Effectiveness of Planned Teaching Programme in Knowledge on Play Therapy among Mothers of Hospitalized Children

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Abstract

Background: The play is an integral part of the hospitalized children. It is a pleasurable and enjoyable aspect of child’s life, and it is also an essential for their growth and development. Play is any activity that has no serious motive and no material gain. Play helps in various developmental activities such as physical, intellectual, emotional, moral and social development.

Aim: The aim of the study is evaluate the effectiveness of planned teaching programme in knowledge on play therapy among mothers of hospitalized children.

Objectives: To assess the level of knowledge on play therapy among mothers of hospitalized children, and to evaluate the effectiveness of Planned Teaching Programme at the level of Knowledge on play therapy among mothers of hospitalized children, and to find out the association between the level of knowledge with the selected demographic variables.

Methodology: The research approach used in the study was quantitative approach by using pre-experimental one group pretest and posttest research design. The study was conducted at selected hospitals in Najran region in Saudi Arabia with 100 sample size. The samples were selected by using purposive sampling technique. The tool used for the data collection was demographic variables, self administered questionnaire, and Planned Teaching Programme. Data was analyzed by using descriptive and inferential statistics through SPSS statistical package.

Results: In Pre-test out of 100 samples (13%) had adequate Knowledge (22%) had Moderate Knowledge, while (65%) had inadequate knowledge. In Post-test, out of 100 samples (78%) had adequate Knowledge, (14%) had Moderate Knowledge, and (8%) had adequate knowledge. The pretest mean value was 7.2 with 1.66 standard deviations respectively the posttest mean value was 17.6 with 1.94 standard deviations. Paired-t-test reveals that there was a highly significant improvement in the knowledge level among mothers of hospitalized children, hence the Planned Teaching Programme was more effective at the level of p<0.05. Chi-square test reveals that there was no significant association with the level of Knowledge and demographic variables at the level of p<0.05

Keywords: Mothers, knowledge, play therapy, planned teaching programme, hospitalized children

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INTRODUCTION

"Today’s children are tomorrow’s citizens and leaders. The resources spent on the health of the children are an investment for their future. "Play is a universal for all the children and it is the basic work for the children. Play is a pleasurable and enjoyable aspect of child’s life and it also plays a vital role in promoting the growth and development of the children.

Childhood period is the period that significant physical, psychological and social developmental changes take place in a child’s life. It is a period of multiple changes and transition process of child’s life. Play is the activity that has no serious motive and from which there is no material gain. The values of play therapy help in physical, physiological, social and moral development. The Physical and muscular development was enhanced by play therapy. It also helps to strengthen the muscle and to develop the team building activity.

The play is natural and spontaneous among the pediatric age group and also dependents on individual interest, age, sex, various cultural and socio-economic status of the child. Playtime and playmates increase as the age increases, and it is a social behavior which differs from various age groups and also depends upon the level of development. Children play up to the age of six, and then they will go off to school and entered the learning process. Play therapy helps children to relax which in turn makes the parents to feel relax. According to Alfred adler (2014) "play is a child’s work and it is not a trivet pursuit” and It is a universal language of children.

Hospitalization is the stressful environment for the children at all the age groups. During the illness period children have a great need for their parents and can tolerate their absence only for short periods. Hospitalization is an unpleasant and traumatic experience. The children undergo various changes from their normal routine care to illness care and also separated from friends and peer groups. Hospital environment should be replaced with the home environment through the proper play environment and to meet the traumatic effects of hospitalization less. Children express their thoughts, emotions, feelings through play therapy. Saucier (2009) states that Play therapy promotes healing process and helps to adopt with the stressful situations, and to relief from fear and anxiety, and also helps to adopt the resolution from the negative environment of hospitalizations. Thus the children can find acceptable outlets for hostilities through play activities. In hospital settings a, supervised play therapy program provides warm, friendly atmosphere that will reduce fear and anxiety of the hospitalized children.

Mothers should understand the values of play therapy and selection of play materials according to the age group which will promote the therapeutic healing process and also help the child to cope with the different types of treatment modalities. Every opportunity should be afforded the hospitalized child to use play as mind relaxing activities to lessen the stress. It is important to the mothers to have adequate knowledge about play therapy and its importance during hospitalization. Hence, the investigator felt the need to conduct the study to assess the effectiveness of planned teaching programme in knowledge on play therapy among mothers of hospitalized children at selected Hospitals in Najran with the objectives of assessing the level of knowledge on play therapy among mothers of hospitalized children, and to evaluate the effectiveness of planned Teaching programme at the level of Knowledge on play therapy among mothers of hospitalized children, and to associate the selected demographic variables with the post-test level of knowledge on play therapy among mothers of hospitalized children.

METHODS AND MATERIALS

The research approach used for the study was quantitative approach by using pre-experimental one group pretest and posttest research design. The study was conducted at selected hospitals in Najran region at Saudi Arabia with 100 sample size. The Purposive sampling technique was used to select the sample for the study. The tool used for the data collection was demographic variables, self-administered questionnaire, and planned
Teaching program which was printed in both languages Arabic and English. The questionnaire consists of 20 multiple questions which include 4 components of play therapy and its importance, values of play therapy, types of play therapy, selection of play therapy according to the age group, and importance of play therapy during hospitalization. The score was interpreted as follows: 01-07 Inadequate knowledge, 08-14 moderate knowledge, and 15-20 adequate knowledge. The study was explained to the participants and got the informed consent and oral consent from the participants. The inclusion and exclusion criteria as follows. Mothers of hospitalized children that know Arabic and English, willing to participate, and mothers of children who were hospitalized more than 7 days were included. Mothers who were not willing to participate, uncooperative, belongs to medical professionals were excluded. Data were collected by interview method of one to one basis. Collected the socio-demographic variables and Knowledge was assessed by the self-administered multiple choice questionnaire which was printed in both languages Arabic and English. On the same day, Planned teaching program was given. Planned teaching programme include (Meaning of play therapy, importance, different types, values of play therapy, and different methods of play therapy, importance of play therapy during hospitalization selection of play therapy according to their age group and mothers role in play therapy) Doubts were cleared by the investigator and the post-test was conducted by using the same questionnaire after 7 days. The data was analyzed by using descriptive and inferential statistics through SPSS statistical package.

**RESULTS**

In Pre-test out of 100 samples (13%) had adequate Knowledge (22%) had Moderate Knowledge, while (65%) had inadequate knowledge In Post-test, out of 100 samples (78%) had adequate Knowledge, (14%) had Moderate Knowledge, and (8%) had adequate knowledge. The pretest mean value was 7.2 with 1.66 standard deviations respectively the posttest mean value was 17.6 with 1.94 standard deviations. Paired-t-test reveals that there was a highly significant improvement in the knowledge level among mothers of hospitalized children, hence the Planned Teaching Programme was more effective at the level of p<0.05. Chi-square test reveals that there was no significant association with the level of Knowledge and demographic variables at the level of p<0.05

**Table I. Frequency and percentage distribution of pre test level of knowledge on Play therapy among mothers of hospitalized children**

| S.No | Level of knowledge          | Frequency Distribution (n=100) | Percentage Distribution (%) |
|------|-----------------------------|-------------------------------|-----------------------------|
| 1    | Adequate knowledge          | 13                            | 13%                         |
| 2    | Moderate adequate knowledge | 22                            | 22%                         |
| 3    | Inadequate knowledge        | 65                            | 65%                         |

**Table II. Frequency and percentage distribution of post test level of knowledge on Play therapy among mothers of hospitalized children**

| S.No | Level of knowledge          | Frequency Distribution (n=100) | Percentage Distribution (%) |
|------|-----------------------------|-------------------------------|-----------------------------|
| 1    | Adequate knowledge          | 78                            | 78%                         |
| 2    | Moderate adequate knowledge | 14                            | 14%                         |
| 3    | Inadequate knowledge        | 8                             | 8%                          |
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Table III. Effectiveness of Planned Teaching Program on post test level of Knowledge on Play therapy among mothers of hospitalized children

| S.No | Improvement of Knowledge | Mean | Standard deviation | Paired 't' test p-value |
|------|--------------------------|------|--------------------|------------------------|
| 1    | Pre Test                 | 7.2  | 1.66               | 1.181                  |
| 2    | Post Test                | 17.97| 1.94               | P<0.05                 |

Table IV. Association between the Mothers knowledge with demographic variables

| S.No | Demographic variables | Frequency (n) | Percentage Distribution | Chi-square and P value |
|------|-----------------------|----------------|-------------------------|------------------------|
| 1.   | Age of the Mother     |                |                         |                        |
|      | 20-25 years           | 35             | 35%                     | x2. 21.72              |
|      | 26-30 years           | 30             | 30%                     | P<0.113                |
|      | 31-35                 | 18             | 18%                     |                        |
|      | Above 35              | 17             | 17%                     |                        |
| 2.   | Educational status of the mother |          |                         |                        |
|      | Primary level         | 17             | 17%                     | x2. 0.293              |
|      | Preparatory           | 15             | 15%                     | P<0.764                |
|      | Secondary             | 25             | 25%                     |                        |
|      | Intermediate          | 25             | 25%                     |                        |
|      | Graduate              | 18             | 18%                     |                        |
| 3.   | No of Children        |                |                         |                        |
|      | 1                      | 10             | 10%                     | x2. 1.213              |
|      | 2                      | 35             | 35%                     | P<0.364                |
|      | 3                      | 30             | 30%                     |                        |
|      | 4                      | 25             | 25%                     |                        |
| 4.   | Occupation of the Mother |            |                         |                        |
|      | House wife            | 45             | 45%                     | x2. 3.253              |
|      | Teacher               | 30             | 30%                     | P<0.314                |
|      | Health Care worker    | 10             | 10%                     |                        |
|      | Student               | 15             | 15%                     |                        |
| 5.   | Hospitalization of the child |      |                         |                        |
|      | 1-7 days              | 45             | 45%                     | x2. 10.13              |
|      | 8-15 days             | 30             | 30%                     | P<0.014                |
|      | 16-30 days            | 15             | 15%                     |                        |
|      | More than 30 days     | 10             | 10%                     |                        |

Fig 1. Comparison between Pre and post test level of Knowledge on Play therapy among mothers of hospitalized children
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Discussion

The play is the sign language of children. It’s their natural activity, through play children express themselves, explore their world. Play therapy is an important therapeutic intervention for children. Play therapy offers children a safe, natural and non-intrusive method of recovering from distress. It is one of the most effective interventions to gain their cooperation and winning their confidence.

The present study reported that Pre-test out of 100 samples (13%) had adequate knowledge (22%) had moderate knowledge, (65%) had inadequate knowledge this study was supported by Jacobe Alphonse (2011) who conducted a study on assessing the level of knowledge regarding play and importance of play in the growth, among mothers of hospitalized children. She concluded that the maximum numbers of mothers 70% were having inadequate knowledge regarding the play therapy and also emphasized that mother’s information, education, and communication should be strengthened.

The second objective of the study was to evaluate the effectiveness of planned teaching programme in the level of knowledge on play therapy among mothers of hospitalized children. The present study results reveal that the pretest mean value was 7.2 with 1.66 standard deviation and posttest mean value was 17.6 with 1.94 standard deviations. The average improvement of knowledge on the pretest was 10.4 with standard deviation 1.34. Similarly, the improvement of knowledge post-test was 17.6 with a standard deviation of 1.94. The improvement of the knowledge was statistically tested by paired t ‘test and results found to be significant at p<0.001 level. It indicates that the planned teaching program was very effective in improving knowledge level in post-test among the mothers of hospitalized children. This study was supported by Lila and Zamani (2017) conducted a study on effects of play therapy among ADHD children by using randomized sampling technique and they concluded that play therapy was the effective method for treating the children with ADHD. Kinjal Patel et al (2014) conducted a study to assess the effectiveness of play therapy on anxiety among hospitalized children by using convenient sampling technique. The results revealed that in experimental pre-test anxiety level mean score, 72.70 and SD 23.790 respectively post-test anxiety level mean score, 37.87 and SD 14.708. Thus the play therapy was more effective in reducing the anxiety level among hospitalized children.

The third objective of the study was to associate the post level of knowledge with selected demographic variables among mothers of hospitalized children. The Chi-square test revealed that there was no significant association with the selected demographic variables such as the mothers as age, education, birth order, the occupation of the mother, and hospitalization of the child at the level of p<0.05.

Conclusion

Based on the data, this study has confirmed that planned teaching programme was more effective in improving the mother’s knowledge on play therapy. Nurses should educate the mothers during their stay at hospital environment regarding the needs, values, and effects of play therapy to bring effective change in their therapeutic environment. Mothers are the primary caregivers who play a vital role in their developmental period of children. Nurses are an important member of the healthcare team and being more close to patients, should take initiative to improve the mother’s knowledge.

Recommendations

1. The same study can be done in large samples
2. The same study can be done by using True Experimental research design
3. Comparative study can be done among working and non-working mothers.
4. Comparative study can be done maternal knowledge and paternal knowledge
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