EFFECT OF MUSIC THERAPY ON THE STRESS OF SCHOOL AGE CHILDREN WHO EXPERIENCE HOSPITALIZATION AT THE HOSPITAL dr. PIRNGADI MEDAN

*Tryonita Debora, **Nur Asnah Sitohang

*student in the faculty of nursing USU

** lecturer in the faculty of nursing
Email: nur75 asnah@yahoo.co.id

ABSTRACT

Stress due to hospitalization of children is a response to situations that cause stress, changes, claims adjustment, care delivery by an unknown person and loss of independence. Children who are hospitalized are not comfortable with the state of the environment, separation from parents and peers, limitation of activity, injury and bodily pain and fear of pain it self. Stress can be overcome by giving the management of psychotherapy, such as music therapy. Music therapy can also improve mental function, speed healing, increase the sense of well-being. The purpose of this study was to determine the effect of music therapy on the stress of hospitalization in children of school age in hospitals dr.Pirngadi Medan. Research design using a quasi-experimental with pre-post test design. The sampling technique is total sampling and number of samples 31 orang. Data were analyzed using the Wilcoxon test. Results of research before given music therapy average score of stress a child is11.61 and a standard deviation of 2.155. After being given music therapy 1.16 average and standard deviation of 3.606. Statistical test results obtained P value of 0.000 concluded that there was an effect of music therapy on the stress of hospitalization in school age children. This study proves that music therapy can reduce stress in children. It is advised to apply this therapy as one of the interventions in providing nursing care to the child.

Keywords: music therapy, stress, hospitalizations, school-age children

INTRODUCTION

School-age children, vulnerable to disease and ultimately children required hospitalization. Illness and hospitalization are often the first crisis faced by children (Wong, 2008). Hospitalization is a crisis situation that requires children hospitalized or stayed in the hospital for intensive treatment, which causes a change in the child's psyche. In Indonesia, 30% of 180 children between 3 to 12 years had experience with the hospital. Most children received treatment in hospital less than six days. And the time needed to care for sick children 20-45% more than at the time to treat adults (Wong, 2008).

The hospital environment is certainly very different from the environment in the home, different shapes and atmosphere. The response that occurs when a child is treated like fear, decreased appetite, even children often cry, do not want to drink milk or eat foods that are given. Response occurred because the hospitalized child care is a

stressful experience for both the child and parents. Stress comes from the child itself and from outside, namely environmental factors. Stress faced by individuals can be affected by physical, emotional, intellectual, social and spiritual (Wong, 2008).

School-age children who hospitalized will have some problems like experiencing a separation, the adjustment to the new environment, adjustments to the nurses who take care of it and hang out with a sick child. Parting is the biggest stress that caused the hospitalization of children. One of the factors that affect the stress hospitalization was losing control. Many hospital situation which decreases the amount of control felt by the child. Lost control in children are caused by changes in routine, and dependency that must be obeyed. One of the problems of children is centered on boredom (Wong, 2008). Stress in children is one of the effects of psychological changes occur due to a stress or crisis in children. Child reaction to influenced the crisis was by their developmental age, their previous experience with illness, separation from families, pain and hospitalization. They acknowledged losing his routine and feel worried that they are not able to adjust. If a child is hospitalized, then the child will easily run into crisis because: (1) children experience stress as a result of changes in the health status and the environment in the habit, and (2) the child has a number of limitations to menyeselesaikan problems coping mechanisms and events are pressing (Wong, 2008).

Stress can be overcome by giving the management of psychotherapy, psychotherapy is one of music therapy. Not only adults need music to calm down, children also need to listen to music with a certain rhythm to exercise patience, and can lower the stress. For this purpose needed quiet room (Young & Koopsen, 2007).

Music has become a place for expression and communication, and without us knowing music is also used to manipulate feelings. Music is also one of the ways to make the child be quiet. The skills that children get from the music leads to the belief of the larger, better language skills, fine motor skill acquisition, temporary consciousness, creativity, and increased concentrations of. Music therapy can also improve mental function, speed healing, increase the sense of well-being. Music is a useful tool for someone to find harmony within himself. It is necessary also because of the presence of harmony within oneself and it will be easier to cope with stress, and pain (Djohan, 2009).

Music is widely used for healing, calming and improve the physical and physiological conditions. Listening to music can alter moods and can be raised or lowered, and give room for reflection (Sheppard, 2007).

Data obtained from medical records Dr.Pirngadi Hospital Medan, school-age children who experience hospitalization in the period January 2013 to January 2014 as many as 322 people

Research conducted Farida (2010) that had the aim to determine the effectiveness of music therapy on postoperative pain reduction of school-age children in the department of human rights, the results obtained in the control group, the effect of music therapy on postoperative pain intensity was not significant, while in the intervention group

therapy music has a significant influence on the intensity of pain. Thus inferred music therapy is effective against post-surgical pain intensity in children.

The purpose of this study was to determine the effect of music therapy on stress as a result of hospitalization in children of school age in hospitals Dr.Pirngadi Medan.

RESEARCH METHODOLOGY

The research design was quasi experimental with pre post test design approach. This study only tested a group of subjects where the group observed before the intervention and then observed again after intervention. The population in this study were children aged 6-12 years as many as 31 children in April-May 2014. The sampling technique using total sampling method. Inclusion criteria were: children aged 6-12 years; willing to be the respondent; has been hospitalized at least 2 days; can speak Indonesian well; the level of awareness compos mentis; do not suffer from hearing loss and pronunciation; parents agree their children to be the respondent. Exclusion criteria of the study was children with special needs (autism, hydrocephalus disease. hyperactivity, tunagarahita, were in isolation rooms); patients taking anti-stress medications and anxiety. This study was conducted from 15 April to May 15, 2014 at the inpatient unit jasmine and roses. This research was carried out by considering the ethics of research. The questionnaire consisted of demographic data and stress questionnaire consisting of 21 questions. Data collection is done in the room Bed and Rose. Data analysis using Wilcoxon statistical test.

3.RESULTS AND DISCUSSION

3.1.Result

The results based on the characteristics of respondents, the majority of the male sex as many as 19 people (61.3%), aged 12 years as many as 7 people (22.6%), Batak tribe as many as 20 people (64.5%), Islam as much as 18 people (58.1%), never cared for as many as 18 people (58.1%), and length of hospital for 2 days as many as 15 people (48.4%).

b. Stress characteristics of children before being given music therapy

Table 1
Distribution of respondents by stress children before being given music therapy in hospitals dr. Pirngadi Medan 2014

Variable	Mean	Median	SD
Stress	11,61	12,00	2,155

Based on research results gained an average of score stress respondent before being given music therapy 11.6, standard deviation 2.155 and median 12.00.

b. Stress children after being given music therapy

Table 2
Stress children after being given music therapy The Hospital Dr. Medan Pirngadi 2014
(n=31)

Variable	Mean	Median	SD	
Stress	1,16	0,00	3,606	-

Based on research results gained an average of score stress respondent after being given music therapy 1.16, standard deviation of 3.606 and the median 0.00.

c. Effect of music therapy on stress due to hospitalization in school age children

Statistical analysis showed after being given music therapy, 27 children has decreased and 4 children alike stress before and after music therapy. P values = 0.000, it can be concluded that there is a significant effect of music therapy on children who experience stress of hospitalization.

3.2.Discussion

Based on the results obtained from the data the majority of respondents aged 12 years. The older age of the child, a person's level of stress and increasingly constructive force in the use of coping with the problems encountered. School-age children who are hospitalized will normally arise fear of doctors and nurses, because in their shadow that the nurses would be hurt by injecting. The home

environment is certainly very different from the atmosphere and forms with treatment rooms

In addition, children also have limited activities such as day-to-day activities with their peers and family. Stress in children of school age are stress due to separation from his prex group, suffered injuries on the body and pain and loss of control can also lead to stress (Wong, 2008).

The results based on experience hospitalized in the hospital the majority of 18 people (58.1%) had experienced. This is in accordance with the opinion of Wong (2008) that strongly influence individual experiences stress response because it can be used as a learning experience in dealing with a problem. Diminishing stress response when compared to someone who first hospitalized and face the problem.

Children are not familiar with the hospital environment and medical procedures will be undertaken. Child for the first time experienced a hospitalization there was initially very difficult to interact with other people even with strangers. The response appears, the child tends to cry or get angry when approached, even he did not hesitate to sulk on his parents. For the assistance of a parent who is always there beside the child, all obstacles can be overcome with good. Some children who have 4-5 days of treatment tend to interact well.

Emotional reaction at school-age children often cry, angry and bereaved as a healthy form in overcoming stress due to hospitalization (Elfira, 2011).

Listening to music in children can be trying to find internal harmony, increase self-confidence, develop skills to deal with problems and pain and relaxation. This will be easier to cope with stress, tension, pain and various disturbances or negative emotions experienced. In addition to music through the sound can also change the frequency is not harmonious vibrations back to normal, healthy and can restore normal circumstances (Djohan, 2006).

4. Conclusions and suggestions

Research shows that music therapy can reduce stress in children who are hospitalized. For it was suggested to the nurse who served in the children's ward be able to use them as one interventions to improve child welfare

REFERENCES

- Aidar, N. (2011). Hubungan peran keluarga dengan tingkat kecemasan anak usia sekolah (6-12 tahun) yang mengalami hospitalisasi di ruang III Rumah Sakit Umum Dr. Pirngadi Medan. Medan: FKEP USU http://repository.usu.ac.id/handle /123456789/27095.
- Bassano, M. (2009). *Terapi Musik dan Warna*. Yogyakarta : Rumpun.
- Djohan.(2009). *Psikologi Musik*. Yogyakarta: Galang Press.
- Farida, A. (2010). Efektifitas terapi musik terhadap penurunan nyeri post operasi pada anak usia sekolah di RSUP Haji Adam Malik Medan. Medan: FKEP USU. http://repository.usu.ac.id/handle/12345 6789/20095.
- Foster, R.L.R., Hunsberger, M.M., Anderson, J.J.T. (1989). Family-Centered Nursing

- *Care of Children*. Philadelphia : W.B. Saunders Company.
- Natalina, D. (2013). Terapi *Musik Bidang Keperawatan. Jakarta*: Mitra Wacana Media.
- Schulte, E.B., et al. (2001). *Thompson's Pediatric Nursing 8 th edition*. Philadelphia: W.B. Saunders Company.
- Sheppard, P. (2007). *Music Makes Your Child Smarter*. Jakarta: PT Gramedia Pustaka Umum.
- Sunaryo. (2004). *Psikologi Untuk Keperawatan*. Jakarta : EGC.
- Wong, D.L., Kasprisin, C.A., Hess, C.S. (2008). Buku Ajar Keperawatan Pediatrik Edisi 4 (Editor: Egi Komara Yudha). Jakarta: EGC.
- Patricia. (2008). Buku Ajar Keperawatan Pediatrik Edisi 6 volume 1 (Editor : Egi Komara Yudha). Jakarta : EGC.
- Young, C., Koopsen. C.(2007). Spritualitas, Kesehatan dan Penyembuhan. Medan: Bina Media Perintis