

THE EFFECT OF COGNITIVE BEHAVIOR PLAY THERAPY (CBPT) ON CHILD BEHAVIOR IN COVID-19 PREVENTION

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ABSTRACT

Covid-19 can attack anyone, including children whose phenomena often ignore health protocols. The right approach to providing education and forming behavior that adheres to health protocols can be done by applying play therapy. This study aims to determine the effect of Cognitive Behavior Play Therapy (CBPT) on children's behavior in preventing Covid-19. The design of this study was a quasi-experimental with a pretest-posttest approach with a control group. This study involved 14 children (aged 3-4,5 years) in the Pakisaji sub-district as the treatment group and 10 children as the control group. The treatment group was given CBPT therapy. Measurement of health protocol compliance behavior using a questionnaire instrument. The results of this study showed that in both the treatment and control groups there was a significant difference in the behavioral value of complying with the health protocol before and after being given treatment which was analyzed using a paired sample t test. In the treatment group, $p = 0.003 (<0.05)$ and in the control group, $p\text{-value} = 0.010 (<0.05)$. The results of the analysis of the differences between the treatment group and the control group were carried out using an independent sample t test and the results obtained were $p = 0.254 (> 0.05)$. These results indicate that there is no significant difference between pre and post covid 19 prevention behavior between the treatment and control groups. The conclusion in this study proves that CBPT has not been declared effective enough to prevent covid 19 behavior in children because many things affect it, especially the role model and the role of parents.

KEYWORDS: Cognitive Behavior Play Therapy (CBPT), Child Behavior, Covid-19 Prevention.

INTRODUCTION

The outbreak of the Sars-CoV-2 virus or better known as COVID-19 which began to spread since the end of 2019 has not ended. WHO has determined the status of the COVID-19 pandemic in more than 215 countries including Indonesia as of February 2020. The Indonesian government has made various policies and appeals such as physical distancing so that people continue to apply health protocols. Since the Covid-19 pandemic broke out, the government has promoted health protocols that include wearing masks, diligently washing hands, and maintaining social distancing to avoid crowds and reduce mobilization. But apparently, the protocol is still often ignored by the public. In fact, if the protocol is implemented by the community seriously, the chain of transmission of Covid-19 can be significantly reduced (Purnamasari, 2021).

Covid-19 can attack anyone, be it babies, children, adults, the elderly, pregnant women, and breastfeeding mothers. The risk of contracting it becomes greater when children play together with their friends, due to close contact (Handayani, 2020). However, limiting children's play activities will also hamper their development activities, especially the social aspect. So that in this pandemic era, children can play activities but also by complying with good protocols. The right approach to providing education and forming behavior that adheres to health protocols can be done by applying play therapy, one of which is Cognitive-Behavioral Play Therapy CBPT.

According to Knell (2006) explains that Cognitive-Behavioral Play Therapy (CBPT) is a combination of cognitive and behavioral intervention in play therapy using a theoretical framework based on cognitive-behavioral and integrating principles by means of

sensitive development and verbal and nonverbal approaches used in solving problems. A specific problem-solving approach is used, which helps the child develop more adaptive thinking and behavior. Cognitive-behavioral therapy is based on the premise that cognition determines how people feel and act, and that cognitive errors can lead to psychological disorders. Behavioral Cognitive Therapy focuses more on identifying maladaptive thoughts, understanding the assumptions behind thoughts, and learning to correct or counter irrational ideas that plague the mind. It can be concluded that Cognitive Behavior Play Therapy is a combination of cognitive behavioral therapy with play therapy to change negative thoughts that have an impact on behavior into positive ones. Based on this, a specialist nurse as a member of the mental health service team is expected to provide this therapy in order to improve mental health services in general hospitals in particular and in children's communities.

Based on this background, researchers will carry out further studies regarding the Effect of Cognitive Behavior Play Therapy (CBPT) on Children's Behavior in Preventing Covid-19 in Pakisaji District.

MATERIALS AND METHODS

The research design used in this study was a research design. The design of this study was quasi-experimental with a pretest–posttest approach using a control group. In this design, respondents will be given CBPT therapy and two measurements are taken, namely pretest and posttest. This study involved 14 children (aged 3-4,5 years) in the Pakisaji sub-district, more specifically in the hamlet of Segaran RT 07 RW 09 as the treatment group and 10 children in RT 06 RW 09 as the control group using purposive sampling. The dependent variable is Child Behavior in Covid-19 Prevention, while the independent variable is Cognitive Behavior Play Therapy (CBPT). The treatment group was given 3 sessions of CBPT therapy within a period of 3 weeks on a scheduled basis 1 meeting per week.

The child's parents received an explanation of the research and signed a letter of willingness for their child to become a research respondent. The researcher provided a questionnaire and accompanied the filling process for approximately 30 minutes.

This research was conducted in September 2021, the data collected was analyzed using the SPSS application. The analysis was carried out. The statistical test used in this study was the Wilcoxon test with a 95% confidence interval, = 0.05 to determine the difference before and after treatment, and continued with the Mann Whitney test to determine the difference between the control and treatment groups.

RESULTS

Univariate Analysis

Based on the research conducted, the following results were obtained:

Table 1: Descriptive Analysis of Respondents Demographic Data in Pakisaji District, Malang Regency.

Variable	(n)	(%)
Gender		
1. Man	3	21.5
2. Woman	11	78.5
Age		
1. 3-3.5 years	5	35.7
2. 3.5-4 years	7	50
3. 4-4.5 years	2	14.3

The characteristics of the respondents in table 1 based on gender are dominated by female respondents with a total of 11 respondents (78.5%), while the remaining 3 respondents (21.5%) are male. Based on the age level, the majority are in the range of 3.5 to 4 years.

Table 2: Descriptive Analysis of Respondents' Dependent Variables in Pakisaji District.

Preventive behavior covid 19	Pre		Post	
	mean	SD	mean	SD
Treatment Group	12.21	1.48	13.36	1.28
Control Group	12,20	0.79	12.90	0.88

The respondent's data in table 2 shows that the value of COVID-19 prevention behavior in both the treatment group and the control group has increased in average value. A significant increase was shown in the treatment group with an initial average value of 12.21 to 13.36 after receiving *Cognitive Behavior Play Therapy* (CBPT).

Bivariate Analysis

The results of the bivariate analysis carried out are as follows:

Table 3. Results of Self-Disclosure Analysis of Respondents Before and After Treatment in Pakisaji District.

Preventive behavior covid 19	mean		difference	p
	Pre	Post		
Treatment Group	12.21	13.36	1.14	0.003
mpok control	12,20	12.90	0.7	0.010

The results of the analysis using the *paired sample test* above showed that in both the treatment group and the control group there were significant differences in the value of self-disclosure before and after being given treatment. In the treatment group, the p value = 0.003 (<0.05) as well as in the control group, the p value = 0.010 (<0.05) which indicates that there is a significant

difference between the results of measuring the COVID-19 prevention behavior before and after.

The results of the analysis of differences in the difference in behavior of preventing covid 19 before and after treatment between the treatment group and the control group were carried out using *an independent sample t test* and the results were $p = 0.254 (> 0.05)$. These results show that there is no significant difference between pre and post covid 19 prevention behavior between the treatment and control groups, so H_0 failed to be rejected. This can be interpreted that there is no significant influence from the application of *Cognitive Behavior Play Therapy (CBPT)* on the behavior of preventing COVID-19 in children.

DISCUSSION

Covid-19 Prevention Behavior Before being given *Cognitive behavior play therapy (CBPT)*

The respondent's data in table 2 Assessment of self-disclosure of PLWHA before group supportive therapy was carried out in this study obtained an average value of 12.21 in the treatment group and 12.20 in the control group. Both groups showed a moderate level of Covid-19 prevention compliance behavior. The assessment includes the behavior of wearing masks, washing hands, maintaining distance, avoiding crowds and avoiding mobilization.

Of the five items assessed, the use of masks and behavior to prevent out-mobilization got a good score. The use of masks is part of a series of prevention and control measures that can limit the spread of COVID-19 viral diseases. Masks can be used either to protect a healthy person (worn to protect themselves when in contact with an infected person) or to control the source by being worn by an infected person to prevent further transmission (WHO.2020). Regarding the value of avoiding good mobilization, this is also a form of compliance with government regulations that limit community activities including schools and other public areas, so that children are also conditioned to live and work in a confined environment at home.

The low value in this study is related to keeping a distance and avoiding crowds, especially when children meet and play with their friends, of course these two items are neglected. Avoiding crowds is very important, because in these crowds it is not known who has contracted Covid-19, especially those without symptoms (Kemenkes RI, 2021).

Covid-19 Prevention Behavior After being given *Cognitive behavior play therapy (CBPT)*

The data from the measurement of the COVID-19 prevention behavior of respondents in table 2 shows an increase in the average value in both the treatment group and the control group. A significant increase was shown in the treatment group with an initial average value of

12.21 to 13.36 after receiving *Cognitive Behavior Play Therapy (CBPT)*.

Play is the most important element for children's physical, emotional, mental, intellectual, creative and social development. Where children get enough opportunities to play will become adults who are easy to make friends, creative and intelligent when compared to those whose childhood did not get the opportunity to play (Soetjiningsih, 2017). In this CBPT technique, it integrates the concept of play therapy with the concept of behavior change, especially to comply with COVID-19 prevention behavior.

The method used in *Cognitive behavior play therapy (CBPT)* uses modeling as an important component in play to demonstrate adaptive coping skills in children, and the therapist can demonstrate how to learn to behave. Modeling is presented in the form of therapy playing drawing, coloring and role play. Children can practice with a therapist and is the method most often and effectively used in children. Models can be done with roleplay so that children will learn and observe from the model.

Analysis of the Effect of *Cognitive Behavior Play Therapy (CBPT)* on Covid-19 Prevention Behavior

The results of the analysis of differences in the differences in the behavior of preventing covid 19 before and after treatment between the treatment group and the control group obtained the results, namely $p = 0.254 (> 0.05)$. These results indicate that there is no significant difference in the value of pre- and post-covid-19 prevention behavior between the treatment and control groups, so H_0 failed to be rejected. This can be interpreted that there is no significant influence from the application of *Cognitive Behavior Play Therapy (CBPT)* on the behavior of preventing COVID-19 in children.

This study proves that there is an increase in Covid-19 prevention behavior in children in Pakisaji District before and after receiving *Cognitive Behavior Play Therapy (CBPT)*. However, this increase cannot be declared effective enough when compared to the control group. There are many things that affect the effectiveness of CBPT, especially the role model and the role of parents.

The results of Oktaria's research (2021) explain that parents have a very significant role in fortifying children to avoid transmission of the Covid-19 virus during this ongoing pandemic. This is motivated by the character of children as good imitators of what parents and families do at home. However, it was also found that there are several obstacles that are generally encountered by parents in educating their children because children's understanding is still very limited to the concepts and dangers of Covid-19. Clean living habits in the family also need to be cultivated in the family as a family effort and the role of parents in preventing Covid-19.

CONCLUSION

This study proves that there is an increase in Covid-19 prevention behavior in children in Pakisaji District before and after receiving *Cognitive Behavior Play Therapy* (CBPT). However, this increase cannot be declared effective enough when compared to the control group. There are many things that affect the effectiveness of CBPT, especially the role model and the role of parents. The next suggestion can be developed by examining other factors that affect the effectiveness of the implementation of CBPT, so that the implementation of this CBPT can be better and can be applied to children.

REFERENCES

1. Drewes, A, Athena. (2009). *Blending Play Therapy with Cognitive Behavior Therapy: Evidence Based and Other Effective Treatment and Techniques*. Canada : Jhon Wiley & Son, Inc
2. Handayani, Diah, dkk. Penyakit Virus Corona 2019. *Jurnal Respirologi Indonesia*, 2020; 40(2): 119-129.
3. Hockenbery & Wilson. *Wong's Essentials of Pediatric Nursing*. St Louis Missouri. Mosby Elsevier, 2007.
4. Knell. (1993). *Cognitive Behavior Play Therapy*. Aronson J. January 16, 2013. <http://books.google.co.id>
5. Knell & Dasari. *Cognitive Behavior Play Therapy for Children with Anxiety and Phobia*. New York. Guilford Publications, Inc, 2006.
6. Oktaria, Ranti. Peran Orang Tua Dalam Mencegah Penularan Pandemi Covid-19 Pada Anak: Pembiasaan Dan Pendidikan Keluarga. *Jurnal Al-Huwiyah*, 2021; 1: 2.
7. Purnamasari I, Raharyani AE. Tingkat Pengetahuan dan Perilaku Masyarakat Kabupaten Wonosobo tentang Covid-19. *J Ilm Kesehat.*, 2021; 2020: 33-42
8. *Soetjiningsih.*, Ranuh, IG.N Gde. *Tumbuh Kembang Anak*, Edisi 2. Jakarta.: EGC, 2017.
9. Videbeck, Sheila L. *Psychiatric mental health nursing* (3rd edition). Philadelphia: Lippincott Williams & Wilkins, 2008.
10. Wahyuni & Fahrudin. Reaksi Psikososial terhadap Penyakit di kalangan Anak Penderita Thalasemia Mayor di Kota Bandung. *Informasi Kajian Permasalahan Sosial dan Kesejahteraan Sosial*, 2011; 16: 157-176.
11. Yahia, et al. *Predictors of anxiety and depression in Egyptian thalassemic patients:a single center study*. *Journal of Pschiatry*, 2010.