

THE INFLUENCE OF MUROTAL THERAPY ON ANXIETY AND STRESS HOSPITALIZATION IN PRESCHOOL CHILDREN

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ABSTRACT

This study aims to overcome the anxiety and stress of hospitalization in preschool children; hospitalized children apply several interventions, such as creating a child-friendly environment, but no other interventions. This study uses a quantitative approach and uses statistical formulas to help analyze the data and facts obtained. The results of this study were in the form of the proportion of anxiety levels in preschool children before being given intervention in the intervention group; namely, the majority of respondents experienced moderate anxiety, as much as 34.3%, while in the control group, the majority of respondents experienced anxiety. They were experiencing mild anxiety, as much as 45.7%. The percentage of stress levels in preschool children before intervention in the intervention group was that most respondents experienced severe stress, as much as 100%. In the control group, most respondents experienced extreme pressure, as much as 54.3%. The percentage of anxiety levels in preschool children after intervention in the intervention group, namely, most respondents were not as worried as much as 48.6% after the intervention. In the control group, most respondents experienced moderate anxiety, as much as 40%. The percentage of stress levels in preschool children after intervention in the intervention group, namely, most respondents experienced mild stress, as much as 57.1%. In the control group, most respondents experienced severe stress, as much as 54.3%. In conclusion, there is an effect of murotal therapy on anxiety levels in preschoolers, but there is no effect of murotal treatment on stress levels in preschoolers.

Keywords: Anxiety, Murotal Therapy, Preschool Children, Stress Hospitalization

INTRODUCTION

Hospitalization became the first crisis that children must face according to (Akhriansyah, 2018; White et al., 2018). In the United States, it is estimated that the Hospitalization of children more than 4-5 million in a year due to surgery, injury, and various other causes. In Indonesia, the number of child hospitalization is 45% (Ministry of Health of the Republic of Indonesia, 2019), and of the total number of Indonesia's population and has increased by 13% compared to 2018 with many diseases suffered is diarrhea and Gastroenteritis of 36,238 people and ARI amounting to 11,034 people (Susenas, 2019). In Karawang with the most diseases are ARI 71,030 people, Common Cold of 44,051 people and gastroenteritis of 10,916 people.

During the hospitalization, children experienced various events with traumatic experience Andayani, 2019). This might happen because children do not understand why being treated, and children must adapt in hospitals (Collins et al., 2018; Saputro & Fazrin, 2017). During the

adaptation process in the hospital, children can experience things that are not pleasant for themselves, can be demonstrated by the reaction of children inactive, non-communicative, damaging toys or food, backwards to previous behavior (for example urinating in pants, sucking fingers) and behavior Regression is like dependence with parents, withdrawing. The situation is a stressor factor for children and parents and families who can cause anxiety (Collins et al., 2018). In addition, loss of affection, body image makes preschool children lose control, displacement, aggression (deny), withdraw, protest behavior, and at risk of experiencing anxiety and stress, especially when health workers will take care of children (Ekasaputri & Arniyanti, 2022).

Anxiety and stress hospitalization can occur at all age levels (Afifa, 2020). Anxiety is a state experienced in response to threats that are either distal or uncertain, and involves changes in an individual's subjective state, behavior and physiology (Kenwood et al., 2022) While stress is a psychological disorder, by displaying aggressive behavior reactions, lack of control in emotions, anger is not adaptive and regressive (White et al., 2018; Collins et al., 2018) like biting, kicking, kicking, even run out of the room. Hospitalization is the process of being treated or staying in a hospital which can be a new and often frightening experience for a child. Hospitalization can cause stress for children related to environmental changes and the health status they experience; the main things that can cause stress from the hospitalization process are separation from parents, loss of control, and anxiety about bodily injury and pain (Prayogi, 2022). Anxiety and stress can be overcome by the adaptation of adaptive coping so that it is able to adapt to the factors that cause anxiety and stress. Coping is an organism's response to adjust to unfavorable circumstances. Problem coping strategies can emerge in response to an event or in anticipation of future demands, whether to respond positively or maladaptive (Jannah, 2020).

Nurses provide health services through rehabilitative efforts and carry out nursing care both individually, families, groups and communities. In this case nursing theory is needed to be able to describe the process of adaptation of preschool children to anxiety and stress hospitalization, one of the nursing theories that can describe the problem above is the theory of Callista Roy's adaptation. The theory model of adaptation of the Sister Calista Roy (Roy theory). Roy said that nursing problems involved an ineffective coping mechanism, which damaged the individual integrity, and caused ineffective response (Pardede, 2018). This theory has a problem that emphasizes the importance of helping patients in manipulating their environment and how individuals are able to improve health by maintaining adaptive behavior and changing maladaptive behavior. The theory emphasizes the ability of school-age children to adapt in overcoming anxiety and stress hospitalization (Bachtiar et al., 2023).

Murotal is one of the non-pharmacological therapies and religious therapy that can be used to reduce anxiety and stress that contributes to the release of endorphins by stimulating the brain waves of Alpha. Al-Qur'an proven to be able to bring peace of up to 97% for those who listen to it (Akhriansyah, 2018). The results of research Rumakamar et al.,(2022) Shows that giving murottal Al-Quran therapy can reduce the level of hospitalization anxiety in children with a significance value of $0.000 < p < 0.05$.

The addition of funny animated characters in the video clip of children's songs can attract and entertain children. According to revealed that murotal therapy is far more effective for reducing anxiety and stress and also the hormone cortisol, compared to music therapy (Hadju et al., 2020; Jafaripour et al., 2019). In addition, murotal therapy is able to provide peace

through increasing the hormone endorphin, which can overcome panic, trembling, difficulty breathing, palpitations, and sweaty palms that occur during anxiety and stress (Yunitasari et al., 2020).

RSUD Karawang is a non -education type B hospital as a reference to Regional Hospital in West Java Province which has a child's inpatient room with a total of 34 beds. Based on the preliminary study conducted by the researcher, in January-March 2022, the observations were found 19 out of 21 preschool children crying when nurses took nursing care. The child looks afraid when the nurse enters the room, the child is also uncooperative, refuses to be treated by crying and screaming during invasive actions, where 10 of them do not want to be injected, 9 refused when measuring vital signs and refusing the installation of infusion while screaming even though every action was accompanied by parents and family. The results of the researcher's interview with 12 parents said their children always cried, fussy, easily surprised, difficulty sleeping, and always wanted to be accompanied. Parents also say their children refuse to eat and continue to go home. Meanwhile there are 7 mothers say their children have often been hospitalized and but are still not accustomed to the hospital environment.

To overcome anxiety and stress hospitalization in preschool children, children's inpatients apply several interventions such as creating a child -friendly environment but there is no other intervention. Therefore, researchers are interested in conducting research with the title "The Effect of Murotal Therapy on Anxiety and Stress Hospitalization in preschool children at RSUD Karawang".

RESEARCH METHODS

In this study, researchers use quantitative research and statistical formulas to help analyze data and facts obtained. In general, analysis using a quantitative approach is large sample research because a quantitative process is conducted in inferential research, namely in the context of testing hypotheses and relying on a probability of rejection of nil hypotheses. Thus through this approach, a significant relationship between the variables studied.

The use of the design used in this study is a type of quasi experimental design research or it can also be said as a pseudo experiment used to test the independent variables with bound variables. This type of design has several stages that will be used by researchers, namely by the division of subjects into two groups and then providing stimulation to the experimental group while the control group is not given stimulation.

RESULT

Differences in the Level of Anxiety Before and After being Given Murotal Therapy in Preschool Children

Table. 1
The Level of Anxiety Before and After Being Given Murotal Therapy in Preschool Children

Variable	N	Min - Maks	Mean	SD	P.value
Intervention group					
The average pre-test score of anxiety level	35	1-5	3,63	1,060	0,0001
Average post-test score of anxiety level		1-4	2,23	0,808	

Control group					
The average pre-test score of anxiety level	35	2-5	3,46	0,780	0,230
The average post-test score of anxiety level		2-5	3,31	0,867	

Based on Table 1 above, it can be seen that the intervention group has an average pre-test anxiety level of 3.63 and an average post test of 2.23, so there is a decrease before and after an intervention by 1.4%. In the control group it is known that it has an average pre-test anxiety level of 3.46 and the average post test is 3.31, so there is a decrease in anxiety levels of 0.15.

Differences in Stress Levels Before and After being Given Murotal Therapy in Preschool Children at RSUD Karawang in 2022

Table. 2
Stress levels before and after murotal therapy in preschool

Variable	N	Min - Maks	Mean	SD	P.value
Intervention group					
The average pre-test score of anxiety level	35	3-3	3	0,001	1
Average post-test score of anxiety level		2-3	2,43	0,502	
Control group					
The average pre-test score of anxiety level	35	2-3	2,54	0,505	1
The average post-test score of anxiety level		2-3	2,54	0,505	

Based on table 2 above, it can be seen that the intervention group has an average stress level of pre test of 3 and an average post test of 2.43, so there is a decrease before and after an intervention by 0.57%. In the control group it is known that it has an average pre-test stress level of 2.54 and the average post test is 2.54, so there is no decrease in stress levels.

The Influence of Murotal Therapy on Anxiety and Stress Hospitalization in Preschool Children

Table 3.
Distribution of Differences in the Results of the Level of Anxiety of Hospitalization Before and After Being Given Murotal Therapy in Preschool Children

Variable	N	Min - Maks	Mean	SD	P.value
Intervention group					
Difference in Pre -Posttest Score	35	-3 - 0	-1,40	0,881	1
Control group					
Difference in Pre -Posttest Score	35	-2 - 1	-0,14	0,692	1

Based on the table difference in the post -test results minus the pre -test value in the intervention group is -1.40, while the control group is -0.14. There is a difference in value -1.26 anxiety level between intervention groups and control groups.

Table. 4
Distribution Of Differences in the Results of Hospitalization Stress
Levels Before And After being Given Murotal Therapy In Preschool Children

Variable	N	Min - Maks	Mean	SD	P.Value
Intervention Group					
Difference In Pre -Posttest Score	35	-12 – 0	-5,86	3,273	1
Control Group					
Difference In Pre -Posttest Score	35	-2 - 4	0,83	1,224	1

Based on the table difference in the post-test results minus the pre-test value in the intervention group is -5.86, while the control group is 0.83. There is a difference in value -6.69 stress levels between the intervention group and the control group.

DISCUSSION

Differences in the Level of Anxiety of Hospitalization Before and After Intervention are Given

Measurement of anxiety levels obtained the average results of anxiety before murotal therapy is 3.63 in the intervention group and 3.46 in the control group with pvalue = 0,0001. While the average anxiety after being given murotal therapy is 2.23 in the intervention group and 3.31 in the control group with pvalue = 0.230. This shows that there are significant differences in anxiety before and after listening to murotal therapy, but in the control group there are no significant differences in anxiety pretest and posttest, so it can be concluded that murotal therapy is effective in reducing hospitalization anxiety in respondents.

This study shows that preschool children undergoing hospitalization experience anxiety, both low, medium and severe. In line with Primaratri et al.,(2018) there are Rensponden who experience severe anxiety both before murotal therapy or after murotal therapy. However, when viewed from the number of scores decreased from 17 to 15. There were 14 respondents (46.7%) experiencing mild anxiety, 15 respondents (50%) had moderate anxiety, and 1 respondent (3.3%) had severe anxiety, The average respondent has an anxiety score before murotal therapy is 7.83. This is supported by the statement of Hart and Primaratri et al., (2018) that children's anxiety during hospitalization occurs due to stressors in the form of separation with family, loss of control, and fear of injury to limbs.

Sick of children become more dependent on their parents, and are more vulnerable to anxiety. Their emotional state tends to deteriorate because of the possibility of far from home and from their families, as well as changing their usual routine. Anxiety in children who experience hospitalization will have an impact, namely non -cooperative children, will reject treatment and treatment. Conditions like this have a major effect on the length of time or treatment and treatment and healing of the sick child. The negative effects caused by anxiety can reduce the immune system that affects the healing process of a person when sick or undergoing treatment, so it is very important to be immediately handled and minimized the anxiety (Vianti, 2020).

In general, children are more vulnerable to the effects of disease and hospitalization because this condition is a change in health status and general routine in children. Hospitalization creates a series of traumatic events and full of anxiety in the climate of uncertainty for children and their families, both an elective procedure that has been planned previously or an emergency situation that occurs due to trauma. In addition to physiological effects of health problems there are also psychological effects of disease and hospitalization on children. According to (Godino-Iáñez et al., 2020) the hospitalization process affects children in different ways, depending on age, reasons for their inpatient, and temperament. Temperament is how children react to new situations or unfamiliar. Anxiety due to separation from family and friends affects the disruption of activities with friends, the routine that is carried out with family, peer relationships, and school achievements. Children who are in a new environment during the hospitalization process also feel afraid of foreigners who care for him and the hospital environment that feels foreign.

In addition, the child's dislike in the hospital environment is also caused by a crowded or noisy hospital room, a hot environment, inadequate game facilities, and hospital food that may feel bland and unpleasant. Another thing that causes children to experience anxiety during the hospitalization process is that the child must receive treatment and investigation. When receiving child care is usually afraid of the processes that must be lived, such as the process of surgery, injection, mutilation, and consuming drugs regularly (Azzahroh et al., 2020).

Differences in the Level of Stress Hospitalization Before and After being Given Intervention

Measurement of stress levels obtained the average stress results before mural therapy is given 3 in the intervention group and 2.54 in the control group with pvalue Pvalue = 1. This shows that there is a decrease in hospitalization stress before and after listening to mural therapy, but in the control group there is no difference in decreased stress hospitalization of pretest and posttest, so it can be concluded that there is an effect of mural therapy in reducing hosting stress in preschool children.

This happens because preschool children are a stage of children to study the level of firmness and purpose to influence the environment, children with confidence, pessimistic, fear of wrong, strong behavior, egocentric. They have a limited understanding of language and can only see one aspect of an object or situation at a time. Magical ways of thinking that causes preschool children to view disease as a punishment, in addition, preschool children experience psychosexual conflicts and are afraid of mutilation, so that every time they want to do the actions of children often refuse because they feel they want to be hurt.

During the hospitalization, the child trying to adapt to a foreign and new environment, so that it can become a stressor in children. Children who undergo hospitalization will experience anxiety and fear during hospitalization (Saputro & Fazrin, 2017).

Differences in Hospitalization Anxiety and Stress in Preschool-aged Children

The statistical test results of the hospitalization anxiety variable in the intervention group obtained the value of pvalue = 0,0001 and the value pvalue = 0.230 in the control group. Where it is stated that the anxiety of hospitalization there are changes after being given mural therapy interventions.

Statistical Test Results Variable Stress Hospitalization In the intervention group, the value of p value = 1 and the value p value = 1 in the control group. Where it is stated that hospitalization stress has changes after the intervention of murotal therapy is not significant. From the results of this study shows the intervention of murotal therapy with preschool children is more effective in reducing the anxiety of hospitalization in preschool children compared to hospitalization stress in preschool children.

During the hospitalization, the child trying to adapt to a foreign and new environment, so that it can become a stressor in children. Children who undergo hospitalization will experience anxiety and fear during hospitalization (Saputro & Fazrin, 2017). Anxiety is a feeling of not relaxing caused by discomfort or fear accompanied by the emergence of a response that is not known by individuals as anticipation of danger and is a signal that helps individuals to prepare to take action to face threats, both in the form of demands and disasters that occur in Life that can have an impact on physical and psychological health (Sholiha & Jannah, 2021).

The Influence of Murotal Therapy on Anxiety and Stress Hospitalization in Preschool Children

The statistical results of the t test difference in the post test and pre -test value of anxiety in the intervention group and the control group obtained the p value value of 0,0001 or less than 0.05 with an average value (mean) of 1,400, the standard deviation of 0.881 which means there is a difference between hospitalization anxiety Children of preschool before and after being given murotal therapy, so H_0 is rejected, H_A is accepted.

This study's results align with research conducted by where the results showed that there was an effect of murottal therapy on children's anxiety at Tk.II Pelamonia Hospital, Makassar. The level of anxiety in children after being given murottal treatment showed that 23 respondents (76.7%) experienced mild anxiety, and seven children (23.3%) experienced moderate anxiety (Rumakamar et al., 2022).

The level of anxiety after being given murotal therapy shows that there are no respondents in the intervention group that is experiencing severe anxiety. It can be concluded that there is an influence of murotal therapy on the anxiety of hospitalization in preschool children in RSUD Karawang. In accordance with the opinion of Azzahid et al., (2022) Murotal therapy stimulants as audio therapy can bring up delta waves in the frontal and central regions to the right and left of the brain. Frontal area as a center of general intellectual and emotional controller, while the central area as a center for controlling movement is carried out. Children can control emotions better with the influence of delta waves in frontal which can provide calm, and comfort, so that anxiety is reduced

CONCLUSION

Based on the results of research and discussion that has been carried out on the effect of murotal therapy on anxiety and stress hospitalization in preschool children, it can be concluded as follows, the influence of murotal therapy on the level of anxiety in preschool children but there is no influence of murotal therapy on stress levels in preschool children.

SUGGESTION

The results of this study are expected to add to the learning literature and are expected to become a reference in learning about reducing anxiety levels with Al-Qur'an murotal therapy.

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