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## Effectiveness of Play Therapy upon Anxiety among Hospitalised Children

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**Abstract:** Hospitalization to any child is a very unpleasant and traumatic experience. Hospitalized children require more recreational play because, illness and hospitalization constitute a crisis in child's life and since these situations are fraught with overwhelming stresses, children need to play out their fears and anxieties as a means of coping with these stresses. Hence in this study, the investigator has tried to determine the effectiveness of play therapy upon anxiety among hospitalized children.

**Methods:** A true experimental pretest-posttest research design was used. The samples for the study were chosen by purposive sampling and the sample size was 30 in experimental group and 30 in control group. Tools such as Demographic variable proforma, Clinical variable proforma and State anxiety inventory scale were used to assess the anxiety of hospitalized children.

**Results:** The findings of the study revealed that in control group there was no significant difference in the mean and standard deviation of the anxiety levels ( $M = 49.5, 48.4$  &  $SD = 8.30, 8.36$ ) before and after play therapy. Whereas in experimental group significant difference in the mean and standard deviation of anxiety level ( $M = 49, 42.76$  &  $SD = 8.40, 8.29$ ) was noted before and after play therapy at  $p < 0.01$ . Overall study findings have identified the play therapy is effective in reducing the anxiety among hospitalized children.

**Keywords:** Play Therapy, Hospitalized Children, Anxiety.

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### INTRODUCTION

Children are the future of every nation. If today's children are healthy, it can lead to a much healthier future. An important index used to estimate the Nation's health is the status of health of children in the country. Children lack the language skills vocabulary and abstract thinking abilities and they have difficulties in expressing themselves with words (3). Hospitalization to any child is a very unpleasant and traumatic experience. Hospitalized children require more recreational play because illness and hospitalization constitute a crisis in child's life and since these situations are fraught with overwhelming stresses, children need to play out their fears and anxieties as a means to cope with these stresses (2).

The play is a universal language of children. Play allows children to learn social behaviors, develop cognitive abilities as well as gross motor skills, and work through emotional conflicts. Play therapy is very effective to revisited traumatic memories in order to get a child familiarity to fear and anxiety (1). A study was conducted in the pediatric wards of Christian Medical College and Hospital, Vellore, by Rebecca (7) to assess the knowledge, attitude, and practice of the parents and nursing personnel regarding the importance of play needs in hospitalized children in the age group of 1 month to 12 years.

The assessment of the knowledge and attitude revealed that both parents and nursing personnel had adequate knowledge (99.07%, 86.11%) and favorable attitude 27.77% and 94.44 % respectively towards the importance of play in children. The practice of 31.48% of parents was adequate but 97.22% of the nursing personnel had inadequate practice. The study findings

show that the practice of parents in regard to meeting the play needs of children is moderately adequate but the practice of the nursing personnel is grossly inadequate.

Play therapy reduces hospital anxiety. Children utilize play therapy to help themselves to deal with the stressors of life. It also helps hospitalized children to divert their mind from pain and loneliness. Play improves numerous intellectual and motor developments, creativity, and development of higher functions. The play has been known to divert child's mind. Toys are the "tools" of play and provide a more "natural" environment for a child.

#### **OBJECTIVES OF THE STUDY**

1. To assess the level of anxiety before and after play therapy among control and an experimental group of hospitalized children.
2. To determine the effectiveness of play therapy upon anxiety by comparing the anxiety between control and an experimental group of hospitalized children.
3. To determine the association between selected demographic variables and level of anxiety in control and an experimental group of hospitalized children.
4. To find out the association between selected clinical variables and level of anxiety in control group and an experimental group of hospitalized children.

#### **Null Hypothesis**

**Ho1** There will be no significant difference in the anxiety before and after play therapy in the control group and experimental group of hospitalized children.

**Ho2** There will be no significant association between selected demographic variables and level of anxiety before and after administration of play therapy in control and an experimental group of hospitalized children.

**Ho3** There will be no significant association between selected clinical variables and level of anxiety before and after administration of play therapy in control and an experimental group of hospitalized children.

#### **MATERIALS & METHODS**

A True experimental pre-test post-test design was adopted to conduct a study in Apollo Children's Hospital, Chennai, India after obtaining proper permission from the concerned authorities. A group of 60 hospitalized children was selected using purposive sampling method. Among the 60 children, 30 children were assigned randomly to the control group and 30 children in the experimental group. Randomization was carried out to assign samples using lot method children were assigned to the control and the experimental group. Three to five children who met the inclusion criteria were selected every day. After the initial introduction, the researcher obtained consent from the subjects to participate in the study. An assurance was given regarding confidentiality before the data collection procedure.

#### **INSTRUMENTS**

The tools used were Demographic variable proforma which included age, gender, education, the area of residence, income per month, education of father and mother. Clinical variable proforma included the system involved, duration of present illness, techniques used to ventilate fear, and to whom they ventilated the fear. State Anxiety Inventory Scale for Children was developed by Spielberger (1989) to assess the state anxiety symptoms in children. This scale consisted of 20 items. It is a four-point scale. Each item score ranges from 1 to 4. The researcher had assigned the following values to each response; -Not at all - 0; Mild - 1; Moderate - 2; and severe - 3. The obtainable score for the scale was 0-80. The total score was obtained by totaling the individual item score.

#### **DATA COLLECTION**

Data were collected through interview method using Demographic variable proforma, Clinical variable proforma and State Anxiety Inventory Scale. The pretest was conducted for the control group and the experimental group on the first day using the State anxiety inventory scale. Play therapy was given for 2 consecutive days at 4 hrs interval for half an hour, three times in a day near the bedside (ie at 9 am, 1 pm and 5 pm) individually for the experimental group of hospitalized children based on age and gender. Post-test was conducted at the end of the second day using state anxiety inventory scale.

### RESULTS & DISCUSSION

The findings showed that more than half of the children are in the age group of 8-10 years (53.3%,56.6%), living in urban area (86.6%,80%), with a family income of >15,000 (66.6%,80%), More than half of mothers and fathers of children were graduates (53.3%, 50%), (60%,70%) in the control and experimental group respectively.

It also revealed that, more than half of the children in the control and experimental group were having no previous history of hospitalization (63.3%, 60%), with duration of illness <7days (40%, 60%) ventilating their fear to their parents (40%, 46.6%) in control and experimental group respectively.

Majority of children in control group had moderate anxiety in pretest and post test (70%, 66.3%) whereas in the experimental group more than half of children had moderate anxiety (66.6%). Twenty-six percent had mild anxiety and 6.6% of children had severe anxiety during pre-test. However after play therapy (66.3%) had moderate anxiety (36.6%) had mild anxiety in the experimental group.

Patel (2014) conducted an experimental study and found that prevalence of anxiety is high among rural children when compared to urban children. They also found anxiety is less common in children with the previous history of hospitalization.(4)

**Table 1**  
**Comparison of Mean and Standard Deviation of Anxiety Before and After Play Therapy between Control and Experimental Group of Hospitalized Children.**

Group	Pretest Mean	SD	Post test Mean	SD	Paired- t value
Control group (n=30)	49.5	8.30	48.4	8.36	0.7
Experimental group (n=30)	49	8.44	42.7	8.29	4.1

\*\*\* P<0.001

The findings of the study revealed that in control group there was no significant difference in the mean and standard deviation of the anxiety levels (M =49.5, 48.4 & SD =8.30, 8.36) before and after play therapy. Whereas in experimental group significant difference in the mean and standard deviation of anxiety level (M=49, 42.76 & SD = 8.40, 8.29) was noted before and after play therapy at p<0.001.Hence the null hypothesis Ho1; There will be no significant difference in the anxiety before and after play therapy in the control group and experimental group of hospitalized children was rejected.

Richard (2010) examined the effect of therapeutic play on the outcome of school-age children undergoing day surgery. The study findings revealed that children in the experimental group experienced statistically significant lower anxiety scores than children in the control group. (5)

There was no significant association between selected demographic variables namely age, gender, education, the area of residence, educational status of the mother and education status of the father in control group and an experimental group of hospitalized children before and after play therapy. Hence the null hypothesis H<sub>0</sub>2; There will be no significant association between the selected demographic variables and level of anxiety before and after administration of play therapy in the control group and experimental group of hospitalized children was accepted.

There was no significant association between selected clinical variables and the level of anxiety in both the control and the experimental group of hospitalized children which emphasizes that clinical variable had no influence over the anxiety of hospitalized children. Hence the null hypothesis H<sub>0</sub>3; There will be no significant association between selected clinical variables and level of anxiety before and after administration of play therapy in control and an experimental group of hospitalized children was accepted.

An experimental study conducted by Nisha & Umrani (2013) to assess the effectiveness of play intervention on anxiety among children admitted in preoperative wards of selected hospitals revealed that play intervention was effective in reducing the anxiety among preoperative children.(6)

### **CONCLUSION**

This study shows that play therapy was effective in reducing anxiety in hospitalized children. Giving play therapy at the bedside did have a good impact on the children in reducing hospital anxiety. Hence pediatric nurses can be encouraged to use this as a method to reduce hospital anxiety. A playroom can be encouraged in each floor of the hospital and it can be practiced as part of routine care.

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