

RINGKASAN

**MODEL *CARING* TERAPI BERMAIN TERHADAP ADAPTASI
HOSPITALISASI ANAK PRA SEKOLAH DENGAN PENYAKIT
MALARIA DI RSUD dr. T. C. HILLERS MAUMERE**

Oleh : Teresia Elfi

Penyakit malaria pada anak menyebabkan anak harus dirawat di rumah sakit. Kondisi dan masalah yang dihadapi anak ketika hospitalisasi adalah adaptasi terhadap lingkungan baru beserta semua orang yang terlibat didalamnya, penerimaan terhadap berbagai prosedur tindakan medis dan tindakan keperawatan serta hubungannya dengan pasien lain. Kondisi tersebut akan menyebabkan cemas dan takut, apabila tidak ditangani dengan segera akan mengakibatkan penolakan pada tindakan dan prosedur medik dan keperawatan. Reaksi anak pra sekolah ketika hospitalisasi ditunjukkan dengan perilaku seperti protes, putusasa dan regresi yang merupakan fenomena umum anak saat hospitalisasi. Sikap regresi ringan seperti menangis, bersandar pada ibu, mengisap jari, sikap regresi berat adalah anak menolak makan.

Fokus intervensi keperawatan anak adalah meminimalkan stresor, memaksimalkan manfaat hospitalisasi, memberikan dukungan psikologis anak dan keluarga, mempersiapkan anak sebelum menerima prosedur perawatan. Bermain merupakan salah satu intervensi keperawatan yang ditawarkan agar anak dapat beradaptasi terhadap hospitalisasi, sehingga perawat diharapkan mampu memberikan terapi bermain dengan mencerminkan perilaku *caring* yang sesuai agar dapat diterima oleh anak karena perawat dalam hal ini membantu orang tua mengatasi permasalahan perawatan anak dan perawat berada 24 jam disamping pasien.

Studi pendahuluan pada bulan Desember 2012 di RSUD dr, T. C. Hillers Maumere bahwa jumlah angka hospitalisasi anak pada tahun 2009 terdapat 2.379 anak, 2.382 anak pada tahun 2010 dan terjadi penurunan pada tahun 2011 yaitu 2.192 anak. Rata-rata pasien rawat inap di ruang Melati adalah 190 anak/bulan dengan penyakit utama adalah malaria sebanyak 622 kasus, rata-rata lama hari rawat ≥ 3 hari disertai komplikasi terbanyak dari penyakit malaria adalah anemia. Keadaan tersebut menyebabkan anak mengalami dampak hospitalisasi yang lebih besar. Hasil wawancara terhadap kepala ruangan dan observasi selama tiga hari di ruang Melati diperoleh data bahwa respon anak ketika menjalani hospitalisasi adalah menangis, tidak mau makan, menolak untuk dilakukan *treatment* dan takut ditinggal sendirian. Hasil observasi perilaku *caring* perawat meliputi perawat memanggil nama pasien dan keluarga pasien dengan nada suara tinggi, kurang menjelaskan prosedur tindakan keperawatan yang dilakukan dan terkesan judes atau kurang memperhatikan pasien. Perilaku tersebut tidak sesuai dengan perilaku *caring* berdasarkan teori/model keperawatan.

Model *caring* terapi bermain merupakan penerapan terapi bermain yang mencerminkan perilaku *caring* perawat untuk membantu anak beradaptasi terhadap hospitalisasi. Perilaku *caring* perawat diadopsi dari 10 faktor *carative caring* Watson yang dimodifikasi dalam pemberian terapi bermain diharapkan

terjadinya pembentukan emosi dan mekanisme koping positif melalui proses adaptasi berdasarkan teori adaptasi Roy. Proses adaptasi melibatkan aktifitas *brain system* sehingga *out put* dari proses adaptasi adalah terjadinya adaptasi hospitalisasi anak yang positif.

Tujuan penelitian ini adalah menganalisis pengaruh *caring* terapi bermain terhadap adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria. Rancangan penelitian yang digunakan adalah *quasy eksperimen* dengan desain *pre and post test without control design*. Populasi yang digunakan adalah perawat pelaksana, anak pra sekolah dengan penyakit malaria dan keluarga anak. Teknik pengambilan sampel dilakukan dengan cara total populasi (perawat) dan *purposive sampling* (anak dan keluarga). Variabel Independen yaitu model *caring* terapi bermain, variabel dependen yaitu adaptasi hospitalisasi anak dan variabel *confounding*: karakteristik perawat, karakteristik anak dan karakteristik keluarga. Sampel dalam penelitian ini masing-masing sebanyak 20 orang. Teknik pengambilan data dengan menggunakan kuesioner dan observasi kemudian data dianalisis dengan menggunakan uji *Chi-Square*, Wilcoxon, Regresi Logistik dengan tingkat signifikansi $< 0,05$.

Hasil penelitian nilai *p value* (0,016) $< 0,05$ menunjukkan terdapat pengaruh model *caring* terapi bermain terhadap adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria setelah sosialisasi, latihan dan implementasi model *caring* terapi bermain. Hal ini karena perawat pelaksana ruangan Melati mempunyai pengetahuan dan ketrampilan yang mendukung pelaksanaan *caring* terapi bermain serta memiliki motivasi yang tinggi untuk menerapkan *caring* terapi bermain pada anak pra sekolah yang terdiagnosis penyakit malaria. *Caring* merupakan bentuk kepedulian profesional untuk memberikan bantuan, dukungan berupa pengetahuan, sikap dan tindakan kepada individu, keluarga, masyarakat yang sedang sakit atau menderita untuk dapat meningkatkan kondisi kehidupannya. Karakteristik perawat: masa kerja perawat berpengaruh secara signifikan terhadap model *caring* terapi bermain (p : 0,035). Umur anak (p : 0,040) dan status sosial ekonomi (penghasilan) keluarga (p : 0,032) berpengaruh secara signifikan terhadap adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria.

Permainan yang terapeutik didasari oleh pandangan bahwa bermain bagi anak merupakan aktifitas yang sehat dan diperlukan untuk kelangsungan tumbuh kembang anak dan memungkinkan dapat menggali dan mengekspresikan perasaan dan pikiran anak, mengalihkan nyeri dan relaksasi sehingga anak mampu beradaptasi secara baik terhadap lingkungan rumah sakit.

Dampak hospitalisasi berupa takut, cemas dan frustrasi merupakan sebuah susistem kognator yang dihasilkan dari pola pikir anak terhadap sebuah stimulus yang bersifat fokal atau kontekstual selama dalam masa hospitalisasi, sehingga anak harus mampu melakukan adaptasi agar mampu melewati rasa takut, cemas dan frustrasi akibat hospitalisasi. Terapi bermain yang diberikan dengan menceminkan *caring* mampu memberikan dampak yang positif bagi adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria.

SUMMARY

EFFECT OF PLAY THERAPY CARING MODEL ON ADAPTATION TO HOSPITALIZATION AMONG PRE-SCHOOL CHILDREN WITH MALARIA AT RSUD dr. T. C. MAUMERE

By: Teresia Elfi

Children suffering from malaria need to be hospitalized. Conditions and problems faced by children during hospitalization is the adaptation to new environment and all people involved, acceptance of a variety of medical treatments and procedures of nursing actions, and relationship with other patients. These conditions will cause anxiety and fear. If it is not dealt with quickly, it will result in rejection to medical and nursing action and procedures. Pre-school children's reaction during hospitalization is indicated by behaviors such as protest, despair and regression, which is a common phenomenon of in children during hospitalization. Examples of mild regression attitude are crying, leaning on the mother, and finger sucking; while severe regression attitude is their refusal to eat.

The focus of child nursing intervention is to minimize stressors, maximizing the benefits of hospitalization, providing psychological support to children and families, and preparing children before receiving treatment procedure. Playing is one of nursing interventions offered, so that children can adapt to hospitalization. Nurses are expected to provide play therapy by reflecting the appropriate caring behavior to be accepted by the child since a nurse in this case helps parents overcoming the problems of child care and the nurse stays beside the patient for the whole time.

Preliminary study conducted in December 2012 in dr. T. C. Hillers General Hospital, Maumere, revealed that children hospitalization rate in 2009 was 2,379 children, 2,382 children in 2010 and there was a decline in 2011 to become 2,192 children. Patients hospitalized at Melati room were 190 children/month with major disease of malaria as many as 622 cases. The average length of stay was ≥ 3 days with anemia as the most frequent complications. Such condition makes the children affected much from hospitalization. Results of interviews with head of wards and observation for three days at Melati room showed that children responses during hospitalization were crying, not eating, refusing treatments and afraid to be left alone. The observation of the nurses caring behavior included calling the patient and family name in high tone, less explaining procedures, nursing actions seemed bitchy or having less attention to the patient. Such behaviors are incompatible with caring behavior based on nursing theory/model.

Caring model of play therapy is the application of play therapy that reflects the behavior of caring nurses to help children adapting to hospitalization. Nurse caring behavior, adopted from 10 factors of Watson's creative caring modified in play therapy. It is expected that positive emotions and coping mechanisms can be created through the process of adaptation by Roy adaptation

theory. The adaptation process involves brain activity system, so the output of the adaptation process is positive child adaptation to hospitalization.

The purpose of this study was to analyze the influence of play therapy caring on hospitalization adaptation among pre-school children diagnosed with malaria. The study was a quasi-experimental study with pre and post test design without control. The population was nurses, pre-school children with malaria and the child's family. Sampling technique was total population (nurses) and purposive sampling (children and families). The independent variable was caring model of play therapy, the dependent variable was child's adaptation to hospitalization, and the confounding variables were nurse characteristics, characteristics of the child and the family. The sample in this study comprised 20 persons. Data were collected using questionnaires and observation. Data were analyzed using Chi-Square test and Wilcoxon logistic regression test with significance level of < 0.05 .

The results showed the p value of 0.004 (< 0.05), indicating the effect of caring model of play therapy on hospitalization adaptation among pre-school children diagnosed with malaria after socialization, exercise and implementation of the model. This was because nurse staff in Melati ward had knowledge and skills that supported the implementation of play therapy caring and they were highly motivated to implement caring play therapy in pre-school children diagnosed with malaria. Caring is a form of professionals cares to provide assistance, support in the form of knowledge, attitudes and actions to individuals, families, and individuals who are sick or suffering in order to improve their life condition. Nurse characteristics of the length of career, significantly affected nurses caring model of play therapy ($p: 0,016$). Age of children ($p: 0,040$) and socioeconomic status (income) of the family ($p: 0,032$) significantly affected the adaptation of hospitalization among pre-school children diagnosed with malaria.

Therapeutic play is based on the view that playing for children is a healthy activity and necessary for the survival and development of the children, allowing to explore and express their feelings and thoughts, distracting pain and providing relaxation so that children are able to adapt well to hospital environment.

The impact of hospitalization in the form of fear, anxiety and frustration is cognator subsystem resulting from the mindset of children to focal or contextual stimulus during the period of hospitalization, so the children must be able to adapt to be able to fight against fear, anxiety and frustration due to hospitalization. Care-reflecting play therapy is given to provide positive impact for the adaptation of malaria-diagnosed pre-school children to hospitalization.

ABSTRAK

MODEL CARING TERAPI BERMAIN TERHADAP ADAPTASI HOSPITALISASI ANAK PRA SEKOLAH DENGAN PENYAKIT MALARIA DI RSUD dr. T. C. HILLERS MAUMERE

Penelitian *Quasy Eksperimen pre and post test without control design* di RSUD dr. T.C. Hillers Maumere

Oleh : Teresia Elfi

Penyakit malaria pada anak dapat menyebabkan terjadi hospitalisasi anak sehingga reaksi hospitalisasi memberikan dampak yang besar terhadap proses asuhan keperawatan. Fokus intervensi keperawatan anak adalah meminimalkan stresor, memaksimalkan manfaat hospitalisasi, memberikan dukungan psikologis anak dan keluarga, mempersiapkan anak sebelum menerima prosedur perawatan agar anak dapat beradaptasi terhadap hospitalisasi. Model *caring* terapi bermain merupakan penerapan terapi bermain yang mencerminkan perilaku *caring* perawat untuk membantu anak beradaptasi terhadap hospitalisasi.

Rancangan penelitian yang digunakan adalah *quasy eksperimen* dengan desain *pre and post test without control design*. Populasi yang digunakan adalah perawat pelaksana, anak pra sekolah dengan penyakit malaria dan keluarga anak. Teknik pengambilan sampel dilakukan dengan cara total populasi (perawat) dan *purposive sampling* (anak dan keluarga). Variabel Independen yaitu model *caring* terapi bermain, variabel dependen yaitu adaptasi hospitalisasi anak dan variabel *confounding*: karakteristik perawat, anak dan keluarga. Sampel dalam penelitian ini sebanyak 20 orang. Teknik pengambilan data dengan menggunakan kuesioner dan observasi kemudian data dianalisis dengan menggunakan uji *Chi-Square*, *Wilcoxon*, Regresi logistik dengan tingkat signifikansi $< 0,05$.

Hasil penelitian nilai *p value* (0,016) $< 0,05$ menunjukkan terdapat pengaruh model *caring* terapi bermain terhadap adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria sesudah sosialisasi, latihan dan penerapan model *caring* terapi bermain. Karakteristik perawat: masa kerja perawat berpengaruh secara signifikan terhadap model *caring* terapi bermain (*p*: 0,035). Umur anak (*p*: 0,040) dan status sosial ekonomi (penghasilan) keluarga (*p*: 0,032) berpengaruh secara signifikan terhadap adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria.

Implementasi model *caring* terapi bermain dapat meningkatkan adaptasi hospitalisasi anak pra sekolah yang terdiagnosis penyakit malaria. Penelitian selanjutnya dapat melakukan penelitian yang sama dengan jenis penelitian eksperimen murni.

Kata Kunci : *Caring*, bermain, hospitalisasi, anak pra sekolah, malaria.

ABSTRACT**EFFECT OF PLAY THERAPY CARING MODEL ON ADAPTATION TO HOSPITALIZATION AMONG PRE-SCHOOL CHILDREN WITH MALARIA AT RSUD dr. T. C. HILLERS MAUMERE**

A Quasi-Experimental Study with Pre and Post Test Control Design Without Control

By: Teresia Elfi

Children suffering from malaria need to be hospitalized. Reaction to hospitalization have a large impact on the process of nursing care. The focus of children nursing intervention is to minimize stressors, maximizing the benefits of hospitalization, providing psychological support for children and families, preparing children before receiving treatment procedures so that children can adapt to hospitalization. Caring model of play therapy is the application of play therapy that reflects the behavior of nurses caring to help children adapting to hospitalization.

This study was a quasi-experimental study with pre and post test without control. The population was nurses, pre-school children with malaria and their family. Sampling technique was done by total population (nurses) and purposive sampling (children and families). The independent variables was caring model of play therapy. The dependent variable was the children's adaptation to hospitalization and the confounding variables were the characteristics of nurses, children and families. The sample in this study consisted of 20 persons. Data were collected using questionnaires and observation. Data were analyzed using Chi-Square test and Wilcoxon, logistic regression test with significance level of $< 0,05$.

The results showed p value of 0.016 ($< 0,05$), indicating that caring model of play therapy affected the adaptation to hospitalization among pre-school children diagnosed with malaria after socialization, training and application of the model. Nurse characteristics in the form of their length of career significantly affected nurses caring model of play therapy (p: 0,035). Age of the children (p: 0,040) and socioeconomic status (income) of the families (p: 0,032) significantly affected the adaptation of hospitalization in pre-school children diagnosed with malaria.

The implementation of caring models of play therapy can improve the adaptability of hospitalization in pre-school children diagnosed with malaria. Further studies with similar topics should apply pure experimental research.

Keywords: caring, play, hospitalization, pre-school children, malaria