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Research Article

Factors Affecting Parental Anxiety Preschool After Treatment at the Indonesian Army Hospital TK IV IM 07.01 Lhokseumawe City

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ABSTRACT: Anxiety is one of the common psychological responses experienced by parents when their children are hospitalized. This condition does not only last during hospitalization, but can also continue after the child is discharged, especially in preschool children who are still very emotionally dependent on their parents (Potts & Mandleco, 2012). The post-hospitalization period is a vulnerable time for parents because of concerns about the possibility of recurrence of the disease, complications, and limited knowledge in caring for children at home. This study aims to determine the Factors that Influence the Anxiety of Parents of Preschool Children After Hospitalization. This study used a quantitative approach with a cross-sectional study method. The results showed that most respondents were in the young adult category as many as 53 people (45.7%), respondents had incomes in the middle category as many as 54 people (46.6%), respondents with health factors were in the low category as many as 62 people (53.4%). Health factors in this context include knowledge, awareness, and behavior of parents towards promotive and preventive efforts in maintaining children's health before and after hospitalization. It is recommended that hospitals provide home visits or follow-up services via telephone/teleconsultation to monitor the child's condition while providing psychosocial support for parents

Keywords: Factors, Parental Anxiety, Preschool Children, Hospital Care.

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1. INTRODUCTION

Anxiety is one of the common psychological responses experienced by parents when their children are hospitalized. This condition does not only last during hospitalization, but can also continue after the child is discharged, especially in preschool children who are still very emotionally dependent on their parents (Potts & Mandleco, 2012). The post-hospitalization period is a vulnerable time for parents because of concerns about the possibility of recurrence of the disease, complications, and limited knowledge in caring for children at home.

Preschool children (3–6 years) have a unique emotional developmental stage, where separation from parents, medical procedures, and the hospital environment can cause fear and stress for both children and parents. Parents often experience excessive anxiety when having to return to caring for their child at home without direct medical supervision (Wong et al., 2017). This level of anxiety can affect parenting patterns, the quality of the parent-child relationship, and the success of recovery after hospitalization.

Various factors are known to influence parental anxiety levels, such as education level, knowledge of the child's condition, previous experience with hospitalization, social

support, and length of hospitalization (Hockenberry & Wilson, 2014). Identification of these factors is essential in providing appropriate interventions to reduce anxiety and increase parental readiness for continued care at home.

Research conducted by Franck et al. (2015) showed that predictors of post-hospitalization anxiety in mothers after their children underwent treatment showed that three months after being discharged from the children's hospital, 32.7% of mothers reported some symptoms of anxiety. Rodríguez-Rey et al.'s research (2018) also highlighted anxiety and depression in mothers after their children underwent critical care in hospital. This study concluded that 23% of mothers reported clinically significant levels of anxiety symptoms, 21% reported moderate-severe anxiety and 9% reported moderate anxiety.

According to Bronner (2008) in his study also reported that more than one-third (34.5%) of children have post-hospitalization anxiety. Anxiety in the mother is the strongest predictor of anxiety in children. This study shows that a large number of children experience persistent anxiety after PICU care. Research on post-hospitalization anxiety shows results that throughout the United States, more than 20% of children have consistent anxiety symptoms after 12 months of hospitalization (Zatzick, 2007).

Many factors are associated with anxiety in mothers of preschool children after hospitalization. Experience during hospitalization is one of the factors causing anxiety in mothers after hospitalization. The experience of a child being hospitalized is usually an anxiety-inducing and even traumatic experience for the mother because the effects of illness and being hospitalized on the child are stressful events with the potential for undesirable consequences for the mother. Cognitive and emotional limitations and dependence on others make mothers very vulnerable to the stress involved in adapting to the child's illness and inpatient room (Rokach, 2016).

According to Gomes (2016), mothers' post-hospitalization anxiety is influenced by previous hospitalization experiences, separation from home situations, unknown environments (hospitals), unfamiliarity with procedures and experience with invasive procedures. Factors associated with anxiety in mothers after a child undergoes hospitalization are the length of days of treatment, age, gender and previous treatment (Tiedeman, 2017).

A preliminary study was conducted on February 3, 2025 on 10 parents who have preschool children, it was found that 8 parents experienced anxiety due to post-hospitalization of their children, while 2 parents of preschool children did not experience anxiety due to post-hospitalization of their children. The TNI AD Hospital TK IV IM 07.01 Lhokseumawe City is one of the referral health facilities that often receives child patients with various conditions. However, data on the psychological condition of parents after hospitalization of children, especially preschool age, is still limited. Based on the description above, it is known that many factors influence anxiety in mothers after their children undergo treatment in the hospital. Therefore, researchers are interested in knowing the Factors that Influence the Anxiety of Parents of Preschool Children After Treatment at the TNI AD Hospital TK IV IM 07.01 Lhokseumawe City.

2. RESEARCH METHODS

Research Design

This study uses a quantitative approach with a cross-sectional study approach method, namely each research subject is only observed once and measurements are made on the character status or subject variables at the time of examination so that it can be clearly known about the Factors Influencing the Anxiety of Parents of Preschool Children After Treatment at the TNI AD Hospital TK IV IM 07.01 Lhokseumawe City.

Population and Sample

The subjects of this study were all mothers of preschool children who had been hospitalized, totaling 98 children. This study used a saturated sampling technique, in which all members of the population were sampled due to the relatively small population size (Marín-González et al., 2022). This approach ensures that all perspectives of the population are represented in the data collected.

Research Instruments

The instrument used in this study to measure the anxiety of mothers of pre-school children after hospitalization. The instrument used was the Beck Anxiety Inventory (BAI)

proposed by Beck and Steer (2010). BAI consists of 21 questions used to measure the severity of anxiety in adults. Alternative answer choices consist of 4 (four choices), namely Not at All = 0, A Little = 1, Moderate = 2, Very = 3. Interpretation of the measurement results is Score 0-21 = low anxiety, Score 22-35 = moderate anxiety, Score 36 and above = severe anxiety. The validity and reliability of the Beck Anxiety Inventory (BAI) have been tested by Beck and Steer (2010) with a Cronbach's alpha value of 0.94.

Data Collection Procedure

Data collection was conducted using interview techniques, observation, focus group discussions, and questionnaire distribution (Masturo & Anggita, 2018). These data were obtained from distributing questionnaires to respondents of parents of pre-school children after hospitalization at the TNI AD Hospital TK IV. IM 07. 01. Lhokseumawe City.

Data Analysis Techniques

The collected data were analyzed using quantitative research on two variables. To test the hypothesis, researchers used statistical tests or Chi Square tests in stages with the help of computerization. Decision making is there is a relationship or no relationship with a 95% confidence level ($\alpha=0.05$). Furthermore, a conclusion is drawn if the ϱ value ≤ 0.05 then Ha is accepted and H0 is rejected which indicates there is a significant relationship between the dependent variable and the independent variable and if the ϱ value> 0.05 then Ha is rejected and H0 is accepted which indicates there is no significant relationship between the dependent variable and the independent variable.

3. RESULTS AND DISCUSSION

Research result

Based on the results of the research that has been conducted on "Factors Influencing the Anxiety of Parents of Preschool Children After Treatment at the TNI AD Hospital TK IV IM 07.01 Lhokseumawe City", the results of the research can be explained as follows:

Table 1. Frequency Distribution of Respondents Based on Parents' Age At the Indonesian Army Hospital, IV. IM 07. 01.

Lhokseumawe City 2024

No	Parents Age	Amount (f)	Percentage (%)
1	Young Adult (20-35 years)	53	45.7
2	Middle Adulthood (36-45 years)	38	32.8
3	Late Adulthood (46-60 years)	25	21.6
Total		116	100

Table 2 . Frequency Distribution of Respondents Based on Parental Income At home Indonesian Army Hospital Class IV. IM 07. 01.

Lhokseumawe City Y ear 202 4

No	Parental Income	Amount (f)	Percentage (%)
1	Low	50	43.1
	(< Rp.2.9 million)		
2	Intermediate	54	46.6
	(Rp. 2.9 million - Rp. 5.8 million)		
3	Tall	12	10.3
	(> Rp.5.8 million)		
Total		116	100.0

Table 3. Frequency Distribution of Health and Hospitalization of Preschool Children At the TNI AD Hospital, IV. IM 07. 01.

Lhokseumawe City Y ear 202 4

No	Health Factors	Amount (f)	Percentage (%)
1	Good	54	46.6
2	Not enough	62	53.4
Total		116	100

4. DISCUSSION

The results of the research study, it is known that most respondents who are parents of preschool children after hospitalization are in the young adult age category, which is 53 people (45.7%). Young adulthood, which generally ranges from 26 to 35 years, is a stage of life marked by the transition to full adulthood, where individuals begin to carry out social roles and responsibilities independently, including as parents (Notoatmodjo, 2012).

In this age group, anxiety in response to the condition of a child who has just finished undergoing hospitalization can arise due to several factors. One of them is the limited experience of parents in dealing with the child's medical condition, especially if the hospitalization experience is something new. Young adults who have just had children or who have never faced hospitalization conditions before tend to have higher levels of anxiety than older age groups, because they are still in the stage of learning to understand the dynamics of child growth and development and comprehensive child health care (Yusuf, 2016).

In addition, young adulthood is also a stressful phase of life because individuals must balance their roles as workers, partners, and parents. High psychological burdens, coupled with concerns about the child's condition after hospitalization, can exacerbate anxiety levels. A study conducted by Anggraini (2020) showed that young parents have a higher tendency to experience anxiety due to limited coping mechanisms and experience in caring for sick children.

However, not all impacts of young adulthood are negative. On the other hand, this age is also synonymous with relatively good literacy levels, access to broader health information through digital media, and openness to social and professional support. This can help some parents manage anxiety better if they have sufficient resources, both emotionally and socially (Puspitasari et al., 2021).

These findings indicate that the young adult age group needs to be a primary concern in providing education and psychological support in hospitals. An informative, empathetic, and knowledge-oriented approach to parenting post-hospitalization care is essential to reducing anxiety levels, especially for those in this early productive age category.

Study shows that most respondents have an income level in the middle category, which is 54 people (46.6%). Income level is one of the important indicators that affect psychological conditions, including the level of parental anxiety, especially in dealing with the condition of children after hospitalization.

Middle income generally indicates that families have sufficient economic capacity to meet basic needs, including access to health services, child nutrition, and post-hospitalization costs. However, at the same time, this group is also at risk of experiencing financial stress when faced with unexpected costs, such as additional expenses during child hospitalization, drug purchases, follow-up checks, and transportation (Prawirohardjo, 2018).

The anxiety of parents from the middle economic group can be triggered by uncertainty about how long the child will need to recover, fear of a recurrence of the disease, and the potential burden of costs that are not covered by health insurance. A study by Wulandari (2020) revealed that parents with middle incomes are often in a "little" position; not classified as poor so as not to receive full assistance, but also not stable enough to feel financially secure.

On the other hand, this group usually has fairly good access to health information and social support, which can help reduce anxiety levels if facilitated well by health workers. Proper education, open communication between medical personnel and the patient's family, and providing information about the child's prognosis and follow-up services are very helpful in reducing excessive anxiety.

Thus, these results indicate the importance of a psychosocial approach that takes into account the economic conditions of the family. Parents from middle-income groups need to be accompanied by a holistic approach, not only related to child care, but also education about stress management and maximum utilization of health facilities to prevent excessive anxiety.

Study shows that most respondents have health factors in the less category, namely 62 people (53.4%). Health factors in this context include knowledge, awareness, and parental behavior towards promotive and preventive efforts in maintaining children's health before and after hospitalization.

The poor health category indicates that most parents do not have adequate understanding and skills in optimally caring for children, especially after hospitalization. This condition is one of the main causes of anxiety, due to ignorance or uncertainty about how to care for children at home, signs of relapse, treatment schedules, and prevention of further infection (Rachmawati, 2020).

Parents who do not understand their child's health condition tend to feel insecure in making decisions regarding treatment, which can worsen their psychological condition. A study by Sari and Yuliana (2021) stated that low health literacy is significantly related to high parental anxiety, especially in cases of children with post-hospitalization conditions, where the main responsibility shifts from medical personnel to parents.

Poor health factors are also often caused by minimal health education received during the hospitalization process. This shows the importance of the role of health workers, especially nurses and pediatricians, in providing comprehensive and easily understood education for parents regarding post-hospitalization care steps.

This condition also shows the need for increased interventions based on family health education, either through counseling, educational media, or direct assistance by health workers, so that parents can increase their readiness and ability to care for children and reduce excessive anxiety.

RECOMMENDATION

Based on the findings of this study, Improving Health Education for Parents. Hospitals need to develop a structured health education program for parents of preschool children, especially those who will and have completed inpatient care. Education should include how to care for children after hospitalization, early detection of danger signs, nutritional management, and prevention of recurrent infections. Strengthening the Role of Health Workers as Educators. Nurses and pediatricians must play an active role as educators, by conveying information verbally and in writing that is easy to understand for all educational backgrounds. The use of visual media or simple booklets can help improve parents' understanding. Post-Hospitalization Counseling and Assistance. It is recommended that hospitals provide home visit or follow-up services via telephone/teleconsultation to monitor the child's condition while providing psychosocial assistance for parents. This is important to reduce anxiety caused by limited health knowledge.

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