

THE RELATIONSHIP BETWEEN PARENTS' SUPPORT WITH THE COOPERATIVE LEVEL OF PRESCHOOL AGED (3-6 YEARS) WHEN MEDICAL AND NURSING PROCEDURES PERFORMED IN MAHONI ROOM VITA INSANI HOSPITAL PEMATANGSIANTAR

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ABSTRACT

Children perceive hospitalization as an event that can be stressful. The main stressors in hospitalization are anxiety due to separation, loss of control, bodily injury and pain. The stressor will cause regression, refusing to cooperate or being uncooperative during the action. Cooperative or cooperation is a joint effort between individuals or groups of people to achieve one or several common goals. Parental support is the attitude, action, and acceptance of the family towards sick sufferers. The aim of the study was to determine the relationship between parental support and the cooperative level of preschool-aged children when medical and nursing procedures were carried out at the Trade Hospital of Simalungun Regency. This type of research is an analytic survey with a cross-sectional design and a qualitative approach. Sampling technique with accidental sampling. The sample is parents with preschool age children at the Trading Hospital with a total of 40 respondents. The data were analyzed using the Kendall Tau statistical test with a significance level of 95% and $p (a < 0.05)$. The results of 40 respondents showed that 62.5% provided parental support in the good category and from 40 preschoolers, 40% showed a cooperative level in the less category. The Kendall Tau test results obtained $p = 0.021 (a < 0.05)$, with a contingency coefficient value of 0.355. There is a relationship between parental support and the cooperative level of preschool-age children when medical and nursing procedures are carried out at the Trade Hospital in Simalungun Regency.

Keywords: *Parental Support, Cooperative Level, Preschool Children, Procedures, Medical and Nursing.*

1. INTRODUCTION

Children are unique individuals and have needs according to their stage of development. Children have various needs that are different from one another according to the age of growth and development (Hidayat, 2008). To achieve healthy growth and development of children, they must be raised and cared for with full responsibility (RI Law 36, 2009).

Children are individuals aged 0-18 years, who are in the process of growing up and have specific needs (physical, psychological, social and spiritual) that are different from adults, if these needs are met then the child will be able to adapt and maintain his health. , whereas if the child is sick it will affect the growth and development of physical, psychological, intellectual, social, and spiritual (Supartini, 2014) Healthy and sick is a range that can be experienced by all humans, including children. Children who are sick and have to be hospitalized will experience a difficult time because they cannot carry out their usual habits, being treated is a major source of stress and disappointment, including separation anxiety (Nelson, 2002). Hospitalized children have increased rapidly in the last two decades. The presentation of children who are hospitalized experience more serious and complex problems compared to hospitalization in previous years (Wong et.al., 2017).

Hospitalization is a condition that causes children to be hospitalized both planned and in emergency conditions to undergo a process of care and treatment until they return home (Supartini, 2014). Children perceive hospitalization as an event that can be stressful. Stressors that children

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receive while being treated can be in the form of a foreign hospital environment, physical conditions such as pain and illnesses that children experience, treatment procedures and medical examinations at the hospital (Kazemi et.al., 2012). The main stressors in hospitalization are anxiety because of separation, loss of control, bodily injury and pain (Wong et.al., 2017).

The impact of separation from parents, children will experience psychological disorders such as anxiety, fear, lack of affection, so that these disorders will hinder the child's healing process and can interfere with their growth and development (Hidayat, 2008). Procedural pain is an unpleasant sensory and emotional experience produced by an action or activity directed at or performed on an individual with the aim of improving health, treating illness or injury, or making a diagnosis (Ortiz et.al., 2012).

According to Herliyanti's research (2015) concerning the relationship between family support and the cooperative level of preschool-aged children, the results showed that 13 respondents 61.5% provided family support in the good category and from 13 preschool-aged children 84.6% showed a cooperative level in the less category. Based on research by Handayani & Puspitasari (2008) concerning the effect of play therapy and parental support on cooperative levels during treatment in preschool-aged children (3-5 years) behavior improvement based on parental support shows the result that children experience the highest increase in cooperative behavior in children. The number of children awaited by their parents before being given good treatment was 1 child and after being given treatment there were 28 children.

Chen (2015) said that the form of parental participation while children are hospitalized is by establishing collaboration between parents and health professionals and the presence of parents who can make children feel comfortable. The form of collaboration between parents and health professionals is realized by involving parents in care, providing emotional support to children, being involved in simple actions, explaining to children about the child's condition and meeting children's needs while being treated.

Based on the background that has been prepared, the researcher is interested in conducting research on the relationship between parental support and the cooperative level of preschool-age children (3-6 years) when medical and nursing procedures are carried out.

1.1. Formulation of the problem

Based on the description in the background above, the formulation of the problem in this study is how is the relationship between parental support and the cooperative level of preschool-age children when the procedure is carried out

2. RESEARCH METHODS

2.1. Research design

The type of research used was an analytical survey, that is, the researcher did not intervene in the research subjects and did not apply to all the objects studied or the population, but only took a portion of the population (Notoatmodjo, 2012).

The research uses a cross-sectional research design, namely the type of research that emphasizes the time of measurement or observation of independent variable data, namely parental support, and the dependent variable, namely the cooperative level of preschool-age children, only once at a time (Nursalam, 2013).

2.2. Research sites

The research location is the place used for data collection during the case. This research was conducted in the Mahoni Room of Vita Insani Hospital, Pematangsiantar City.

2.3. Research time

Research time is the period of time needed by researchers to obtain research data carried out. This research was conducted in July 2019.

2.4. Population

The population is the entire object of research or the object under study (Notoatmodjo, 2012). Furthermore, the population in this study were all children aged 3-6 years who were in the Mahoni room at Vita Insani Hospital. The total population in 2018 was 892, while children aged 3-6 years in April-June 2018 had 131 children.

2.5. Research Sample

The sample is the object being studied and is considered to represent the entire population (Notoatmodjo, 2012). The sample is part of the population to be studied or part of the total characteristics possessed by the population (Hidayat, 2017). The sample in this study were preschool-age children (3-6 years) according to the inclusion criteria in the Mahoni room at Vita Insani Hospital. The sampling technique used in this study was purposive sampling with sample criteria (Notoatmodjo, 2012).

2.5. Method of collecting data

Data collection is a process of approaching the subject and the process of collecting subject characteristics needed in a study (Nursalam, 2013). Data collection by taking primary data, namely by direct observation of the cooperative level of preschool age children when medical and nursing procedures are carried out. Observation is a measuring tool by providing direct observations to respondents who are carried out by researchers to look for changes or things to be studied (Hidayat, 2017). The method used to collect data on the characteristics of parental support is a questionnaire with informative support indicators, emotional attention, instrumental assistance and assessment assistance.

3. RESULTS AND DISCUSSION

3.1. Child Cooperative Level

research in the Mahoni room of Vita Isani Hospital showed that of the 40 respondents in this study most of the preschool age children had a less cooperative level of 16 people (40.0%). This is in accordance with the research by Handayani & Puspitasari (2008) where respondents who had a less cooperative level before being given play therapy were 3.22%, after being given play therapy the respondents had a good cooperative level of 87.09%. Whereas in Herliyanti's research (2005) out of 13 preschool age children, the cooperative level was in the less category of 84.6%.

One of the effects of hospitalization is the emergence of fear. Fear arises from a foreign environment and unfamiliar people, and procedures during treatment. Nursing actions that are carried out without going through an approach can cause fear in children which in turn becomes psychological trauma which will affect the child's further development. When providing care, nurses need the cooperation of children and families. This is usually not too difficult in older children but can be a problem in younger children (Santrock, 2007).

3.2. The Relationship between Parental Support and the Cooperative Level of Preschoolers in Medical and Nursing Procedures

Statistical test results obtained $P\text{value} = 0.021$ ($\alpha = 0.05$), with a significance of 5% 0.05. Because the $p\text{ value} < 0.05$, H_0 is rejected and a contingency coefficient value of 0.355 is obtained. According to Sugiyono (2010) these results mean that there is a correlation between parental support and the child's cooperative level. The correlation coefficient (r) gives a positive result of 0.355 between parental support and children's cooperative level. This shows that the better the parental support given, the better the child's cooperative level when medical and nursing procedures are carried out. If the correlation coefficient is between 0.20-0.399 then the relationship between the two variables is low,

In the research, the highest proportion of cooperative level is the less cooperative level of 40%. Meanwhile, parental support provided was in the good category at 62.5%. According to Wong et.al (2009) children's reactions to illness and hospitalization are influenced by their developmental age, their previous experiences with illness, separation or hospitalization, the coping

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skills they have and acquired, the severity of the diagnosis or disease and the existing support systems. Meanwhile, family support is one of the factors that can help children cope with stressors.

4.CONCLUSION

Based on the results of this study, it can be concluded several things as follows:

1. Shows the characteristics of respondents of preschool age children of 72.5% aged 3-4 years with 57.5% being female and 52.5% of children having been treated in the Mahogany room of RS Vita Insani Pematangsiantar.
2. 40% of children have a less cooperative level when medical and nursing procedures are carried out in the mahogany room of Vita Insani Pematangsiantar Hospital, and based on the characteristics of the respondents the children who have a less cooperative level are children aged 3-4 years, male sex, with nursing actions giving intravenous drugs, have experience of being treated for 1-3 days long and the waiting parents are mothers.
3. Shows 62.5% good parental support when the child is treated in the Mahoni room of the Vita Insani Hospital Pematangsiantar, and based on the characteristics of the respondents parents who provide support in the good category are parents aged 20-30 years, with a high school education level and have self-employed jobs .
4. There is a significant relationship between parental support and the cooperative level of preschool-age children when medical and nursing procedures are carried out in the Mahoni room of the Vita Insani Hospital Pematangsiantar.

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