the busy book used by the researcher include guessing pictures, matching pictures, matching colors, counting and playing numbers, puzzles, pictures of transportation, vegetables and fruits that can stimulate children's motoric and sensory skills. The two children in this case study were children who had never played with creative books like busy books before and busy books became a new game for the two children in this case study so the researcher first introduced the busy book to the two children in this case study.

In case I, a child with a medical diagnosis of Febrile convulsions, an anxiety score of 71 (severe anxiety) was obtained, this score decreased to 31 (moderate anxiety) after the application of busy book play therapy. While in case II, a child with a medical diagnosis of Unspecified injury of head, an anxiety score of 42 (moderate anxiety) was obtained which then decreased to 15 (low anxiety) after the application of busy book play therapy.

TABLE 1. evaluation of case study results

Case	Anxiety Score Before Busy Book Play Therapy	Anxiety Score After Busy Book Play Therapy
I	71 (severe anxiety)	31 (moderate anxiety)
II	42 (moderate anxiety)	15 (low anxiety)

Discussion

In this case study, data was obtained that both clients were child patients who had no previous experience of being treated. The characteristics of anxiety in both cases are in accordance with the theory put forward by Stuart (2023) which states that the characteristics of anxiety which are part of everyday life are an emotional state without a specific object, this is what distinguishes it from fear triggered by things that are not yet known and accompanies all new experiences such as the first experience of entering school. In contrast to fear which has a specific source or object so that someone can identify it and is able to explain the fear, someone can grow from anxiety if they succeed in dealing with, relating to and learning from creating anxiety experiences. The hospital environment that is foreign to children, the physical condition due to the illness experienced by both children, various treatment procedures and medical examinations carried out can cause anxiety in children so that children experience sleep disorders, decreased appetite and even developmental disorders (Mulyanti, 2020).

In addition, this anxiety can also be caused by the child's low adjustment problems. Thompson, et al., 2024 stated that children who grow up in low-income environments are more likely to experience adjustment problems compared to children who are in better economic conditions. The characteristics of the two cases in this study are similar in terms of age, gender, child development level, education level of the child's parents and the family environment where the child lives, but there are differences in the level of anxiety of the child, namely severe anxiety in case I and moderate anxiety in case II. This difference can occur due to different medical diagnoses in the two cases that underlie how the child is treated and the complaints experienced by the child. In contrast to case II, the complaint of diarrhea in case I made the child look pale and weak. This is also supported by the results of laboratory tests in case I which showed hemoglobin levels approaching the minimum limit, namely 10.4 gr / dl with GDS 87 mg / dl while hemoglobin levels in case II were in the good range, namely 11.8 gr / dl with GDS 141 mg / dl. In addition, researchers observed that this difference in anxiety levels was also due to differences in the treatment therapy received by the two children. The child in case I had intravenous therapy in the form of paracetamol injection of 3x120 mg in a 1000 mg/100 cc preparation, which means that the child in case I had to receive 12 cc paracetamol injection 3 times a day. This is different from case II which only received oral and topical therapy.

The final results in this case study revealed a decrease in children's anxiety levels after being given busy book play therapy. One therapy that can be used to reduce anxiety in children during hospitalization is through play therapy through which children can learn about the environment, care and approaches with both nurses and doctors in the hospital. Play therapy is also an important aspect of a child's

life and one of the most effective tools for dealing with children's stress when hospitalized. Because hospitalization causes a crisis in a child's life and is often accompanied by excessive stress, children need to play to release the fear and anxiety they experience as a coping tool in dealing with stress (Saputro & Fazrin, 2017). Busy book as one of the game media that has several advantages including as a learning medium that can explore children's abilities, increase children's knowledge and is a fun game that can stimulate children's creativity (Mufliharsih, 2017). The provision of anxiety reduction intervention with busy book play therapy is carried out based on seven principles of implementing play therapy for children undergoing hospitalization, namely games that do not require a lot of energy that can drain the child's energy, short play time, games that are easy for children to do, games that are safe for children, according to the child's age group, do not conflict with the therapy that the child is undergoing in the hospital, involving the family in playing activities (Wulandari & Meira, 2016).

In a study conducted by Rahmadani, et al (2017) it was found that through play therapy, the body will physiologically increase the secretion of endorphin and Pro Opioid Melano Cortin (POMC) hormones through stimulation carried out by Corticotropin Releasing Factor (CRF) which will then increase the production of encephalin by the adrenal medulla which will ultimately affect the mood to be happy and provide a feeling of relaxation. Research conducted by Simamora, et al (2022) also stated that children will feel safer and more comfortable in a foreign environment such as a hospital through play therapy which can provide a relaxing effect on children who are being treated. Suwatra, et al., 2019 in their research found that there was a significant difference in the problem solving abilities of children stimulated with busy books compared to conventional therapy. Anggraini, et al., 2019 also showed that busy book games have an influence on increasing the social emotional development of early childhood. Another study was conducted by Khodijah, et al., 2024 which also stated that busy books can reduce the level of anxiety in preschool children who are hospitalized.

Conclusion

Nursing problems related to the psychological condition of patients are often neglected or under-attended nursing problems. This can be seen from the absence of recording of anxiety data, especially those experienced by children undergoing hospitalization, which can then have an impact on the lack of intervention related to the psychological condition of children who are hospitalized in the pediatric inpatient room. Increasing awareness of the child's psychological condition without ignoring the child's physiological condition is certainly expected to help overcome the anxiety experienced by children with hospitalization that is often neglected.

The provision of busy book play therapy applies the principles of play therapy for children who are hospitalized so that the provision of therapy is expected to be effective and not conflict with the medical therapy that the child is undergoing. On the contrary, this intervention is expected to be a solution to the problem of children's anxiety during hospitalization.

The final evaluation in this case study showed a decrease in anxiety levels after busy book play therapy, which is a therapeutic game that can explore children's

feelings and thoughts as well as a diversion of feelings and can be part of relaxation therapy that can be recommended as part of health services for children undergoing treatment in hospitals, especially at Menggala Hospital. The provision of play facilities in the form of creative books such as busy books is expected to help overcome children's anxiety during hospitalization.

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