

Assessment of Play Therapy Services Available to Children Under Five Years in Hospitals in Plateau State

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ABSTRACT

This study investigated the availability play therapy services in promoting nurturing care of early child development of under-five children visiting hospitals in Plateau state. The population for the study included all secondary and tertiary hospitals available in Plateau state. Stratified sampling was used to select hospitals each from the three geo political zones in Plateau State. Two local governments were selected from the three zones in the state. The descriptive survey design was used for the study. The instrument Childhood Hospital Play Services Assessment Scale was used. Reliability coefficient was determined to be 0.89. Data was collected over a period of six weeks. Two research assistants were used for the study. Data collected was analysed and results of the findings showed that few hospitals have play therapy service for children under age five in Plateau. Also, hospitals were found to face challenges lack of funds spaces and personnel to handle play therapy for children. It was also discovered that rural hospitals had fewer play therapy services compared to urban hospitals. It was recommended amongst others that Plateau State hospitals should prioritize awareness campaigns to educate healthcare professionals, parents, and the community about the importance and benefits of play therapy for children's development, for children under five years.

INTRODUCTION

Reports by national and international stake holders about the general wellbeing of the Nigerian child continues to show worrisome trends. For instance, a situation analysis report by UNICEF regarding child-relevant national development challenges in Nigeria identified: poverty, child labour, child marriage, geographic disparities in child deprivations, children with disability, kidnapping and displacement of school children amongst other factors (UNICEF, 2024). Also a multidimensional childhood poverty report study shows that Nigerian children faced poverty across the 7 dimensions of child rights based on the UN criteria. A child is considered as multidimensional poor if (s)he is deprived in at least 3 dimensions at the same time based on the dimensions, indicators and deprivation threshold. These situations are pointers to the challenging environment the Nigerian child passes through every day. It is important that efforts are made to provide optimal growth conditions such as incorporating play therapy childhood programmes.

Recently, play therapy has gained attention and is considered central to improvement of child's health, cognitive, motor, linguistic, emotional and social development. Play is crucial for children's creativity, exploration, physical skills, self-regulation, interpersonal development and social learning. For instance, play therapy is widely used to treat children's emotional and behavioural problems because of its responsiveness to their unique and varied developmental needs. Unlike adults who communicate naturally through words, children more naturally express themselves through the concrete world of play and activity. Play therapy is used as the means for communication between the child and the therapist on the assumption that children will use play materials to directly or symbolically act out feelings, thoughts, and experiences that they are not able to meaningfully express through words (Axline, 2017).

Play allows children to bridge the chasm between their experiences and understanding, thereby providing the means for insight, learning, problem solving, coping, and mastery. Although child therapists have used this

treatment with their young clients since the early 1900s, the formation of the Association for Play Therapy (APT) in 1982 established play therapy as a specialized treatment modality within the field of mental health. The APT's influence, along with the development of university- based play therapy training programs and the considerable publishing efforts of dedicated leaders, provided the impetus for the rapid growth and development of the field over the last 20 years. Today, play therapy is widely used among clinicians to treat a wide range of emotional and behavioural problems (Bratton & Ray, 2010). The unanswered questions remains what is that status of play therapy services availability to children under five year in hospitals in Plateau state?

Hospitals are medical institutions which provide curative and preventive healthcare services to inpatients as well as outpatients. They have specialized departments that offer diagnosis and treatment for various illnesses. For example, according to Allen (2008), "hospitals are public or private non-profit organizations whose primary purpose is providing health care services including inpatient acute care services and other related outpatient programs". Similarly, Grady et al., (2018) define hospitals as places with 'organized facilities for delivery of professional medical quality service by qualified personnel possessing technical skill beyond that available from lay persons.

Hospital play therapy services available to children under five years facilitates emotional expression: Play therapy provides a non-threatening and safe environment for children to express their emotions through play (Kottman, 2011). Improves communication skills: Through play, children can develop their communication skills, including verbal and non-verbal communication (Landreth, 2012). Develops social skills: Play therapy helps children develop social skills such as taking turns, sharing, and cooperation with others (Ray, Bratton, Rhine, & Jones, 2017). Enhances creativity: Play therapy encourages children to use their imagination and creativity, which can help them develop problem-solving skills. Builds self-esteem: Play therapy can help children build self-esteem and confidence by providing them with a positive and supportive environment (Bratton, Ray, Rhine, & Jones, 2005). Helps with trauma: Play therapy can help children who have experienced trauma to process their emotions and cope with their experiences (Gil, 2016). Supports developmental growth: Play therapy can support children's developmental growth by promoting cognitive, emotional, and social development (Gaskin-Wasson, 2017). Hospital locations has been found to impact the type of services availability to patients. Ayuba and Wassh (2016) and Shemu et al (2022) observed that whereas urban hospitals have access to basic and medical facilities such as electricity, personnel, contraceptive services, hospital play services etc rural health facilities are challenged by the absence of such amenities. The problem is how are children under five being availed this benefit of play therapy in hospitals in Plateau state? It is at this backdrop that this study investigated play therapy services promoting nurturing care early child development available to under-five children visiting hospitals in Plateau state.

Purpose of the Study

The purpose of this study is to investigate play therapy services promoting nurturing care early child development available to under-five children visiting hospitals in Plateau state. It specifically seeks to:

1. Find out the locations of hospitals being investigated for provision of therapeutic play services promoting nurturing care to early child under-five children.
2. Investigate therapeutic play services promoting nurturing care services available to children under-five visiting hospitals in Plateau state.
3. Assess how private and public hospitals differ in the provision of therapeutic play services promoting nurturing care to early child under-five children visiting hospitals in Plateau state.
4. Find out the kinds of challenges which hospitals face in providing play therapy service to children under five years in Plateau State.
5. Find out possible solutions to the challenges of play therapy service available to children under five years in Plateau State Hospitals.
6. Investigate if rural and urban hospitals differ in provision of Play therapy services equipment in Plateau state.

Research Questions

1. What are the locations of hospitals being investigated for provision of play therapy services promoting nurturing care to early child under-five children?
2. To what extent are play therapy services promoting nurturing care services available to children under-five visiting hospitals in Plateau state?
3. To what extent do private and public hospitals differ in provision of play therapy services promoting nurturing care to early child under-five children visiting hospitals in Plateau state?
4. What kinds of challenges do hospitals face in providing play therapy services to children under five years in Plateau State?
5. What are the solutions to the challenges of play therapy services available to children under five years in Plateau State Hospitals?
6. To what extent do rural and urban hospitals differ in provision of Play therapy service equipment in Plateau state?

METHODOLOGY

A descriptive survey research design was used for this study. The population of the study comprises of children under the age of five who attend hospitals services in Plateau state. Simple random sampling was used to select hospital across the 17 LGAs in plateau state. The Instrument used for data collection was a Hospital Play Services Questionnaire (HPSQ). The questionnaire consisted of both close-ended and open-ended questions and was divided into three sections. The first section collected information on the demographic characteristics of the respondents including their age, sex, and level of education. The second section collected data on the availability and accessibility play therapy services in hospitals in Plateau State. The third section collected data on the quality play therapy services provided to children under the age of five in hospitals in Plateau State. Data Collection was carried out through the distribution of the questionnaire to parents and guardians of children visiting the facilities. The reliability of the questionnaire was established using the Cronbach alpha coefficient and had value 0.89 indicating that the questionnaire had high internal consistency and reliability. Data collected was analysed using simple percentage and mean.

RESULTS AND DISCUSSION

Research Question one:

What are the locations of hospitals being investigated for provision of therapeutic play services promoting nurturing care to early child under-five children?

Table 1: Location of Hospitals by Local Government Area

S/NO	Name of Hospital	Location	
1.	General Hospital Pankshin	Urban	
2.	General Hospital Mangu	Urban	
3.	Bene Clinic Shendam		Rural
4.	Divine Salus Clinic Pankshin	Urban	
5.	Sunnah Hospital, Jos North	Urban	
6.	Peter Bawa Memorial Hospital Qua'anpan		Rural
7.	Zenret Clinic Kurgwi, Qua'anpan		Rural

8.	COCIN PHC Kurgwi, Qua'anpan		Rural
9.	Hisham Clinic, Jos North	Urban	
10.	El-Mansur Clinic Jos, Jos North	Urban	
11.	PHC Kurgwi, Qua'anpan		Rural
12.	Cottage Hospital Kwalla, Qua'anpan		Rural
13.	Seyilnen Clinic, Pankshin		Rural
14.	May Hospital (Rintong Peter) Shendam	Urban	
15.	Nasrin Clinic and maternity	Urban	
16.	PSSH Jos, Jos North	Urban	
17.	General Hospital Shendam	Urban	
18.	Nanman Clinic Shendam		Rural
19.	PHC Clinic Gidan Adamu Shendam		Rural
20.	Memorial Medical Centre Pankshin	Urban	
21.	Primary Health Centre Pankshin	Urban	
	Total	11	10

Data on Table 2 showed the location of hospitals by local government, the result showed that 11 of the hospital are located in the urban part of the local government area while 10 hospitals are located in the rural part of the local government Area. This implies that there are more urban hospitals than rural.

Research Question 2: To what extent are play therapy services promoting nurturing care services available to children under-five visiting hospitals available in Plateau state?

Table 2: Mean Score of Play Therapy Services Availability to Children under five

Play Equipment	Available	Not Available	Mean Score
Bicycle	2	19	0.1
Teddy bears	18	3	0.85
See-saw	15	6	0.71
Boats	12	9	0.57
Balls	11	10	0.52
Merry go round	9	12	0.43
Ludo games	7	14	0.33

Building blocks	6	15	0.29
Others	2	19	0.1

Data on Table 2 indicate that mean score of 0.1 respondents shows that very few hospitals have bicycles available. Mean score of 0.85 indicate that teddy bears are the most commonly available play equipment. Mean score of 0.71 shows that see-saws are also relatively common in hospitals. Mean score of 0.57 indicate that boats are less common than teddy bears or see-saws, but still more common than some other items. Mean score of 0.52 indicate that balls are also relatively common in hospitals. Mean score of 0.43 shows that merry-go-rounds are less common than some other items, but still more common than others. Mean score of 0.33 shows that ludo games are less common than some other items. Mean score of 0.29 shows that building blocks are the least common play equipment in hospitals. While the mean score of 0.1 indicate that few hospitals have other play equipment, such as swings or slides. Therefore it is important for hospitals to have play therapy services equipment available for children, as it can help to reduce stress and anxiety, promote physical activity, and improve social skills. The type of play equipment that is available will vary depending on the size and resources of the hospital, but even simple items can make a big difference.

Research Question 3: To what extent do private and public hospitals differ in provision of play therapy services promoting nurturing care to early child under-five children visiting hospitals in Plateau state?

Table 3: Mean and standard deviation of Provision of Play therapy Private and public Hospitals

SN	Type of Hospital	N	Mean	SD
	Private	13	2.3	4.01
	Public	8	2.4	3.82

Data on Table 3 shows that private hospitals have a mean score of 2.3 while public hospitals have a mean score of 2.4 on provision of play therapy services. This implies that both had low provision of services.

Research Question 4: What kinds of challenges do hospitals face in providing play therapy service to children under five years in Plateau State?

To what extent do private and public hospitals differ in the provisions of play therapy services promoting nurturing care to early child under-five children visiting hospitals in Plateau state?

Table 4 : Mean Score of challenges faced by hospitals in providing Play therapy services

Type of Challenge	Number of respondents	Mean score
Lack of funding	4	2.00
Lack of space	2	1.00
Lack of staff	5	2.50
Lack of toys and equipment	2	1.00
Safety concerns	4	2.00
Lack of parent involvement	1	0.50

Lack of communication between staff and parents	1	0.50
Lack of a play therapist	2	1.00

Data on table 4 shows that the mean score for each challenge was calculated by dividing the number of respondents who cited the challenge by the total number of respondents. The challenges with the highest mean scores were lack of funding (2.00), lack of staff (2.50), and safety concerns (2.00). These challenges were cited by a significant number of respondents, and they are all likely to be significant barriers to starting and maintaining a play section for children in a hospital. The challenges with the lowest mean scores were lack of space (1.00), lack of toys and equipment (1.00), lack of parent involvement (0.50), and lack of communication between staff and parents (0.50). These challenges were cited by fewer respondents, and they may not be as significant as the challenges with the higher mean scores. Overall, the results of this survey suggest that the most significant challenges to starting and maintaining a play section for children in a hospital are lack of funding, lack of staff, and safety concerns. These challenges should be addressed in order to ensure that children have access to safe and stimulating play environments in the hospital setting.

Research Question 5: What are the solutions to the challenges of play therapy service available to children under five years in Plateau State Hospitals?

Table 5: Mean Score on Solutions for providing Hospital Play Therapy Services

Type of Solution	Number of Respondents	Mean Score
Provide more variety of toys and play materials	6	3.00
Create a more comfortable and inviting environment	5	2.50
Train staff on how to use play therapy techniques effectively	5	2.50
Offer play therapy sessions in a variety of settings	3	2.00
Collaborate with other professionals, to provide child therapy	2	1.50

Data on table 5 shows that the mean score of 3.00 respondents believe that having a wider variety of toys and play materials would make play therapy more engaging and effective for children. The mean score of 2.50 suggests that the respondents believe that the physical environment of the play therapy room can have a significant impact on the child's experience. Mean score of 2.00 suggests that the respondents believe that offering play therapy sessions in a variety of settings is not as important as the other responses. While the mean score of 1.50. This suggests that the respondents believe that collaborating with other professionals is not as important as the other responses. Overall, the respondents believe that the most important ways to enhance children's play therapy services are to provide more variety of toys and play materials, create a more comfortable and inviting environment, and train staff on how to use play therapy techniques effectively. These responses suggest that the respondents believe that the physical environment, the availability of toys and play materials, and the skills of the staff are all important factors in the success of play therapy.

Research Question 6: To what extent do urban and rural hospitals differ in play therapy services provisions in Plateau State?

Table 6

Location of Hospital	Number of Respondents	Mean Score
Urban	17	0.81
Rural	4	0.19

Data on table 6 indicates that the mean score of 0.81 indicates that the majority of urban respondents (17 out of 21) poses a paediatric section in their hospitals. This suggests that paediatric care is a priority for many hospitals, and that there is a demand for these services. The 4 hospitals who do not have a paediatric section may be located in rural areas or may not have the resources to provide these services.

DISCUSSION OF RESULTS

This research was carried for the assessment of play therapy service available to children under five years in hospitals in Plateau state. Findings in Table 1 indicates the location of hospitals by local government, the result showed that 11 of the hospital are located in the Urban part of the local government area while 10 hospitals are located in the rural part of the Local Government Area. This implies that hospitals are evenly distributed in rural and urban areas in Plateau state. This agrees with the findings of Shemu et al (2022) who asserted that hospitals are located in rural areas as well as urban centres, though the rural hospitals lack basic facilities for contraception and paediatric services. It is imperative that location should not limit under children access to hospital - based play therapies.

Another area investigated was access to play therapy materials. Results in Table 2 indicate that only few hospitals have play therapy equipment. For instance a mean score of 0.1 respondents shows that very few hospitals have bicycles available. Mean score of 0.85 indicate that teddy bears are the most commonly available play equipment. Mean score of 0.71 shows that see-saws are also relatively common in hospitals. Mean score of 0.57 indicate that boats are less common than teddy bears or see-saws, but still more common than some other items. Mean score of 0.52 indicate that balls are also relatively common in hospitals. Mean score of 0.43 shows that merry-go-rounds are less common than some other items, but still more common than others. Mean score of 0.33 shows that ludo games are less common than some other items. Mean score of 0.29 shows that building blocks are the least common play equipment in hospitals. While the mean score of 0.1 indicate that few hospitals have other play equipment, such as swings or slides. This result is in agreement Huang, (2019) position who findings with children in a group play therapy assets that it is important for hospitals to have play equipment available for children, as it can help to reduce stress and anxiety, promote physical activity, and improve social skills.

Thirdly, findings as indicated in Table 3 shows that both rural and urban hospitals possess inadequate play equipment that services the therapy needs of children under five. Thus Shemu et al (2022) opines that government and hospital proprietors have a duty to provide these services to meet the needs of the under-five.

Regarding the challenges faced in by hospitals in citing children play therapy centres. Results show that the challenges with the highest mean scores were lack of funding (2.00), lack of staff (2.50), and safety concerns (2.00). These challenges were cited by a significant number of respondents, and they are all likely to be significant barriers to starting and maintaining a play section for children in a hospital. The challenges with the lowest mean scores were lack of space (1.00), lack of toys and equipment (1.00), lack of parent involvement (0.50), and lack of communication between staff and parents (0.50). These challenges were cited by fewer respondents, and they may not be as significant as the challenges with the higher mean scores. Overall, the results of this survey suggest that the most significant challenges to starting and maintaining a play section for children in a hospital are lack of funding, lack of staff, and safety concerns a situation also discovered by Ayuba and Wash (2016). As a solution their findings emphasised that challenges due to inadequacy of materials should be addressed using adequate funding and awareness creation in order to ensure that children have access to safe and stimulating play environments in the hospital setting.

On location and availability of services. The findings indicates that majority of respondents (17 out of 21) have a paediatric section in their hospitals. This suggests that paediatric care is a priority for many hospitals, and that there is a demand for these services. However hospitals that do not have a paediatric section may be located in rural areas or may not have the resources to provide these services. This position was emphasised by Ayuba and Wash (2016) that children should not suffer deprivation of life saving health services because of locational disadvantages. It is thus imperative that play therapy services is available to all children with biases to location of facility for optimum growth and development.

CONCLUSION

Based on the study's findings, it can be concluded that the availability of play therapy services for children under five years in Plateau State Hospital is currently insufficient. The limited provision of these services, combined with the low awareness among healthcare professionals and parents, suggests a critical need for improvement. Play therapy is a crucial intervention for young children's emotional and cognitive development, and its absence or limited availability can have adverse consequences for their overall well-being.

RECOMMENDATIONS

To address the gaps identified in this study, several recommendations are proposed:

1. **Increase Awareness:** Plateau State Hospital should prioritize awareness campaigns to educate healthcare professionals, parents, and the community about the importance and benefits of play therapy for children's development.
2. **Training and Capacity Building:** Healthcare professionals working in the hospital should receive comprehensive training on play therapy techniques and its application for children under five years. This training should be integrated into their professional development programs.
3. **Resource Allocation:** Adequate resources, such as play materials, toys, and designated play therapy rooms, should be allocated to ensure the effective implementation of play therapy services. Hospital management should collaborate with relevant stakeholders to secure funding and resources for this purpose.
4. **Collaboration and Partnerships:** Plateau State Hospital should establish partnerships with other healthcare institutions, academic institutions, and organizations specializing in child development to enhance the availability and quality of play therapy services.

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