

Original Research/Systematic Review

The Effect of Storytelling with Audiovisual Books on Children's Anxiety Levels During Hospitalization**M. Fauzan Razuli¹, Yunike², Jawiah³**¹²³Poltekkes Kemenkes Palembang, South Sumatera, Indonesia**ABSTRACT**

Background: Children with typhoid fever who undergo treatment in the hospital (hospitalization) tend to experience stress due to changes in the environment and health status they experience which will risk disrupting the healing process. The role of nurses in providing nursing care has a role in controlling this anxiety by providing diversion activities with audio-visual storybook media. The purpose of the diversion activity is to shift the focus of children who previously felt anxious due to the situation in the hospital to be reduced due to a diversion activity with audio-visual storybook media that makes children more happy and entertained.

Methods: This research is a case study research using a descriptive design with a nursing care process approach consisting of assessment, nursing diagnoses, nursing interventions, nursing evaluation, and nursing documentation. Case study subjects in this study were 2 cases of Typhoid Fever with Anxiety nursing problems at Siti Fatimah Hospital, South Sumatra Province in 2024.

Results: the results of the case study after the implementation of nursing to reduce anxiety levels in children with typhoid fever with audio-visual storybook media showed the results of patient 1 and patient 2 found that the level of anxiety decreased. As for what is obtained, there is a significant relationship between Anxiety and the provision of diversion activities with audio storybook media in children with Typhoid Fever.

Conclusion : Nursing implementation to reduce anxiety levels in children with typhoid fever with audio-visual storybook media with Anxiety problems can be applied because it is effective for reducing anxiety in children.

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<https://doi.org/10.70920/jahns.v1i1.159>**INTRODUCTION**

Typhoid fever is a public health issue that requires significant attention. According to data from the World Health Organization (WHO, 2018), there are 11 to 21 million cases of typhoid fever globally each year, with approximately 128,000 to 161,000 deaths annually across all age groups. Internationally, typhoid fever remains a global health problem, with the majority of cases occurring in South Asia, Southeast Asia, and Africa.

For children with typhoid fever, hospitalization is crucial for intensive treatment and to prevent more severe risks that could result in death (WHO, 2018). A study conducted by Astuti & Faiqoh (2021) revealed that the percentage of children requiring hospitalization due to typhoid fever includes 52.38% of preschool-aged children (3–6 years) and 47.62% of school-aged children (7–11 years). The effects of hospitalization, according to Sari & Batubara (2020), include the common response of separation anxiety in preschool-aged children (3–6 years), a form of anxiety caused by separation. To reduce the impact of hospitalization on children during their treatment, it is essential to provide a medium that allows children to express their anxiety.

One of the three therapies to alleviate the effects of hospitalization, such as anxiety, is storytelling therapy. This therapy can build trust, foster relationships, and convey knowledge (Sari & Batubara, 2020). Storytelling therapy—reading illustrated storybooks or fairy tale books—is an effective way to relieve hospitalization-related anxiety in children. The nursing implementation of case study interventions involves distraction activities (storytelling) using media such as fairy tale books, puppet hats, and milk boxes for the patients (Jawiah et al., 2021).

Research conducted by Susanti & Safitri (2017) on the effect of storytelling on hospitalization-related anxiety levels in preschool-aged children at RSUP Dr. M. Jamil Padang showed varying levels of anxiety among hospitalized children. Before the intervention, 21 children (56.4%) experienced moderate anxiety, 11 children (28.2%) experienced mild anxiety, and 6 children (15.4%) experienced severe anxiety. After the implementation of storytelling therapy, 21 children (53.8%) had mild anxiety, 14 children (35.9%) experienced no anxiety, 4 children (10.3%) were anxiety-free, and no cases of severe anxiety were reported.

Similarly, Larasaty (2020) demonstrated that, prior to the implementation of storytelling therapy, most children experienced severe anxiety (15 children, 50.0%), followed by moderate anxiety (11 children, 36.7%) and extreme anxiety (4 children, 13.3%). After the intervention, anxiety levels significantly decreased, with the majority of children falling into the no-anxiety category (16 children, 53.3%), followed by mild anxiety (10 children, 33.3%), moderate anxiety (3 children, 10.0%), and severe anxiety (1 child, 3.3%).

MATERIALS AND METHOD

This research used a descriptive design with a case study method. It is an observational case study in which the researchers actively participated by conducting storytelling sessions and providing nursing care to two participants diagnosed with typhoid fever and experiencing hospitalization-related anxiety at RSUD Siti Fatimah Palembang. The study was conducted from April 1 to April 3, 2024, and from April 4 to April 6, 2024. Data collection involved observation and interviews, and the researchers utilized a child assessment instrument and the SLKI checklist to evaluate the patients' responses.

RESULTS

Nursing care was provided to Patient N (5 years old) with Typhoid Fever and Patient I (5 years old) with Typhoid Fever through the processes of assessment, nursing diagnosis determination, intervention, implementation, and evaluation. The assessment was conducted through a review of medical history using interviews and a head-to-toe physical examination, resulting in the following nursing data:

Case 1 (Patient 1) : Upon admission, the patient's father reported that the fever had persisted for 5 days, with fluctuations in temperature, abdominal pain, a bitter taste in the mouth and tongue, reduced appetite, body weakness, and headaches. During the assessment, the patient had a fever with a temperature of 38°C, a pulse rate of 96 beats per minute, a respiratory rate of 24 breaths per minute, and appeared pale. Based on the medical diagnosis, the patient was diagnosed with Typhoid Fever.

Case 2 (Patient 2) : Upon admission, the patient's mother reported that the fever had lasted approximately one week, with fluctuations in temperature, reduced appetite, abdominal pain, fatigue, body weakness, frequent nausea, and headaches. During the assessment, the patient had a fever with a temperature of 38.5°C, a pulse rate of 89 beats per minute, a respiratory rate of 21 breaths per minute, and appeared pale. Based on the medical diagnosis, the patient was diagnosed with Typhoid Fever.

The primary nursing diagnosis for Patient 1 and Patient 2 is Anxiety related to situational crisis, as evidenced by the child appearing restless, tense, having difficulty sleeping, feeling confused, worrying about their condition, and struggling to concentrate. According to the SIKI DPP PPNI Work Team (2018), nursing interventions for patients with diarrhea experiencing anxiety due to hospitalization involve Anxiety Reduction, which includes observation, therapeutic measures, education, and collaboration. Observation: Identify the level of anxiety using the SLKI checklist. Therapeutic Measures: Create a therapeutic environment to build trust and encourage the family to stay with the patient. Education: Conduct distraction activities such as storytelling using audio-visual storybooks. Collaboration: Collaborate as needed for effective care. The selected anxiety reduction interventions are tailored to the patient's needs and are expected to achieve the desired outcomes.

The researcher assessed the patients' anxiety levels using the SLKI checklist. Day 1 Patient 1 the patient's anxiety level was Moderate. Patient 2 the patient's anxiety level was Slightly Elevated. Day 2 after implementing the nursing interventions for both patients, the anxiety levels were reassessed using the SLKI checklist. Patient 1 the patient's anxiety level was Slightly Reduced. Patient 2 the patient's anxiety level was Moderate. Day 3 anxiety levels were measured again patient 1 the patient's anxiety level was Reduced. Patient 2 the patient's anxiety level was Slightly Reduced.

After implementing nursing care over three days, the researcher concluded that the nursing problem was fully resolved. The final evaluation results are as follows: Patient 1 : A decrease in anxiety scores was observed after the nursing intervention involving storytelling activities with audiovisual storybooks was conducted over three consecutive days. Day 1 the patient's anxiety level was Moderate. Day 2 following the storytelling activity, the patient's anxiety level became Slightly Reduced. Day 3 the patient's anxiety level further decreased to Reduced.

Patient 2: A decrease in anxiety scores was also observed after the same nursing intervention. Day 1 the patient's anxiety level was Slightly Elevated. Day 2 after the intervention, the patient's anxiety level improved to Moderate. Day 3 the patient's anxiety level decreased to Slightly Reduced. The researcher inferred that: Patient 1, who initially experienced Moderate Anxiety, gradually improved to Reduced Anxiety. Patient 2, who initially experienced Slightly Elevated Anxiety, gradually improved to Slightly Reduced Anxiety.

Table 1. Evaluation of Anxiety Reduction in Subjects Before and After the Implementation of Storytelling Diversion Activities Using Audiovisual Storybooks

Patient 1			Patient 2		
Day 1 (April 1, 2024)	Day 2 (April 2, 2024)	Day 3 (April 3, 2024)	Day 1 (April 1, 2024)	Day 2 (April 2, 2024)	Day 3 (April 3, 2024)
Anxiety Condition: Moderate	Anxiety Condition: Somewhat Decreased	Anxiety Condition: Decreased	Anxiety Condition: Somewhat Increased	Anxiety Condition: Moderate	Anxiety Condition: Somewhat Decreased

DISCUSSION

Description of Nursing Implementation Reducing Anxiety Levels in Children with Typhoid Fever Using Audio-Visual Storybook Media

Identification and Evaluation of Anxiety Levels Before and After Implementation, At this stage, the researcher identified anxiety levels before implementing the intervention on the patients. The findings are as follows: Patient 1, session 1 before the implementation, the SLKI Checklist results indicated a condition of moderate anxiety. Session 2 before the implementation, the SLKI Checklist results still indicated a condition of moderate anxiety. Session 3 before the implementation, the SLKI Checklist results showed a condition of somewhat decreased anxiety. Patient 2 session 1 before the implementation, the SLKI Checklist results indicated a condition of somewhat increased anxiety. Session 2 before the implementation, the SLKI Checklist results still indicated a condition of somewhat increased anxiety. Session 3 before the implementation, the SLKI Checklist results showed a condition of moderate anxiety.

The next stage, after the researcher implemented the intervention with both patients, involved evaluating anxiety levels using the SLKI Checklist. The results are as follows: Patient 1 session 1 after the implementation, the SLKI Checklist results showed a condition of moderate anxiety. Session 2 after the implementation, the SLKI Checklist results indicated a condition of somewhat decreased anxiety. Session 3 after the implementation, the SLKI Checklist results showed a condition of decreased anxiety. Patient 2 session 1 after the implementation, the SLKI Checklist results showed a condition of somewhat increased anxiety. Session 2 after the implementation, the SLKI Checklist results indicated a condition of moderate anxiety. Session 3 after the implementation, the SLKI Checklist results showed a condition of somewhat decreased anxiety. Thus, it can be concluded that after observing anxiety levels over three sessions following the intervention, both patients demonstrated a reduction in anxiety levels. This indicates that the expected outcomes were successfully achieved.

It was also proven in the study by Larasaty (2020) that prior to the implementation of distraction activities through storytelling therapy, the majority of participants fell into the severe anxiety category, with 15 children (50.0%). Additionally, 11 children (36.7%) experienced moderate anxiety, and 4 children (13.3%) were in the extreme anxiety category. After the storytelling therapy was conducted, a decrease in anxiety levels was observed. The majority of children were categorized as not anxious, with 16 children (53.3%). Moreover, 10 children (33.3%) fell into the mild anxiety category, 3 children (10.0%) experienced moderate anxiety, and only 1 child (3.3%) remained in the severe anxiety category.

Creating a Therapeutic Environment to Build Trust

Before implementing the intervention, the researcher created a therapeutic environment for Patients 1 and 2 by first building mutual trust. The researcher asked

questions about the patient's name, age, hobbies, or favorite activities. On the first day of the assessment, Patient 1 appeared confused when the researcher arrived and seemed worried. Patient 2 cried at first, feeling scared of the researcher's arrival, and also appeared confused. On the second day, Patient 1 still seemed confused when the researcher arrived. However, the patient began to make eye contact with the researcher. Patient 2 also seemed confused when the researcher arrived but frequently looked at their mother rather than the researcher. The patient's pale complexion had improved.

On the third day, Patient 1 appeared calmer and smiled when the researcher arrived. The patient no longer seemed worried, as evidenced by making eye contact with the researcher. Patient 2 also showed no signs of confusion when the researcher arrived and no longer appeared worried, as evidenced by making eye contact with the researcher. According to Yustiari et al. (2021), therapeutic communication with children is a vital part of building mutual trust between the nurse and the child.

Encourage Families to Stay Together

Researchers recommend that parents of patients always accompany their children to prevent feelings of loneliness during hospitalization. During the implementation of distraction activities for Patient 1 and Patient 2, both parents were present to support their children. Patient 1 was consistently accompanied by his father, while Patient 2 was always accompanied by her mother, which helped alleviate their anxiety levels.

According to Suari and Imelda (2019), parental accompaniment during a child's hospitalization can minimize the child's anxiety levels. Similarly, research by Hidayati et al. (2021) highlights that the role of family and the environment significantly influences the healing process and therapeutic actions. The presence of parents is essential to ensure the child feels safe and comfortable. In line with the findings of these studies and the implementation of the recommended intervention, researchers assume that one of the factors contributing to the reduction in patient anxiety levels is the consistent presence of parents accompanying their children.

Providing Distraction Activities Using Audio-Visual Storybooks

On the first day of distraction activities, the intervention was implemented after assessing the anxiety levels of both patients. The activity lasted approximately 10 minutes. Prior to the intervention, the researcher obtained informed consent from the patients' parents to proceed with the distraction activity using an audio-visual storybook as the medium. The researcher prepared the audio-visual storybook and engaged the patients by reading the story aloud while involving them in the activity, such as reading along and pressing buttons on the book to produce sounds.

Patient 1 exhibited Moderate Anxiety during the first session, while Patient 2 showed a Noticeably Increased Anxiety condition. This revealed a difference in the anxiety levels between the two patients. Patient 2 experienced higher anxiety compared to Patient 1, likely due to their differing hospitalization experiences. Patient 1 had previously been hospitalized once, while it was Patient 2's first hospitalization. This aligns with research by Suari and Imelda (2019), which states that children without prior hospitalization experiences tend to experience severe hospitalization stress due to the unfamiliarity of treatments and physical discomfort, causing additional distress.

After implementing the intervention over three sessions, the researcher concluded that the distraction activity using the audio-visual storybook effectively managed the anxiety levels of both patients. Initially, the patients struggled to build trust with the researcher. However, with the support of their parents, they gradually exhibited positive responses. Patient 1, who initially experienced Moderate Anxiety, showed a gradual

decrease to Lower Anxiety levels. Similarly, Patient 2 experienced a reduction in anxiety from Noticeably Increased Anxiety to Noticeably Lower Anxiety.

CONCLUSION

Typhoid fever, caused by Salmonella Typhi, infects the digestive tract through contaminated food or water. It requires hospitalization and invasive procedures to prevent complications. Children often experience stress due to hospitalization, impacting recovery. To alleviate this, a researcher implemented audio-visual storybooks as distraction activities, reducing anxiety in hospitalized children. Following the intervention, Patient 1 showed a decrease in anxiety, and Patient 2 experienced a gradual reduction in anxiety. Based on these findings, the author recommends using audio-visual storybooks for reducing anxiety in children. Hospitals, particularly RSUD Siti Fatimah, should adopt this approach to enhance nursing care and support recovery. Conclusion : Nursing implementation to reduce anxiety levels in children with typhoid fever with audio-visual storybook media with Anxiety problems can be applied because it is effective for reducing anxiety in children.

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