



Nurse Therapeutic Communication Relationship with Parental Anxiety Levels which Preschoolers Undergo Hospitalization in the Lima Ranap Room Mitra Plumbon Hospital

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Abstract. Problems that generally affect the level of anxiety of parents whose preschoolers undergo hospitalization are divided into two objects, internal factors including: (1) Age factors owned by parents; (2) Sex differences of parents; and (3) Traumatic fears felt by parents. While from the external include: (1) The level of education of parents is quite low; and (2) Parents' knowledge of children's health is still low. One indicator in lowering the anxiety level of the patient's parents is therapeutic communication skills. In general, the purpose of this study was to determine the relationship between nurses' therapeutic communication with the level of parental anxiety due to hospitalization in preschool-aged children at Ranap Lima Mitra Plumbon Hospital. This study uses quantitative research with a *cross-sectional* approach and uses correlation or correlational research methods. The population in this study was all parents of patients whose preschool-aged children underwent hospitalization in Ranap Room Five of Mitra Plumbon Hospital. The sampling technique uses *accidental sampling method* based on chance. In terms of this sampling, researchers conducted a study for one month, where the sample obtained was 28 respondents.

Keywords: Preschooler, Therapeutic Communication, Parental Anxiety Level

INTRODUCTION

Preschoolers are those aged between three to five years, who have various potentials (Indrawan, 2020). At this time begins to grow a high curiosity about something, both seen and heard. Preschool children are an investment and hope for the future of the nation and as successors of future generations, as a determinant of the nation's history as well as a mirror of the nation's attitude to life in the future, so that children need to get the widest possible opportunity to grow and develop naturally both spiritually and physically.

Hospitalization in preschool children is a state of crisis that occurs in children, anxiety that occurs in parents when children are sick and hospitalized. Child care in hospitals is a major crisis that appears in children and parents, because children who are hospitalized experience changes in health status and also the environment such as treatment rooms, health workers who wear room uniforms, and medical devices. In addition, hospitalization in preschool children causes stress

and anxiety in parents, especially mothers, this stress will have an impact on the treatment and healing process of children, mental stress and anxiety can also have an impact on children in two ways, namely the transfer of stress to children and the inability to care for children.

The results of research studies conducted at Ranap Lima RS. Mitra Plumbon in 2020 from August to September that preschool-age children who underwent hospitalization received more than Todler-aged children where there were 72 children aged 3 years, 4 years old as many as 65 children, and 5 years old as many as 42 children (Hospital Medical Records. Plumbon Partners, 2020). One of the impacts on preschool-age children and parents is anxiety, this is due to parents' fear and concern about their children's condition.

Anxiety is a response to an imaginary threat or a real threat occurs when a person thinks something that does not make him happy even though it is not certain to happen, preschoolers who undergo hospitalization cause anxiety for their parents. The negative side of anxiety or the harmful side is excessive worry about real or potential problems, this is characterized by high levels of anxiety, which is seen in unusual behaviors, such as worry, panic, obsessive thoughts and actions, fear of objects or events that do not match the reality of the situation, the impact of hospitalization and anxiety experienced by parents whose children undergo hospitalization will be at risk of having an impact on healing process. Another impact experienced by parents is that parents will refuse treatment and treatment.

The level of anxiety itself includes: (1) the first level of anxiety or mild anxiety is the type that most of us experience daily during certain situations, in this type of anxiety helps us to focus and increase alertness; (2) The second level of anxiety or moderate anxiety is a type of anxiety that makes a person pay full attention to other things around and feel more nervous and restless. (3) The third level of anxiety or severe anxiety is the highest level of anxiety, in someone who experiences this level of anxiety a person is unable to think rationally and experiences intense panic. By the time a person experiences anxiety at this level they will feel fearful, restless, withdrawn and it may be difficult to think clearly.

The results of observations made by researchers at Mitra Plumbon Hospital, which used in-depth interview techniques, namely researchers conducted interviews with parents whose preschoolers underwent hospitalization with questions about parental anxiety referring to the *Hamilton Anxiety Scale* (HARS) instrument personally which was then developed by prioritizing direct communication, so it did not look like they were conducting an interview. This is because researchers want to know in depth about the anxiety levels of parents whose preschoolers undergo hospitalization, without any pressure in the parents themselves.

Researchers describe that problems that generally affect the anxiety level of parents whose preschoolers undergo hospitalization are divided into two objects, namely internal factors and external factors. From internal factors including: (1) Age factors owned by parents, resulting in feelings of anxiety, worry, tension, and fear; (2) Differences in the sex of parents, where a mother will feel more worried about the condition of her child, until it is difficult to sleep; and (3) Trauma of fear felt by parents, because there has previously been a frightening thing from the patient's illness, which caused a bad feeling. While from external include:

(1) The education level of parents is quite low, most of whom are only graduates below high school, so they feel excessive anxiety about the condition of their children undergoing hospitalization, without knowing the actual condition of the child; and (2) Parents' knowledge of the child's health is still low, which makes him too anxious, because he does not know what to do. As mentioned above, one indicator in reducing the anxiety level of the patient's parents is communication skills. Communication between nurses and parents of patients plays an important role in helping parents solve the problems faced. (Patty, Sari, Pradikatama, 2015).

Verbal and nonverbal therapeutic communication affects the level of family anxiety in patients admitted to the critical care unit, this is because families really need information and explanations about the condition of family members who are lying and being treated in the critical care unit. (Gunawan, Hidayah, Yulisetyaningrum, 2015). As the literature study, therapeutic communication can reduce anxiety levels of parents whose preschoolers are undergoing hospitalization.

Health communication in parents whose preschool children undergo hospitalization is a reciprocal relationship between the past and present behavior of a child, which aims to improve the health status of preschool children through a greater understanding of the interrelationships through changes in the behavior of healthy children who are believed to promote better child health (Setiawati, 2017).

Therapeutic communication is one way to provide accurate information and foster trusting relationships with parents whose children undergo hospitalization, so that parents will feel more satisfied with the services received when their preschool children undergo hospitalization. If nurses in interacting with parents whose preschool children undergo hospitalization do not pay attention to therapeutic communication techniques and stages correctly and do not try to present themselves physically that can facilitate therapeutic communication, then a good relationship between nurses and people whose children undergo hospitalization will be difficult to build.

LITERATURE

Pre School Children

The period of preschoolers approaches the years between 3 and 5 years. Children perfect mastery of their bodies. Physical development in preschool-age children is slow, where cognitive and psychosocial development is rapid. Preschool age children have the age of 3-5 years, this period begins with children who are able to move and stand until they enter school, characterized by high activity. (Woodya and Susanti, 2018). The developmental achievements of preschool-age children are biological, psychosocial, cognitive, spiritual, and social. Successful achievement of earlier growth and development levels is essential for preschoolers to expand on the tasks they have mastered during infancy.

The characteristics of children at this time, especially in children under 3 years old, are very egocentric. In addition, children have a fear of ignorance so children need to be told about what will happen to them. (Waruwu, 2019). Just like when the child will be measured temperature, the child will feel looking at a device that will be attached to his body. So explain how to feel, and give the child a chance to hold the thermometer that the device is not dangerous for him.

Pre-school age children are still very dependent on their mothers because children are not able to do their own developmental tasks without being accompanied by their mothers. Adequate understanding of the basic needs and changes that occur in each phase of child development is very important to help children develop themselves harmoniously and optimally. (Maryunani, 2014).

Hospitalization

Hospitalization is a process caused by certain reasons either emergency or planned and requires the child to stay in the hospital to undergo therapy and treatment until return home. (Waruwu, 2019).

Hospitalization is a process for disaster or emergency reasons that requires children to stay in the hospital to undergo therapy and treatment. Nevertheless, hospitalization remains a major problem and causes fear and anxiety for parents, children and families.

Based on some of the studies above, it can be concluded that hospitalization is an anxious experience for parents, children and their families for planning or emergency reasons that require children to stay in the hospital to undergo therapy and treatment.

Anxiety

Anxiety (*anxietas*) is an emotion and subjective experience of a person. (Waruwu, 2019). Another definition of anxiety is a condition that makes a person uncomfortable and divided into several levels. So anxiety is related to feelings of uncertainty and helplessness.

Anxiety is one of the most dominant feelings in children. Anxiety is a great fear of driving behavior. Both normal behavior and deviant or disturbed behavior are statements, appearances and defenses against anxiety.

Therapeutic Communication

Therapeutic communication as the nurse's ability or skill to help clients adapt to stress, overcome psychological disorders and learn how to relate to others. Therapeutic communication is an interpersonal relationship between nurse and client, in this relationship nurse and client gain learning experience together in order to improve the client's emotional experience.

The objectives of therapeutic communication: (a) Help the patient clarify and reduce the burden of feelings and thoughts maintaining his ego power. (b) Assist in taking effective action to change the existing situation. (c) Repeating doubts helps in effective action taking and affects others' physical environment and self. In achieving this goal, nurses often meet obstacles.

The anxiety of parents whose children undergo hospitalization is a response to an imaginary threat or a real threat, occurs when someone thinks of something that does not make him happy, although it is not certain to happen. The dimensions of anxiety according to Hawari include: (1) Feelings of anxiety; (2) tension; (3) Fear; (4) sleep disorders; (5) Impaired Intelligence; (6) feelings of depression; (7) Somatic symptoms; (8) Somatic (sensory) symptoms; (9) cardiovascular symptoms; (10) Respirator symptoms; (11) gastrointestinal symptoms; (12) urogenital symptoms; (13) Autonomic symptoms; and (14) Conduct at Interviews. (Hawari, 2015)

Therapeutic communication develops interpersonal relationships between clients and nurses. This process includes special abilities because nurses must pay attention to various interactions and non-verbal behaviors. Therapeutic communication aims to help the patient clarify and reduce the burden of feelings, help to take effective measures, repeat doubts.

METHOD

This study aims to determine the relationship between nurses' therapeutic communication with the level of parental anxiety due to hospitalization in their preschool-aged children at Ranap Lima Mitra Plumbon Hospital. This research method uses quantitative research methods with a *cross-sectional* approach. This is because data and information in the form of calculations or

statistical figures with data collection are carried out using questionnaires. In this study aims to determine the relationship between the independent variable (nurse therapeutic communication) with the dependent variable (anxiety level of parents whose preschool children undergo hospitalization).

The population in this study was all parents of patients whose preschool-age children underwent hospitalization in Ranap Room Five of Mitra Plumbon Hospital, with an average of 30 preschool-age pediatric patients per month. Basically, the more samples, the more representative and more accurate the research results will be. The samples used in this study were all parents whose preschool children were undergoing hospitalization in Ranap Room Five of Mitra Plumbon Hospital.

As such, researchers could not know the number of preschool patients treated at the time the researchers took the data, because the samples needed were not limited. Therefore, this study uses sampling techniques, namely: Accidental sampling method based on chance, namely who are the parents of patients whose preschool children are undergoing hospitalization who coincidentally or incidentally meet with researchers can be used as samples, if viewed by people who happen to fit the criteria as a source of data.

The instrument used in this study was a questionnaire. The instrument will examine two variables, namely nurses' therapeutic communication and anxiety levels of parents whose preschoolers undergo hospitalization.

DISCUSSION

Univariate Analysis

Nurse Therapeutic Communication in five hospitals. Plumbon partners, described in the table as follows:

Table 1. Classification of Therapeutic Communication Questions

		Classification			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Introduction Stage	392	60.8	60.8	78.3
	Working Stage	112	17.4	17.4	17.5
	Farewell Stage	140	21.7	21.7	100.0
	Total	644	100.0	100.0	

Source: Research Data

As the table above, it can be seen that there are 644 answers to 23 questions answered by 28 parents whose preschoolers are undergoing hospitalization. Nurse Therapeutic Communication in five hospitals. Plumbon partners have a percentage of answering on questions: introduction stage (60.8%), work stage (17.4%), and farewell stage (21.7%).

The anxiety level of parents whose preschoolers are undergoing hospitalization in five hospitals. Plumbon partners, described in the table as follows:

Table 2. Classification of Anxiety Level Questions

		Question Classification			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Mild Anxiety	84	21.4	21.4	57.1
	Moderate Anxiety	112	28.6	28.6	85.7
	Severe Anxiety	140	35.7	35.7	35.7
	Panic	56	14.3	14.3	100.0
	Total	392	100.0	100.0	

Source: Research Data

As the table above, it can be seen that there are 392 answers to 14 questions answered by 28 parents whose preschool children are undergoing hospitalization. The anxiety level of parents whose preschoolers are undergoing hospitalization in five hospitals. Plumbon partners had percentages answered on questions: mild anxiety (21.4%), moderate anxiety (28.6%), severe anxiety (35.7%), and panic (14.3%).

Table 3. Parental Anxiety Symptoms

		Symptomatic Conditions			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0	9	2.3	2.3	2.3
	1	70	17.9	17.9	20.2
	2	254	64.8	64.8	84.9
	3	59	15.1	15.1	100.0
	Total	392	100.0	100.0	

Source: Research Data

As the output above, it is known that the number of respondents who answered the data "0" or no symptoms that appeared as many as 9 answers or 2.3%, then those who answered the data "1" or mild symptoms (only one of the symptoms that appeared) as much as 70 or 17.9%, then those who answered the data "2" or moderate symptoms (some symptoms that appeared) as much as 254 or 64.8%, then those who answered the data "3" or severe symptoms / more than 1/2 symptoms that appeared as much as 59 or 15.1%, Then those who answered the data "4" or

all symptoms appeared as much as 0 or 0% of the total number of respondents' answers. Because all data is valid, the Valid Percent column is the same value as the one in the Percent column. While in the Cumulative Percent section for data results "0" as much as 2.3%, for data results "1" as much as 20.2%, for data results "2" as much as 84.9%, while for data results "3" as much as 100%. This 100% value is the cumulative value of the sum of 2.3% (data "0") + 17.9% (data "1") + 64.8% (data "2") + 15.1% (data "3") = 100%.

Bivariate Analysis

The decision-making requirement with a signification level of 5%, that is, if the signification value (sig = 0.05), then it can be said to be normally distributed. Meanwhile, if the signification value (sig < 0.05), it can be said to be abnormally distributed.

**Table 4. Normality Test
One-Sample Kolmogorov-Smirnov Test**

		Unstandardized Residual
N		28
Normal Parameters ^{a,b}	Mean	.0000000
	Std. Deviation	3.39660340
Most Extreme Differences	Absolute	.112
	Positive	.112
	Negative	-.084
Test Statistic		.112
Asymp. Sig. (2-tailed)		.200 ^{c,d}

a. Test distribution is Normal.
 b. Calculated from data.
 c. Lilliefors Significance Correction.
 d. This is a lower bound of the true significance.

Source: Research Data

Based on the *Kolmogorov-Smirnov significance value (Sig)* of nurses' therapeutic communication with anxiety levels of parents whose preschoolers undergo hospitalization, from the results of the data significance value Asymp. A Sig (2-tailed) of 0.200 is more than a value of 0.05 (*Sig* > 0.05) which means that therapeutic communication data and parental anxiety levels are normally distributed.

Correlation Analysis

**Table 5. Spearman Rank Correlation Analysis
Correlations**

		Komunikasi Terapeutik	Tingkat Kecemasan
Spearman's rho	Komunikasi Terapeutik	Correlation Coefficient	1.000
		Sig. (2-tailed)	.
		N	28
	Tingkat Kecemasan	Correlation Coefficient	.246
			1.000

	Sig. (2-tailed)	.002	.
	N	28	28

Source: Research Data

- As the data above, a correlation coefficient of 0.246 was obtained. This means that the level of strength of the relationship between therapeutic communication variables and parental anxiety levels is 0.246 or sufficient.
- Looking at the direction (type) of the relationship between therapeutic communication variables and parental anxiety levels, the value is negative, which is 0.246, so that the relationship between the two variables is not unidirectional. So it can be interpreted that the more improved therapeutic communication, the level of anxiety of parents will decrease.
- Looking at the significance of the relationship of therapeutic communication variables with parental anxiety levels, significance values or Sig. (2-tailed) $0.002 < 0.05$. So it can be interpreted that there is a significant (meaningful) relationship between therapeutic communication variables and parental anxiety levels.

CONCLUSION

As the results of the research and discussion described earlier, it can be concluded from the study "The Relationship of Nurse Therapeutic Communication with the Level of Anxiety of Parents whose Preschool Children Undergo Hospitalization in the Ranap Room of Five Plumbon Partner Hospitals" is as follows: (1) The results of this study show that nurses' therapeutic communication in 5 hospitals. Plumbon partners have an average with a percentage (33.3%) or have a high therapeutic communication category. (2) The results of this study identified that the anxiety level of parents whose preschool children were undergoing hospitalization in five hospitals. Plumbon partners have an average with a percentage (25%) or have a moderate anxiety level category. (3) The results of this study analyze that there is a Relationship between Nurse Therapeutic Communication and Anxiety Level of Parents whose Preschool Children Undergo Hospitalization in Ranap Room 5 of Mitra Plumbon Hospital, with a significance value of Sig. (2-tailed) is $0.002 < 0.05$.

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