

Psychoeducation and In Vivo Desensitization Techniques to Reduce Separation Anxiety in Children

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Abstract

Separation anxiety is a common thing in children. Still, suppose the intensity and impact of the anxiety shown begin to interfere with the adaptive functions of the child and parents. In that case, an intervention process is needed to overcome the child's anxiety condition. The intervention process that can be carried out is psychoeducation and in vivo desensitization techniques. This study examines the effectiveness of psychoeducation and in vivo desensitization techniques to reduce separation anxiety in children. This study uses a single case subject AB method with a follow-up design. The participant in this study was a boy aged six years nine months who experienced separation anxiety. This research was conducted in 6 sessions and lasted for 60 minutes each session.

Keywords

psychoeducation; in vivo desensitization; separation anxiety; children

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INTRODUCTION

Separation anxiety is excessive anxiety caused by the separation of children from home or attachment figures. DSM-IV-TR (American Psychiatric Association, 2000) suggests that children with this anxiety problem feel depressed every time they experience separation from attachment figures. Children feel uncomfortable leaving the house and avoid going alone. The child may also show a refusal to go to school, visit a friend's house, or go out to do errands.

The condition of separation anxiety is closely related to school refusal behavior in children; 75% of children with separation anxiety experience some form of school refusal behavior (Kearney, 2010). 2001). The condition of separation anxiety is also shown by children with fear of being alone, fear of being ignored, and fear of sleeping alone. Separation anxiety is part of normal early development. However, when the anxiety shown begins to interfere with the daily activities of children and parents, causing dysfunction in social, family, and academic life, this condition cannot be left alone (Pincus, Eyberg, & Choate, 2007). 2005).

Anxiety experienced by children can be caused by genetic factors (Kring et al., 2009), with estimates ranging from 29% to 50%, but genetic influences act through the environment. Psychological factors that can affect anxiety in children are emotional regulation and insecure attachment with attachment figures. Research conducted by Bosquet & Egeland (2006) found that children's anxiety is influenced by a tendency to exaggerate the dangers in each situation and the child's lack of confidence that he can handle the situation. Other factors that can affect anxiety in children are parental control and parenting.

Research suggests that anxiety parents tend to control their child's behavior to limit their psychological freedom. Parents also tend to be overprotective to their children or teach children to cope by avoiding stimuli that cause anxiety (Pincus et al., 2005). The development of separation anxiety has a close relationship with biological susceptibility (temperament, anxiety sensitivity), psychological (attachment), and environmental (separation-anxious events) (Eisen & Schaefer, 2005). Because various factors can cause separation anxiety in children, the intervention process given to children and their attachment figures can be done differently.

Interventions can be done by teaching children and their attachment figures about coping skills and inviting children to confront the separation anxiety they feel (Eisen & Schaefer, 2003). 2005). Coping skills given to children can be identifying stimuli that are considered dangerous by children to identify excessive and uncontrollable worries. Children are invited to identify the triggers of the anxiety they feel as well as their own physiological and behavioral responses (Velting, Setzer, & Albano, 2003). 2004), as well as the risk of a stimulus that is considered harmful (Eisen & Schaefer, 2005).

Coping skills given to parents can be given in the form of psychoeducation. Psychoeducation is a process of providing information about the nature of the anxiety felt by the child, skills to strengthen the adaptive behavior shown by the child, and assistance so that it can encourage the child to be able to confront the anxiety he feels (Pincus, Santucci, & Ehrenreich, 2007). 2008). Psychoeducation provided to parents also includes the anxiety felt by the child, how this anxiety develops, and the interventions given to reduce the anxiety felt by the child (Gosch et al., 2006). Parents are expected to understand the most appropriate way to help children get out of the anxiety they face (Doobay, 2008).

Confronting the separation anxiety felt by the child can be done by using a behavioral approach with the in vivo desensitization technique, which exposes the child gradually to situations that cause anxiety to reduce the child's sensitivity to the situation (Corey, 2003).2009). Eisen et al. (2011) found that cognitive and behavioral therapy techniques involving in vivo desensitization effectively reduced anxiety in children with separation anxiety. Another research conducted by Him (2001) also showed similar results. Cognitive and behavioral therapy involving confrontation of stimuli that cause anxiety was said to reduce anxiety in a six-year-old boy with separation anxiety.

In Indonesia, studies that test the effectiveness of particular interventions, especially interventions within Vivo desensitization techniques, on separation anxiety in children are still challenging to find. Aini (2016) conducted research by providing play therapy intervention in children with separation anxiety, and the results showed that walkie-talkie play therapy reduced the separation anxiety felt by children. Other research (Hadi,2016) researched children with separation anxiety, and it provided play therapy with research results showing that play therapy influences separation anxiety with a significance level of 0.000 (<0.05). Based on the description above, this study aims to test the effectiveness of the intervention program with a cognitive-behavioral psychoeducational approach and in vivo desensitization to reduce the separation anxiety felt by children.

METHOD

In this study, the related variable is the separation anxiety felt by the child. The independent variable is an intervention with a cognitive-behavioral approach to psychoeducation and in vivo desensitization. The operational definition of separation anxiety in children's excessive anxiety when they have to be separated from their home or their attachment figures. In this study, the behavior shown is a reluctance to be separated from the mother while at school. This study seeks to change behavior by reducing sensitivity to helplessness when the mother is not in class. Functional behavioral assessment (behavioral function analysis), which can explain the subject's behavior, can be seen in table 1.

Research design

The research design used in this study was a single subject AB with a follow-up design, which involved one participant (N=1). Measurement and data collection were carried out in the baseline, intervention, and follow-up phases. In the baseline phase, measurement and data collection were carried out for ten sessions to identify and see A's consistent behavior. The intervention phase was carried out for six sessions and lasted for 60 minutes each session. The follow-up phase was carried out in 2 sessions, namely the second week and the fourth week after the intervention was completed. The follow-up phase was carried out to evaluate the extent to which the subject was able to maintain the response that had been shown in the intervention process.

Table 1. ABC of Reluctance to Separate from Mother at School

<i>Antecedents</i>	<i>Behavior</i>	<i>Consequences</i>
A is afraid of not being able to do the assignments given by the teacher while in class.	He cried and left the classroom to look for his mother.	<ol style="list-style-type: none"> 1. Mother A tries to continue accompanying the subject in the class or at the window beside the subject's seat. The window has no glass, so the subject easily holds his mother's hand. 2. The teaching and learning process in schools is disrupted due to violations of school regulations, and other parents/guardians feel that there is unfair treatment. 3. Teacher A never asked the subject to talk in class because every time teacher A tried, A would cry and run to find his mother.

Participants

Participants in this study amounted to one person with the initials A, a boy who was six years old and experienced separation anxiety. A and his parents came to seek psychological help on the school's recommendation because the teaching and learning process in class A was disrupted, and the school also received criticism from other parents/guardians. A showed a similar pattern when he was in Kindergarten (TK). However, A's mother was also in the kindergarten A attended. So that the subject's parents did not feel the behavior shown by the subject was a problem. Parent A tends to show permissive parenting, whereas parent A accepts A's behavior without justification.

Strategy and Intervention

This study uses psychoeducational techniques and in vivo desensitization. Psychoeducational techniques are used to increase the knowledge of parents and teachers of A about condition A and situations that can worsen A's current condition. In addition, ask parents and teacher A's willingness to be actively involved in the intervention process given to A and what parents and teacher A can do to support the intervention process. A's parents gave additional psychoeducation regarding the conveying process that could be done to A regarding the intervention. Appropriate responses were also shown to A if A showed crying behavior and left the class. A's parents were also asked to increase positive affirmations and praise to increase A's self-confidence each time they were successful through the intervention stages. In vivo desensitization on A researcher slowly brought A closer to the teacher while keeping A's mother away from the class.

In the intervention process, A's mother rewarded A if they succeeded in going through the intervention process and could be in class without her mother at the end of the intervention. The reinforcement given is in a car with remote control. The success of the intervention process in this study can be seen in table 3. The data analysis method used in this study was descriptive statistical techniques using graphs. Data analysis was obtained by comparing the frequency of crying behavior and leaving the subject's class in the baseline and follow-up phases. The intervention process can be successful if A no longer shows crying behavior and leaves the classroom to look for his mother at school.

Table 2. Stages of Intervention

Session	Destination	Method
<i>Baseline</i>		
1 – 10	Identify behavior A.	Observation and interview
<i>Intervention</i>		
1 – 6	A can be in class without his mother and improve the quality of A's relationship with his class teacher.	We provide psychoeducation to parents and teachers and use in vivo desensitization techniques to A.
<i>Follow-Up</i>		
The second and fourth weeks after the intervention was carried out.	We saw the consistency of changes in the subject's behavior after completing the intervention process.	Observation and interview

Table 3. Degrees of Behavioral Success

Behavior	Mark
Crying and leaving class to find mom	25%
Cry and leave class to find mom, then go back to class	50%
Crying, but not leaving class to look for mother	75%
Survive in class without crying and leave class to find mom	100%

RESULT AND DISCUSSION

Overall, this study was conducted for 36 days, which consisted of 10 days of the baseline phase, six days of the intervention phase, and 14 days of the follow-up phase. The baseline measurement results for ten sessions showed that A always cried and looked for his mother every time his mother came out of class. Every day will be a time when A's mother comes out of class to go to the bathroom or do other things, and the behavior of crying and looking for her mother every time her mother leaves class is always shown by A. A does not want to go back to class, so her mother will continue with A outside of class.

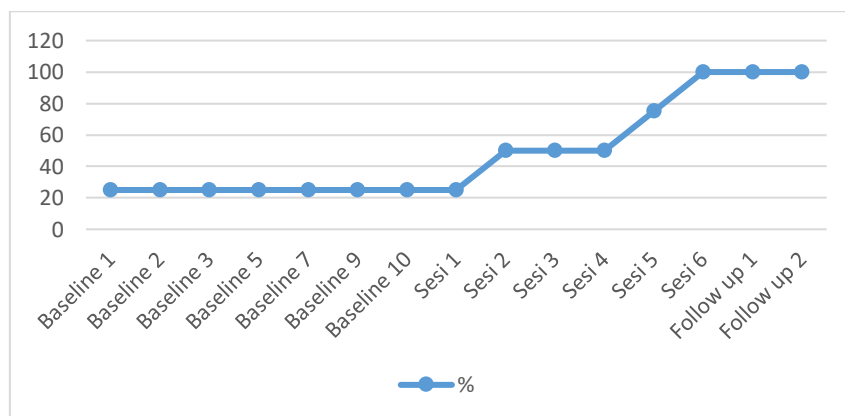
In the intervention phase, was a decrease in the frequency of crying behavior and leaving the class indicated by A. This decrease in frequency can be seen in Figure 1. During the intervention process, the researcher was with A in his class. On the first day of the intervention, A cried when his teacher gave him an assignment and ran to find and hug his mother, who was outside her classroom window. In the second and third sessions of intervention, A cried and left the classroom to look for his mother. Mother A silenced A while crying and did not provide extreme comfort, and A wanted to return to class when the researcher invited A back to class. In the fourth intervention session, A was out of class for less time than before. In the fourth intervention session, A is also willing to answer questions asked by his teacher in a meager voice. A is willing to answer the question after A gets encouragement and positive affirmation from the researcher.

In the fifth session of the intervention phase, A cried briefly in class. Nevertheless, A could not come out of the classroom to look for his mother, and he was willing to submit assignments to the front of the class with encouragement and praise from his class teacher. Before the sixth session, the researcher asked A to talk and gave positive encouragement

and affirmation that A could be in class alone without crying and without A's mother. The researcher also reminded A about her mother's reward if A could be in class alone. Moreover, do not cry. During the sixth session, A was able to be in class and do his assignments and not cry. The researcher and A's mother wait for A outside the classroom, five feet from A's class.

After the intervention process was completed, the researcher asked Mrs. A to make the distance between the waiting area and the classroom more distant as the day progressed. The researcher asked his mother to encourage and praise A for having the courage to be in class alone without being accompanied. In the follow-up phase, mother A sat with other parents/guardians in the waiting area. The researcher made observations in class, and the results showed that A did not show crying behavior and looked for his mother again in class. He looks for his mother to take his mother's lunch and eat with his friends during recess. The interaction between A and his teacher at school also increased significantly. Based on interviews with A, A said that he felt happy at school because he had many friends and good teachers. Teacher A also said that A was a child who was brave enough to express his wishes or things he did not know about the lesson to his teacher, and the communication between the two did not experience obstacles.

Figure 1. Comparison of the frequency of behavior A in the baseline, intervention, and follow-up phases



The results showed a decrease in the frequency of crying and running outside the classroom to find mothers for children with separation anxiety problems. Factors that influence the success of the intervention process are providing psychoeducation to parents and teachers, which is a determining factor for changes in children's conditions. Knowledge of parents and teachers about the condition of children increases the willingness of parents and teachers to be actively involved in the intervention process carried out on children. Mulia, Keliat, & Wardani (2017) suggest that psychoeducation is an effective therapy to attract support from the closest people, especially families, to increase motivation and provide support to get rid of dependence on family members. This therapy has been shown to reduce anxiety.

Giving in vivo desensitization techniques also affects the anxiety experienced by children. Behavioral therapy is one of the most effective techniques for reducing anxiety (Higa-McMillan et al., 2016). Giving in vivo desensitization involves a process in which awareness of the stimulus is increased slowly so that anxiety can be reduced by the presence of the stimulus (Nursalim et al., 2018). In vivo desensitization technique has been used successfully in reducing anxiety in many studies conducted.

Other factors that influence the success of the intervention are condition A who still has an openness to the environment, even though he has to get protection from his closest people. A is still willing to come to school, even though a threat at school can separate him from his mother. A's parents are willing to be actively involved in helping the development of A's condition. A's awareness and willingness to slowly change the parenting pattern applied to A also influences A's anxiety. Teachers and principals of A are also aware of A's shortcomings. They are very cooperative in the examinations carried out on A. Smooth intervention can be hampered if A's parents are not consistent in the changes in parenting patterns sought.

Tiwaris et al. (2013) suggest that the process of exposure to a stimulus that causes anxiety and, if after that gets a reward, will increase the results shown. A also shows this after successfully passing the intervention process, and A could be in class alone without crying and go out looking for his mother. He received a reward in the form of a remote control car of his choosing. This motivates A to overcome his fears and undergo the intervention process successfully. He no longer shows crying behavior and looks for his mother outside the classroom when he is at school.

CONCLUSION

Based on the research data obtained, a behavior modification program using psychoeducational techniques. Furthermore, in vivo desensitization can reduce separation anxiety in children. The frequency of crying behavior and leaving class looking for a mother in A decreased by 100% so that currently, A can be in class alone without the need for his mother to accompany him. The decline in behavior shown by A can be consistently maintained. The target of success of the intervention process, which requires a 100% reduction in behavior without assistance, has been achieved. This research has weaknesses that can be improved in other future studies. The psychoeducation process can be given a time interval of implementation with the in vivo desensitization technique to see which techniques are more effective for reducing separation anxiety in children. In addition, the research process can be carried out with a longer time to see whether the results of the interventions carried out can still be shown when the child is in a new situation that he is not familiar. Increasing children's confidence can be done by giving simple tasks at home and reinforcing them. Every child shows adaptive behavior to have self-confidence and does not always have to be under the protection of their attachment figures. The effectiveness of the intervention for a larger population, further research can be done using a control group. In addition, to prevent separation anxiety from occurring in children, a more in-depth psychoeducation process can be carried out for parents to build an effective interaction process with children.

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