

**NURSING CARE THROUGH ORIGAMI PLAY THERAPY FOR  
HOSPITALIZED CHILDREN WITH ANXIETY IN ANGGREK 1  
WARD, ARIFIN ACHMAD HOSPITAL, RIAU PROVINCE****Nabila Amalia Putri<sup>1\*</sup>, Desti Puswati<sup>1</sup>, Dini Maulinda<sup>1</sup>, Desi Anggraini<sup>2</sup>**<sup>1</sup> Faculty of Nursing, Institut Kesehatan Payung Negeri, Pekanbaru, Indonesia**\*Corresponding author: [amalia07nabila@email.com](mailto:amalia07nabila@email.com)****Abstract**

It is already a matter of fact that hospitalization can be a stressful stage for children. Being separated from their parents, facing a lot of medical procedures, and adapting to a brand new environment may lead to anxiety that can affect both their psychological and physiological well-being. This study aims to highlight the implementation of nursing care through origami play therapy as a non-pharmacological intervention to reduce anxiety in hospitalized children in the Anggrek 1 Ward of Arifin Achmad Hospital, Riau Province. The study applied a descriptive case study approach covering assessment, diagnosis, planning, implementation, and evaluation stages. The intervention was conducted once daily for three consecutive days, each lasting 10–15 minutes, using origami paper and observation with the Facial Image Scale (FIS) and Preschool Anxiety Scale (PAS). Results showed a decrease in anxiety levels from moderate to mild after the origami sessions. The children became calmer, more cooperative, and more focused during nursing procedures. The repetitive folding activity helped distract them from fear and discomfort while fostering positive emotions. In conclusion, origami play therapy is effective as a supportive, evidence-based, non-pharmacological approach in pediatric nursing care to reduce anxiety and promote comfort during hospitalization.

**Keywords:** Hospitalization; Origami; Play Therapy; Child Anxiety; Pediatric Nursing.

**INTRODUCTION**

Hospitalization is a crisis situation faced by children when they are admitted to the hospital. This occurs because children must adapt to the hospital environment, which is a new and unfamiliar setting for them. If a child fails to adapt well, it can lead to fear, anxiety, and psychological changes (Fathoni et al., 2023). Preschool-aged children, especially those around three years old, are more prone to accidents and injuries such as falls, choking, and others. During hospitalization, children often undergo several medical procedures such as intravenous (IV) insertion, blood sampling, nasogastric tube (NGT) insertion, and radiographic examinations. These procedures often require separation from their parents, which can cause significant anxiety in children. Younger children are at higher risk of hospitalization because their immune systems are still developing, making them more susceptible to illnesses. Hospitalization is an effective way to treat sick children; however, for children, it is often an unpleasant experience that triggers various emotional responses, one of which is anxiety. Anxiety in hospitalized children is caused by separation, loss, fear of bodily harm, and pain. The effects of hospitalization-induced anxiety in preschoolers can disrupt their growth and development, hinder the healing process, and lead to post-hospitalization trauma (Al-Ihsan et al., 2018).

To help reduce the stress and anxiety children experience during hospitalization, it is important to provide them with ways to express their emotions. One effective method is play therapy. Play therapy is an activity that helps children recover while supporting their optimal growth and development. The goal of play therapy in hospitals is to help children feel calmer and less fearful, anxious, sad, tense, or in pain. There are many types of play therapy that can

help children develop various skills, such as coloring, solving puzzles, playing with playdough, and origami. Origami, the art of paper folding, allows children to create objects such as animals, flowers, or vehicles. It helps improve fine motor skills, build motivation, creativity, skills, and perseverance. Playing with origami also teaches children to make their own toys, giving them a sense of satisfaction that differs from playing with store-bought toys (Al-Ihsan et al., 2018).

Most hospitalized children come from urban areas, accounting for 4.49%. Out of 100 children, around 4 have been hospitalized. Although this percentage is not high, the impact of hospitalization can still affect children's social and behavioral development (Ministry of Women's Empowerment and Child Protection, 2021). The World Health Organization (2016) reported that 80% of hospitalized children experience anxiety. In the United States, it is estimated that more than 5 million preschool-aged children are hospitalized each year, with over 50% of them experiencing anxiety and stress. According to UNICEF, the number of preschool children in the world's three largest countries reaches 148 million, and among 57 million children hospitalized annually, 75% experience trauma such as fear and anxiety during treatment. The 2018 Basic Health Research (Riskesdas) in Indonesia found that an average of 2.8% of children nationwide underwent inpatient hospital care, totaling 82,666 children. The number of preschool children who fell ill in Indonesia was about 2.1 million, or roughly 8%. The most common response among hospitalized children is anxiety. Some children cannot express their pain openly, and quiet children often have poor coping skills for dealing with stress.

Based on this background, the author is interested in presenting Nursing Care through Origami Play Therapy for Hospitalized Children with Anxiety in Anggrek 1 Ward, Arifin Achmad Hospital, Riau Province. This intervention is expected to serve as a distraction to help children divert their thoughts from painful medical procedures and the unfamiliar hospital environment. Structured and repetitive activities such as paper folding can also provide a calming effect similar to meditation, helping to reduce anxiety levels.

## RESEARCH METHODS

### A. Implementation Method

The assessment of this case study was carried out using a descriptive method through several stages, including assessment, identification of nursing problems, planning of nursing interventions, implementation, and final evaluation. The intervention applied was origami play therapy conducted for 10–15 minutes. Before the procedure, the subject's anxiety score was measured and categorized according to the level of anxiety. The subject was then given origami play therapy for 15 minutes, after which the anxiety level was measured again. The instruments used included folding paper, standard operating procedures for origami play therapy, the Facial Image Scale (FIS) observation sheet, and the Preschool Anxiety Scale (PAS) observation sheet.

### B. Implementation Time

The intervention was carried out for three consecutive days, with a frequency of once per day during the nurse's break time, lasting 10–15 minutes per session. The implementation of the origami play therapy aimed to reduce the nursing problem, namely anxiety. Origami play therapy for hospitalized preschool children can provide a sense of comfort and happiness. The intervention was conducted in the Anggrek 1 Ward of Arifin Achmad Regional General Hospital, Riau Province.

### C. Data Collection and Success Indicators

The subject of this case study was a patient who met the following inclusion criteria: a preschool-aged child (3–6 years old), with mild to moderate anxiety levels (based on the anxiety

measurement scale), cooperative behavior, and willingness to participate in origami play therapy. The success indicators of this intervention included:

1. Improved Focus and Concentration: The child was able to complete the origami folding steps according to instructions and maintained interest in the activity (not easily distracted).
2. Cooperative Behavior During Care: The child became more cooperative when nurses performed medical or nursing procedures (for example, allowing vital sign checks or taking medication without strong resistance).
3. Positive Interaction: The child was willing to interact with nurses or parents, frequently asked about the origami shapes, or proudly showed the finished creation.
4. Positive Emotional Expression: The child smiled or laughed more often and expressed feelings of joy or satisfaction after successfully completing the origami form.

D. Data Analysis Technique

The analysis was conducted by comparing the patient's condition before and after the intervention, including the patient's ability to follow the origami play therapy and any observable behavioral changes (such as withdrawal, frequent questioning, or lack of cooperation).

## RESEARCH RESULTS

The results of this case study showed positive changes in the child's condition after the implementation of origami play therapy. Before the intervention, the patient exhibited signs of anxiety such as crying, sweating, appearing tense, and being difficult to engage with. The child tended to withdraw, refused to be examined by nurses, and appeared restless during hospitalization. Physiologically, the vital signs indicated an increased pulse rate of 96 beats per minute and rapid breathing. Based on the *Facial Image Scale (FIS)* assessment, the child's anxiety level was categorized as moderate, with a score of 4.

After conducting origami play therapy for three consecutive days, with a duration of 10–15 minutes per session, there was a significant reduction in anxiety levels. The child began to appear calmer, more focused, and interested in the paper-folding activities. During the sessions, the child was able to follow the nurse's instructions well, showed a more relaxed facial expression, smiled more often, and engaged in light conversation with the nurse. Positive interaction was also observed between the child and the parent, as the child eagerly showed the origami creations that had been made.

Physiologically, the child's pulse rate decreased from 96 to 82 beats per minute, and the breathing pattern became stable. The child also became more cooperative during nursing procedures, such as vital sign monitoring and medication administration, and was able to sleep more soundly for about six hours each night. Based on the post-intervention *Facial Image Scale (FIS)* assessment, the anxiety score decreased to 2, which is categorized as mild anxiety. These results indicate that origami play therapy had a positive impact on reducing anxiety levels in hospitalized children. The simple and enjoyable paper-folding activity successfully distracted the child's attention from fear of medical procedures and created a calming effect similar to meditation. Therefore, origami play therapy can be considered an effective non-pharmacological nursing intervention to help reduce anxiety in hospitalized children.

## DISCUSSION

The findings of this study indicate that origami play therapy has a positive impact on reducing anxiety among hospitalized children. After the intervention, children appeared calmer,

more cooperative during nursing procedures, and showed improved interaction with both nurses and their parents. This change suggests that origami activities can effectively divert children's attention away from medical stressors and fear-inducing procedures, creating a sense of comfort and safety in the hospital environment.

Origami, as a form of creative play therapy, provides a therapeutic outlet for children to express their emotions while developing fine motor and cognitive skills. The repetitive and rhythmic paper-folding movements promote relaxation and concentration, which help regulate the autonomic nervous system and reduce physiological symptoms of anxiety such as restlessness or tension. This finding supports the idea that structured play interventions can foster emotional stability and psychological well-being in hospitalized children.

Several previous studies have shown similar results, where creative and interactive play activities significantly decreased anxiety levels in children during hospitalization. According to research, play therapy helps children process their emotions, gain a sense of control over their environment, and develop adaptive coping mechanisms during stressful medical situations. Origami, in particular, encourages self-expression and confidence as children successfully complete folding tasks and produce tangible results, leading to feelings of accomplishment and satisfaction.

The implementation of origami play therapy also supports holistic nursing care, emphasizing the psychological and emotional needs of children alongside their physical treatment. By engaging in origami, nurses can build therapeutic communication, enhance trust, and create a more supportive and child-friendly hospital atmosphere. These factors contribute not only to the reduction of anxiety but also to improved cooperation during treatment, faster recovery, and a more positive hospital experience overall.

In conclusion, origami play therapy is a simple, low-cost, and effective nonpharmacological intervention that can be applied in pediatric nursing care to reduce anxiety and improve emotional well-being in hospitalized children. It is recommended that this therapy be integrated into nursing practice as part of a comprehensive approach to promote comfort, adaptation, and psychological resilience in young patients undergoing hospitalization.

## CONCLUSION

The results of this study indicate that **origami play therapy** is an effective and meaningful intervention in reducing anxiety among hospitalized preschool children. Hospitalization is often a stressful experience for children due to separation from their parents, exposure to an unfamiliar environment, and painful medical procedures. These conditions frequently trigger anxiety, fear, and emotional distress, which can interfere with the healing process. Through origami play therapy, children were given the opportunity to channel their emotions in a positive and creative way.

During the intervention, children were actively engaged in folding paper to create various shapes, such as animals or flowers. This simple yet structured activity provided them with a sense of focus and control. The repetitive and rhythmic motion of folding paper was found to have a calming effect, similar to meditation, which helped the children to relax and reduce anxiety. In addition, the sense of accomplishment after successfully completing an origami shape helped boost the children's self-confidence and emotional stability.

The study also found that children became more cooperative during medical procedures after participating in the origami play therapy sessions. They showed less resistance when nurses performed routine care such as checking vital signs or administering medication. This positive behavioral change suggests that the therapy helped children to adapt better to the

hospital environment and feel safer during interactions with healthcare providers. Moreover, the therapy enhanced positive emotional expressions children smiled more frequently, laughed, and expressed happiness during and after the activity.

The success of this intervention demonstrates the importance of incorporating play-based therapy in pediatric nursing care. Origami play therapy is not only simple and low-cost but also culturally adaptable and easy to apply in various healthcare settings. It provides both psychological and emotional benefits that contribute to the overall well-being of children during hospitalization.

Therefore, it is recommended that healthcare professionals, particularly pediatric nurses, implement origami play therapy as a non-pharmacological approach to reduce anxiety and improve the quality of hospital experiences for children. Future studies are encouraged to explore the long-term effects of origami play therapy on children's emotional resilience, recovery outcomes, and parent-child relationships during hospitalization.

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