# INFLUENCE *PLAY THERAPY* IN LOWER SYMPTOM PTSD ON CHILD VICTIM POST DISASTER FIRE

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#### Abstract

**Background Behind** : PTSD (*Post Traumatic Stress Disorders*) is a traumatic event which can bring up sorrow the deep that can happen to teen and parents, but more prone to occur in children due to the lack of coping mechanisms in them. PTSD experienced by children requires us to provide psychological services through *play therapy*, which expected to deliver real impact towards reducing symptoms PTSD Which experienced by children victim disaster. **Objective** : To determine the influence *of play therapy* in children who experience PTSD after a disaster fire in Alalak South. **Method Study** : This is a quantitative research with pre-design experimental with approach *one group pretest and posttest*. Population study is children victim fire in RT 04 and RT 05, South Alalak Village, Banjarmasin. Samples were taken using *Exhaustive sampling* technique , namely 45 children aged 3-12 years. Data analysis usinganalysis test different 2 *means dependent (paired sample t-test)* with  $\alpha = 0.05$ . **Results** : research results from 45 PTSD score respondents before *play therapy* with amean of 37.82 and the PTSD symptom score after *play therapy* with a mean of 25.69. The results analysis of the difference test of 2 *dependent means (paired sample t-test)* shows p value = 0.000 <  $\alpha$  (0.05) with correlation very influential strong (0.816). **Conclusion:** There is *play* influence *therapy* towards reducing symptoms PTSD on child victim post disaster fire in Ward Alalak South Banjarmasin.

Keyword : PTSD, play therapy, child victim post disaster fire.

### Introduction

Disaster is an incident or series incident that threatens And bothers life And livelihood public. Disaster can result in the emergence victim soul man, damage environment, loss treasure object, And impact psychological (Body National Countermeasures Disaster, 2012). Disaster Also can leaving trauma for victim.

National Disaster Management Agency Data (BNPB) especially in South Kalimantan province show that 85 natural events occurred and nonnatural with damage to houses (units) 33 damaged weight, 20 damaged medium, 116 damaged light, victim (soul) 14 dead, 12 injured, 5,614 affected impact And evacuate. Incident disaster Which Still trend in Kalimantan South moment this is fire disasters, both forest and land fires as well as fire home residents. Incident the fire that caused the most losses that is incident fire on Jalan Alalak Selatan, South Alalak Village, Banjarmasin District North Which happen on day Tuesday date 10 September 2019 early morning around 03.00 WITA until with o'clock 05.00 WITA.

The results of observations that researchers

conducted on site incident fire the show that incident fire No only burn treasure object, place stay just, but Also causing deep trauma and sadness for them. The life they live must be started from beginning Again. Specifically traumascaused to children who are victims of fires Which prone to experience *Post Traumatic Stress Disorder* (PTSD).

Post Traumatic Stress Disorder (PTSD) is incident trauma Which can bring up sorrow Which deep Which can occurs in children, adolescents and adults, but more prone to happen on children Because lack of mechanism coping Which there is in himself. Symptom Which appear as if causing a condition Which No calm, Afraid, nervous, feel easy panic and have anxiety (Mahfur et al., 2012). Other symptoms may include flashback symptoms. (think as if incident the repeat return), nightmare (dream wrong about events which makes him sad), reaction excessive emotional and physical triggers by memory will incident the sad one (American Psychiatric Association, 2015).

Results interview to child victim fire in Alalak South RT 04 And RT 05 obtained results obtained results that conditions in children who are victims post incident fire the cause *Post Traumatic Stress Disorder* (PTSD) Because child No Can disclose feeling so that becometrauma excessive on himself And cause several symptom like No calm, Afraid, nervous And feel easy panic and have anxiety if the incident occurs it repeats itself return.

Trauma on child required Handling Which appropriate so that trauma Which experienced No cause a matter Which No Good in time growth And development. This condition demands that we give service psychological Whichin accordance. Wrong One service the is through activity trauma healing on child use play therapy. Type *play therapy* can be applied to child- child victim fire in the form of draw And coloring, play plasticine, play puzzle with a cut paper, playing with balloons and throwing cans. These kinds of games have benefits in *Post Traumatic stress disorder Stress Disorder* (PTSD) on children (Mukhadion, 2016).

Based on background behind the, researchers conduct research with the aim of For know influence *play therapy* on child Which experience PTSD post disaster fire in Alalak South. Study This apply several type game related problem *Post Traumatic Stress Disorder* (PTSD) Which expected able to provide a real impact on decline trauma Which experienced children victim disaster.

## Method

Study This quantitative study uses preresearch design experimental design with approach one group pretest and posttest. Population used in this study is child- children in RT 04 and RT 05 totaling 45 person. Whereas sample Which used that is child Which become victim post fire Which aged 3-12 year as many as 45 person. Sample taken with use technique exhausting sampling. There is 2 variable Which used in this study, namely the independent and dependent variables. Independent variables in this study is play therapy. While the dependent variable is Post Traumatic Stress symptoms Disorder (PTSD). Instrument study Which used in this study consists of 2 parts that is: questionnaire data characteristics And questionnaire signs and symptoms of post-traumatic stress disorder or Post Traumatic Stress Disorder (PTSD). Data

collected use questionnaire Which spread out to child child Which Already identified symptoms of Post Traumatic Stress Disorder (PTSD) with intervention *play therapy* in the form of draw, play *clay*, play puzzles, play balloon and can throwing is done in a way in groups in a place or room. *Play therapy* done for 45 minutes every the session. There is 4 stage Which will be done on moment intervention that is stage pre-interaction carried out for 5 minutes, the orientation stage for 5 minutes minutes, 30 minutes working phase and 5 minutes termination phase. minutes. *Play therapy intervention* was given for 4 minutes—time meeting in range time 4 Sunday. Furthermore researchers will return RT 04 and 05 to meet 45 children who become Respondent study For do filling questionnaire back about symptom For see return about symptom PTSD, after Respondent fill in questionnaire furthermore data collected And checked completeness prepared For done processing data. Data Which collected later analyzed in a way bivariate And univariate.

## Results And DiscussionAnalysis Univariate

## a. Characteristics Respondents

Following is characteristics Respondent on this research. Respondents in this research A total of 45 children were selected according to criteria inclusion Which set previously. Respondents were children aged 3-12 years who experienced trauma after the fire disaster inRT 04 And RT 05 South Alalak Banjarmasin.

Table 1. Characteristics Respondents

Characteristics	Category	n	%
Type Sex	Man	19	42.2%
	Woman	26	57.8%
Age	3-6 year	15	33.3%
		30	66,7%

Table 1 show that according to type sex, man as much as 19 child with percentage 42.2% And Woman as many as 26 children with a rate of 57.8%, so that in a way overall child Which experiencing PTSD symptoms in Alalak Village South English more Lots happen on child Woman than children man. Results observation researcher on moment study For type sex woman own percentage most tall than child man, matter This because of type sex Woman more difficult For adapt to the surrounding environment. Children Woman seen always accompanied by person his parents specifically Mother And family closest, whereas child man more independent, And researcher see on moment observation child man more enthusiastic And cheerful done study or on moment done intervention.

\Type sex is Wrong One factor the occurrence *Post Traumatic Stress Disorder* but No be a factor Which most dominant (Weems et et al., 2007). Study the Also in line with study Breslau et a. (1998) in his research states that women two time fold more allow For experience PTSD. Matter This due to by low serotonin synthesis in women. Opinion This in accordance with research done by Rahmadian (2016) Which state existence difference manifestation pressure psychological Which clear between child boy and girl. While that, boys tend not to remember essential things related to disasters. Researchers have the opinion that child man tend to forget aspects incident disaster more than child Woman. Child Woman own trend experience stress consequence trauma because of Woman own hormone Which more many of the men, as well as endurance to stress more big.

Meanwhile, based on age, respondents are dominated by age school 7-12 year with percentage 66.7% or as many as 30 children. Researchers to argue that children age more school at risk For experience symptom PTSD caused by the child's growth and development develop in matter adapt, interact with the social environment and its surroundings in general so that when There is things which is dangerous self they matter That can disrupt stability level stress And emotion they.

Age 7-12 years indicates the child's age at a stage of growth and development. Child growth and development should be achieved by the child when he steps on level or level certain. Study Which conducted by (Pangau, 2014) stated that age children affect the growth rate and developments after the fire disasterso that in the industry versus child inferiority phase experience disturbance growth And development due to environmental factors physique the.

Factors that influence growth are wrong the only one namely environmental factors. Physical

environment consequence disaster Which experienced by child can make child trauma due to the level emotion child Not yet stable And bother comfort they so that they Not yet can accept circumstances and adapt well (Wong, 2008). Research conducted by Purnamasari (2016) show that age is factor key understanding children to disasters. Age as index skills development child in reflect ability understand What Actually disaster or incident Which can cause trauma.

Disaster-related research on age groups child school in a way empirical state that child age school Also show distress psychological Which more comprehensive (Purnamasari, 2016). Child on age school This own characteristics have an inquisitive sense tall, prefer to play and in children aged schools are still very much influenced by the environment family (Khadijah and Armanila, 2017). Children in time school if experience disturbance Good internal or external, for example with incidentsdisaster experienced, of course it will disturb all his activities.

That matter Also in line with research results Bedriye (2014) on children age school get results in the form of reaction child post the disaster experienced is avoidance, becoming anger, self-deprecation, and behavioral changes such as symptoms: having disturbing dreams, Afraid stay in the House, disturbed with voice

And voice Which suddenly, after Sleep difficulties, reluctance to go to school and join the game. One of method Which can help child in lower symptom PTSD is to invite child For do play therapy.

*Play therapy* can be done by children Which Healthy and Sick, although child currently experience Sick but need play is still there (Suryanti, 2013). Form *play therapy* according to the Trauma Training Module Anggraini And Martini (2020) that is: art drawing, music and movement, plasticine and meditation, box sand, tell a story with doll / tell a story free, play puzzles, play And throw can.

b. Difference average score symptom PTSD before And after done play therapy

Table 2. Distribution Difference average ScoreSymptom PTSD Before And After Done PlayTherapy

Variables	Mean	SD	SE	Minimum- Maximum
Symptom PTSD	37.82	2,766	0.412	32 - 44
before				
Geala PTSD	25.69	3,430	0.511	20 - 34
fter				

Based on table 2 known that PTSD symptom scoring results before being carried out *play therapy* , namely the average value of 37.82 with the lowest score obtained being 32 and highest 44. For PTSD symptom scoring results after done *play therapy* namely value average as big as 25.69 with mark score The lowest score was 20 and the highest was 34. lowest before and after intervention dominated by children aged 7-12 years. Scorehighest before and after intervention as well dominated with child age 7-12 year. Researcher exciting conclusion that there is decrease in mean PTSD symptom scores before And after done play therapy.

Results study Which done by researcher seen clear There is change Which very significant score PTSD before And after done Wrong One intervention nursing in dealing with PTSD with *play* therapy. Play therapy done a total of 4 sessions, namely sessions I, II, III, IV and so on part big child show the response that Good like child seen enthusiastic, like, enthusiastic, And enjoy game Which provided by researcher. Besides That, based on results questionnaire Post Traumatic Stress Disorder Symptom Scale For DSM V (CPSS-V SR) before done intervention it is known that with a total the lowest score is 32 with the answer form "rarely" in the content of the statement, namely often feeling as if incident the appear return. Response physique Which experienced Respondent easy annoyed when There is somebody Which remind return on incident fire the, feel heart palpitations/cold sweats when something happensremind return on flames of incident the.

This shows that before it is done*play therapy* causes them to become traumatized will environment around children Which become The victims of the fire incident are still feeling traumatic things that often appear in memory they, fear, anxiety that the incident will appear return, dream bad Which bother, No want to talk about

incident because it will remind you about incident fire, be careful And alert excessively with other people and the environment around. Intervention Which given like *play therapy* is significant, to be able to overcome this traumatic Which experienced by children victim disaster.

Results questionnaire Which answered by Respondent after done intervention *play therapy* results questionnaire even experienced a decline in score lowest 20 with the answer form "never" on Contents statement own dream bad Which bother And over and over again about incident the fire. The decrease in score from questionnaire before and after *play therapy* is locatedon form answer "sometimes" become "never". This shows that a *play therapy* intervention can reduce symptoms PTSD on child victim disaster fire.

Results statement Respondent on questionnaire shows that from the symptoms of PTSD that experienced by children victim post disaster fire after given 4 interventions session game use *play therapy* can provides a reduction in PTSD symptoms where *play therapy* what is done can create an atmosphere And memory they become more relax And pleasant like things other Which can disturbing, and frightening in their lives. They can also disclose sadness, fear, and worry through games Which provided. A Study conducted by Kliegman et al (2007) states that an adaptive response system can help child in take decision, control emotional And can think For they reach in the future. Experience Which negative recorded And recorded in the future for do a action Which No Good for himself And person other.

Study This according to the opinion of previous researchers, which states that the child is the victim disaster fire need do control emotion. Control emotion Which intended that is How effort We in control emotion child like angry emotions, scared emotions, sad emotions, emotions happy, emotion jealous for example. Emotion can cause positive and negative things in somebody to achieve objective (Nurlaeli et al., 2022).

## **Analysis Bivariate**

Following is results test paired T-Test sample on the effect of *play therapy* to decline symptom PTSD:

Table 3. Results Test Paired Sample T-Test About Influence *Play therapy* To Decrease Symptom PTSD

Variables	Diffe rent Mea n	SD	95% Conviction Interval		
			Lowe r	Upper	P value Sig (2- tailed)
Symptoms	12,13	1,98	11,53	12,729	0.001
PTSD		4	7		
before- after					

Table 3 show that average level symptom PTSD on child 3-12 yearbefore and after done *play therapy* namely with a mean difference of 12.13. The results statistical test obtained that p value Sig (2-tailed) 0.001 < ( $\alpha = 0.05$ ) because the value Sig. (2-tailed) 0.001 more small from 0.05 then it can be concluded that there is an influence *play therapy* on reducing PTSD symptoms on child victims of post-fire disaster in a fire. Play intervention relationship therapy with decreased PTSD symptoms in child victim disaster fire extreme (0.816).

Study Which done by Reddy & Schaefer (2016) state that Lots phenomena that can be observed during play No can appeared in a way oral. In general collective, two studies metaanalysis disclose that intervention play own effect positive. Intervention play effective For children throughout modality treatment (group, individuals) and age groups (3-16 years). Reviews This give proof For utility clinical And success of play interventions with children And family.

Another study by Schultz (2016) explains that play therapy has potential Which is more promising from on therapy use drug. *Play therapy* is alternative solution in help child traumatic can return to a mentally healthy personAnd develop in a way optimal.

Study others too done by Anggraini and Martini (2020) with *play therapy research* For children victim disaster natural Which experiencing trauma (*Post Traumatic Stress Disorder*) with the results of his research stating that intervention with *play therapy techniques* is one of them one way that can be used in understanding world children through play, so if used in the right situations and conditions can meaningful as a physical activity as well as therapy. Study Which done by Melissa (2013) mention that *play therapy* can helpful as information media for children in face disaster so that child be ready in a way physique And psychological. In line with study Which by Nuryani et al (2014), state that game based on local culture can increase children's ability socialisation.

Researchers argue that from the results of observations Which done by researcher after finished study, on child victim post disaster fire 3-12 years when drawing, playing plasticine, play puzzles, play balloon And throw can child very enthusiastic follow activity *play therapy* with well, the child looks like And happy. *Play* therapy this is implemented to reduce PTSD symptoms in child victims post fire disaster because during the provision of treatment and afterwards the child looks cheerful, more enthusiastic And experience change behavior. Homemaker And Morrison (2008) revealing *play therapy* is an effective way to addressing children's mental health needs And accepted in a way broad as an intervention Which valuable And following stages development. Researcher agree with matter the, that *play therapy* become one of the alternative treatments that is quite effective For help overcome And lower symptom PTSD on children victim post disaster.

Results study And discussion Which has been described above regarding *play therapy* towards reducing PTSD symptoms in child victimspost fire disaster it can be concluded that There is *play* influence *therapy* to decline symptom PTSD child victim post disaster fire in Ward Alalak South Banjarmasin.

## Conclusion

Based on description results And discussion, can it is concluded that symptom score PTSD on child victim post disaster fire before being given *play therapy* mean 37.82 with the lowest score of 32 andthe highest score was 44 while the PTSD symptom score was on child victims of post-fire disaster after being given *play therapy* experience decline mean 25.69 with mark score lowest 20 and highest score 44. Besides that, It is also known that

there is an influence of play therapy to decline symptom PTSD to child victims of the post-fire disaster inWard Alalak South English with p value  $0.001 < (\alpha = 0.05)$ .

## Daftar Pustaka

- American Psychiatric Association. (2015). DSM V CPSS-SR (Diagnostic and Statistical Manual of Mental Disorders V Text Revision). American Psychiatric Association Press.
- Anggraini, S., & Martini, M. (2020). Pelaksanaan *Play therapy* Dalam Menurunkan Gejala Ptsd Pada Anak Korban Pasca Bencanakebakaran Di Kelurahan Alalak Selatan Banjarmasin. *Jurnal Suaka Insan Mengabdi (JSIM)*, 2(1), 27–37.
- Badan Nasional Penanggulangan Bencana. (2012). Daftar Bencana Informasi
- Bedriye, A. . (2014). Determination and Evaluation of Effects of Earthquake on School Age Children's (6-12 Years Old) Behaviours. *Journal Social and Behavioral Sciences*, 2(4), 152–164.
- Breslau, N., Kessler, R. ., & Chilcoat, H. . (1998). Trauma and posttraumatic stress disorder in the community: The 1996 Detroit area survey of trauma. Archives of General Psychiatry, 55, 626– 632.
- Homeyer, L. ., & Morrison, M. . (2008). Play Therapy: Practice, Issues, and Trends. *American Journal of Play*, 1(2), 210–228.
- Khadijah, K., & Armanila, A. (2017). *Bermain Dan Permainan Anak Usia Dini*. Perdana Mulya Sarana.
- Kliegman, R. ., BehrmanR.E, & Jenson, H. (2007). Nelson Textbook of Pediatrics 18th edition . Saunders Elsevier.
- Mahfur, Mulyadi, & Hidayah, R. (2012). Kecemasan Dan Psikoterapi Islam (Model Psikoterapi Al-Qur'an dalam Menanggulangikecemasan Santri Lembaga Tinggi Pesantren Luhur dan Pondok Pesantren Baiturrahmah di Kota Malang). *EL-QUDWAH*, 3(2), 1–10.
- Melisa, M. (2013). analisis beban kerja yang mempengaruhi tingkat kelelahan pengemudi kendaraan roda empat rute Jakarta-Bandung. Universitas Bina Nusantara Jakarta.
- Mukhadiono, S., & Wahyudi, W. (2016). Pemulihan PTSD pada Anak-anak Korban Bencana Tanah Longsor dengan Play Therapy. *The Soedirman Journal of Nursing*, 11 (1), 23–30.
- Nurlaeli, I., Assalma, S. ., Prianto, F. ., & Rahmah,
- A. (2022). Implementasi Teknik Stabilisasi Emosi sebagai Upaya Meningkatkan Kecerdasan Emosional pada Penghuni Panti Asuhan Darul Hadlonah Purbalingga. Jurnal Literasi Pengabdian Dan Pemberdayaan Masyarakat, 1(1), 1–12.

Nuryani, N., Isnaniah, S., & And Eliya, I. (2014).

Sosiolinguistik Dalam Pengajaran Bahasa Berbasis Multikultural: Teori Dan Praktik Penelitian. In Media.

- Pangau, A. (2014). Perdebaan Post-Traumatic StressDisorder Pada Anak Di Daerah Aliran Sungai Tondano Pasca Banjir Bandang Kota Manado. Jurnal Universitas Samratulangi, 2(1), 89–95.
- Purnamasari, I. (2016). Perbedaan ReaksiAnak Dan Remaja Pasca Bencana. Jurnal Penelitian Dan Pengabdian Kepada Masyarakat, 3 (1), 49–55.
- Rahmadian, A. . (2016). Analisis Gangguan Stres Pascatrauma Pada Anak DanRemaja Korban Bencana Alam. Universitas Pendidikan Indonesia.
- Schultz, T. . (2016). *The Source of Increasing Compensation*. Renmin University Press
- Suryanti, S. (2013). Pengaruh Terapi Bermain Mewarnai Dan Origami Terhadap Tingkat Kecemasan Sebagai Efek Hospitalisasi Pada Anak Usia Pra Sekolah Di RSUD dr. R. Goetheng Tarunadibrata Purbalingga. Jurnal Kesehatan Samadro Ilmu, Edisi IV, 3(2),87– 98.
- Weems, C. F., Pina, A. A., & Natalie, M. (2007). Predisaster Trait Anxiety and Negative Affect Predict Posttraumatic Stress in Youth After Hurricane Katrina. *Journal of Consulting and Clinical Psychology*, 75(1), 154–159.