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Effectiveness of Bibliotherapy in Reducing the Level of Anxiety Among Hospitalized Children in Selected Hospital at Bagalkot

Tukaram Ramappa Lamani^{1*}, Santosh B. Sajjan², Deelip S. Natekar³ 1.2.3 Department of Pediatric Nursing, BVVS Sajjalshree Institute of Nursing Science, Navanagar, India

Abstract: Illness and hospitalization are fearful experiences for children and their families. Recent research has identified a range of variables that can influence the extent of negative reactions of children to hospitalization and medical interventions. These include the family's previous medical experience, the child's developmental status, the parent-child interaction, the seriousness of the illness, the severity of the medical procedure, and the coping style adopted by a child. Hospitalized children identified a range of fears and concerns which include separation from family and parents, unfamiliar environment, investigations, treatments and loss of self-determination. Numerous research studies have found that the children have fears and concerns regarding illness and hospitalization.

Aim: The aims of this study are as follows: (1) To assess the level of anxiety among hospitalized children. (2) To evaluate the effectiveness of Bibliotherapy in reducing the level of anxiety among hospitalized children. (3) To find out the association between the post test level of anxiety scores among hospitalized children with their selected socio demographic variables.

Materials and Methods: Study approach- An evaluative research approach and follows the study design as pre- experimental with one group pre test post test without control group. The population involved in this study was hospitalized children in selected hospitals at Bagalkot. Samples are hospitalized children admitted in pediatric general ward. Sample size is 50 (Total Hospitalized children were included in the study. Further, data were collected by semi structure and Hamilton Anxiety rating scale.

Result: After collection, an a data are organized and analyzed with the help of mean median and percentage, and the sociodemographic characteristics of hospitalized children were as follows: 36% of hospitalized children are in the age group of 12-13 years, Majority of subjects 62% were male children, 36% of hospitalized children belongs to 6th standard, 74% of hospitalized children are Hindu, 16% of hospitalized children are Muslim, 28% of children had stayed in hospital about more than four days, Majority of subjects (58) were belongs to a nuclear family and 32% of children were family income was 10,00 I to I 5,000. Assessment of levels of anxiety scores among children during pre test revealed that, the majority of children 23 (46%) had extremely severe anxiety, 22 (44%) percent of them had moderate to severe anxiety; And 05 (10%) had mild to moderate severity. None of the children were having Mild severity anxiety level. Assessment of levels of anxiety among children during post test reveals that, the majority of children 41 (82%) had mild severity anxiety, 09 (18%) percent of them had mild to moderate severe anxiety; None of the children were having extremely severe anxiety, moderate to severe, no any level of anxiety. So there is a significant difference

between the pre test and post test level of anxiety scores of children regarding Bibliotherapy. Findings revealing the presence of significant difference between pre-test and post-test level of anxiety scores, hence the Bibliotherapy is proved to be effective in reducing the hospitalized anxiety among hospitalized children.

Conclusion: This study inference revealed that regular practice of bibliotherapy during hospitalization could bring about desired reduction of anxiety among children.

Keywords: Hospitalization, Anxiety, Children, Bibliotherapy, Hamilton anxiety rating score.

1. Introduction

Children of today tomorrow's citizen, thus it is extremely important to ensure good health for children. Child health plays a vital role in the development of a country. The first six years of life constitutes the most crucial span in life. At this stage if life, the foundation are laid for mental, physical and social development. Children health was once a subset of adult medicine. In the 19th and early 20th century, people recognized pediatrics as a medical specialty because of the gradual awareness that the health problems of children are different from those of adults. It was also recognized that a child's response to illness, medications, and the environment depends upon the age of the child [1].

2. Need for Study

Illness and hospitalization are the first crisis children must face. Especially during the early years, children are particularly vulnerable to the crisis of illness and hospitalization because stress represents a change from the usual state of health and environmental routine and children have a limited number of coping mechanisms to resolve stressors [2], [3].

World Health Organization estimates that common pediatric hospital stays are 4,279,000 and 2.2 million non-newborn pediatric stays. In the hospital stays 23% of children had respiratory condition, 12% of children had digestive condition, 8% of children had disorder of nervous system, 6% of children had endocrine and musculoskeletal disorder, 4% of had skin disorder, Kidney disorder, infectious and parasite disease, 3% of children had blood and circulatory disorder, 2% of children

had injuries and neoplasm [3], [4].

According to CDC report in India 2015: Data collected from a variety of data sources. Shows, Children aged 7- 1 2 years currently had, ADHD (6.8%), Behavioral or conduct problems (3.5%), Anxiety (3.0%), Depression (2.1%), Autism spectrum disorders (1.1%). According to child mental health statistics 2014 3.3°/c or about 290,000 children and young people have an anxiety disorder, 2.2% or about 96,000 children 8 have an anxiety disorder, 4.4°/c or about 195,000 young people have an anxiety disorder [5].

Blondi Ming Chaukwok (2010) conducted a study to find out the effectiveness of bibliotherapy on reduction of anxiety and fear of hospitalized children and they found that Allegorical stories can be used to help children cope with the worries and fears precipitated by illness, medical procedures, and hospitalizations. They supplement explicit discussions of illness and preparation for procedures and hospitalization. Stories with appropriate symbolic themes are readily available in children's literature. Individuals without special training in counseling or emotional support of children can quickly learn to use these stories effectively. These results are consistent with the idea that bibliotherapy can be an affective accessible intervention for reducing the anxiety of the hospitalized children [6].

3. Materials and Methods

The present study was conducted on an evaluative approach and pre- experimental with one group pre test post test without control group design. The target is Hospitalized children in

Bagalkot. Accessible population is Hospitalized children from HSK hospital of Bagalkot. Hospitalized children were selected by purposive sampling technique and 50 hospitalized children were selected, and data were collected by semi structure questionnaire and Hamilton anxiety rating scale. Data analysis and interpretation were performed description such as frequency distribution, mean, median, percentage, and inferential statistics such as Chi-square test.

Tools for data collection: Hamilton anxiety rating scale Scoring:

Each item is scored on a scale of 0 (not present) to 4 (severe), with a total score range of 0-56, where <17 indicates mild severity, 15-24 mild to moderate severity and 25-30 moderate to severe.

O = Not present.

1 = Mild.

2 = Moderate.

3 =Severe.

4 =Very severe.

4. Results of the Study

PART-I: Description of sample with their socio demographic variables.

The Percentage wise distribution of samples according their age wise depicts that, majority of children 36 % were belonging to 12-13 years of age, 25% of them were belonging to 10-11 years of age, and 36% of them were belonging to 14-15 years of age. The percentage wise distribution of samples according

Table 1 Hamilton anxiety rating scale

S. No.	Assessment Questions	0	1	2	3	4
1	Anxious mood.					
	Worries, anticipation of the worst, fearful anticipation, irritability.					
2	Tension.					
	Feeling of tension, fatigability, startle response, moved to tears easily, trembling, feeling of restlessness, inability to relax.					
3	Fear.					
	Of dark, of strangers, of being left alone, of animals, of traffic, of crowds.					
4	Difficulty in falling asleep, broken sleep, unsatisfying sleep and fatigue on waking, dreams, night terrors.					
5	Intellectual.					
	Difficulty in concentration, poor memory.					
	Depressed.					
6	Loss of interest, loss of pleasure in hobbies, depression,					
	Early waking, diurnal swing.					
7	Somatic (muscular).					
	Pains and aches, twitching, stiffness, myoclonic jerks, grinding of teeth, unsteady voice, increased muscle tone.					
8	Somatic (sensory).					
	Tinnitus, blurring of vision, hot and cold flushes, feelings of weakness, pricking sensation.					
9	Cardiovascular symptoms.					
40	Tachycardia, palpitations, pain in chest, throbbing of vessels, fainting feelings, missing beat.					
10	Respiratory symptoms.					
	Pressure or constrictions in chest, choking feelings, sighing, dyspnoea.					
11	Gastrointestinal symptoms.					
	Difficulty in swallowing, wind abdominal pain, burning sensations, abdominal fullness, nausea, vomiting, borborygrni,					
	looseness of bowels, loss of weight, Constipation.					
12	Genitourinary symptoms.					
12	Frequency of rnicturition, urgency of micturition, amenorrhea, menorrhagia, development of frigidity, premature ejaculation,					
	loss of libido, impotence.					
13	Autonomic symptoms.					
13	Dry mouth, flushing, pallor, tendency to sweating, giddiness, tension, headache, raising of hair.					
14	Behavior at interview.					-
14	Fidgeting, restlessness or pacing, tremors of hands, furrowed brow, strained face, sighing or rapid respiration, facial pallor,					
	swallowing, etc.					
	5mo., mg, e.e.					

to their gender reveals that out of 50 children, highest percentage (62%) Children were male and lowest percentage (38%) of the children was female. It reveals that majority y of children under the study were male. The percentage wise distribution of samples according to their studying in class shows that the 5th class children were 14 (28%), 6th class children were 18 (36%), 7th class children were 13 (26%) and 8th class children were 5 (10%). The percentage wise distribution of samples according to their duration of stay in hospital. The 10 (20%) children were stayed one day, 12 (24%) children stayed two days, 9 (18%) children stayed Three days, 5 (10%) children stayed Four days, and 14 (28%) children stayed more than four days. The percentage wise distribution of samples according to their Religion illustrates that, majority of children were Hindu that is 37 (74%), Muslims children were 8(I 6%), Christian children were 5 (10%) and none of the children belongs to other religion. The percentage wise distribution of samples according to t heir type of family illustrates that, highest number of children were belongs to Nuclear family (58%) and from joint family children were 42% had none of the hospitalized children belongs to extended family. The percentage wise distribution of samples according to their monthly family income shows that major it y of samples were having monthly family income (20%) below 5000, (18%) of samples were having family income between 5,001 to 10,000, (32°/c) of samples were having 10,001 to 15,000 and samples are family income i.e. (30%) were having income above 150001.

PART-II: Assessment of level of anxiety among hospitalized children.

Assessment of levels of anxiety among children during pre test reveals that, the majority of children 23 (46%) had extremely severe anxiety, 22 (44%) percent of them had moderate to severe anxiety; And 05 (10%) had mild to moderate severity. None of the children were having Mild severity anxiety level.

Assessment of levels of anxiety among children during post test reveals that, the majority of children 41 (82%) had mild severity anxiety, 09 (18%) percent of hospitalized children had mild to moderate severe anxiety: None of the children were having extremely severe anxiety, moderate to severe, no any anxiety level.

PART-III: Assessment of effectiveness of Bibliotherapy by comparing pretest and posttest

Level of anxiety scores among hospitalized children: Table 2

Assessment of effectiveness of Bibliotherapy by com paring pretest and post test level of anxiety scores among hospitalized children (N=50)

Level of	Pre-test (O1)		Post-test (Or)		
anxiety	No. of	Percentage	No. of	Percentage	
scores	respondents		respondents		
Extremely	23	46 %	00	00%	
Severe					
anxiety					
Moderate to	22	44%	00	00 %	
severe					
Mild to	5	10%	09	18%	
moderate					
Mild severity	00	00%	41	82%	
Not present	00	00%	00%	00%	

Comparison of levels of anxiety among children in pre test and post test reveals the following results. In pre-test, out of 50 hospitalized children during pre test reveals that, the majority of children 23 (46%) had extremely severe anxiety, 22 (44%) percent of them had moderate to severe anxiety and 5(10*/c) percent of children were having Mild to moderate anxiety; none of children were having Mild severity anxiety level. Post test data reveals that, the majority of children 41(82%) had mild severity anxiety, 9 (I 8%) percent of them had mild to moderate anxiety; none of the children were having very severe anxiety, moderate to severe anxiety.

However, after administration of Bibliotherapy there was reduction in the level of anxiety scores in posttest among hospitalized children. Study proved that Bibliotherapy is effective in reducing the level of anxiety.

Part-VI: Association of the level of anxiety scores among hospitalized children with their selected socio-demographic variables

Chi-square test is used to find the association between post test level of anxiety scores of children and selected sociodemographic variables. The finding regarding association of the post test level of anxiety scores of children with their selected socio-demographic variables shows that, there was no significant association found between level of anxiety scores of children with their other demographic variables like age, gender, Religion, studying in class, Duration of stay in hospital, Type of family and family income (Table 2).

Chi-square value 3.84 is less than the table value Hence research hypothesis was rejected and null hypothesis was accepted.

Table 3 Association of the level of anxiety scores among hospitalized children with their selected socio-demographic variables (N=50)

S. No.	Socio- demographic variables	Df	Chi- square value	Table Value	Level of significance
1	Age	1	0.0003	3.84	NS
2	Sex	1	0.67	3.84	NS
3	Religion	1	0.13	3.84	NS
4	Studying in class	1	0.049	3.84	NS
5	Duration of stay in hospital	1	0.076	3.84	NS
6	Type of family	1	0.28	3.84	NS
7	Monthly income of family	1	0.41	3.84	NS

NS=Not significant

5. Discussion

After reviewing many studies related to hospitalized anxiety among children in India and Abroad it has immensely influenced rue to take up the present study, the research studies influenced me to conduct this present study are as follows.

An experimental study was conducted in Pune city to assess and compare the level of anxiety before and after story narration and to associate the level of anxiety with selected demographic variables. This study based on pre-experimental one group pretest, posttest research design.100 samples were selected by non-probability purposive sampling technique. Modified Spence children anxiety scale was used. In this the study results

revealed the average anxiety score 69.6 with standard deviation of 17.2 before story narration and average score 37.9 with standard deviation of 8.3 were found after story narration. Tvalue corresponding to this comparison were 14.5 at 99 degree of freedom. Corresponding table valued were 2.05, the null hypothesis was rejected. Average anxiety level before story narration was 69.6 which decreased to 37.9 after the story narration therapy. This study concludes that the story narration therapy was effective in reducing the level of anxiety among hospitalized children [6].

A quasi-experimental study was conducted in Mangalore to assess the effectiveness of bibliotherapy for stress reduction among Hansen's disease patients. Data was collected from 40 patients using self-structured stress rating scale. Study results shown that there is a highly significant difference in the stress score in the experimental group after the intervention. Study concluded that bibliotherapy was very effective in preventing the psychiatric morbidity in the client with Hansen's disease [7].

A comparative stud y was conducted in Jodhpur to find out the gender differences in incidence and intensity of academic Anxiety among adolescents Data was collected from 240 adolescent aged 16 to 18 year y using self-constructed adolescent problem Inventory. Study results revealed that 66.1% of girls had test anxiety when compared with 33.9% of boys. Study concluded at girls on the whole had incidences and intensity of academic anxiety in comparison to boys.

6. Conclusion

From the result of the study, it was concluded that bibliotherapy was effective in reducing the level of anxiety among hospitalized children. The bibliotherapy was cost effective it can be done at any time. The hospitalized children also feel comfort while providing bibliotherapy.

7. Recommendations

A bibliotherapy is necessary for these children to reduce the hospitalized anxiety y among hospitalized children.

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