

## THE EFFECT OF THE THOUGHT STOPPING THERAPY ON REDUCING ANXIETY AMONG MOTHER OF CHILDREN WITH STUNTING

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### ABSTRACT

Anxiety is an uncertain and unwell-defined worry experienced by individuals. Physical illnesses are one of the anxiety causes. Stunting is a physical illness in children manifested by a very low height for age. Stunting causes cognitive development disorder, inhibition of mental and motor development, make children more susceptible to diseases. Stunting bad effects is not only on children with stunting but also for parents of children with stunting who become the caregiver for the children. The method was a case report. A case report was conducted to determine the effect of the thought stopping therapy on reducing anxiety among the mother of children with stunting. The author conducted thought stopping therapy in three times of meeting. The result of this case report showed that the client's anxiety and worry were decreased, so she can focus on taking care of her child. Therefore the thought stopping therapy could be considered for effective intervention on reducing the anxiety among mother who has a child with stunting.

**Keyword:** anxiety, thought stopping, stunting, mother

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### 1. Introduction

Anxiety is an emotional condition or unwell defined worry in unspecifically object, uncertain feelings experienced by individuals (1). Who in 2015 showed anxiety is the top sixth mental disorder with 3,4% of individuals experienced it (2). The Anxiety and Depression Association of America also showed anxiety disorder suffered by 40 million of United States's adult population at the age of 18 years old or more (18% of the population) (3). Basic Health Research also showed in 2018,

mental disorder includes anxiety prevalence in Indonesia increased from 6% in 2013 until 9,8% in 2018 (4).

Individual anxiety is different, based on every response to the stressor (5). An individual new experience can be a stressor of anxiety (1). Individual new experience includes new parents status, new job, new responsibility, and physical illness. Individual experience can be a personal experience or other people's experience which influence an individual.

Parents role and responsibility are to take care of the children. Parents' anxiety can be caused by children physical problem. Stunting is one of physical growth disorder in children, which is a very low height for age. Stunting causes cognitive development disorder, inhibition of mental and motor development, make children more susceptible to diseases (6). Stunting bad effects is not only on children with stunting but also for parents of children with stunting who become the caregiver for the children.

Stigma from society can occur to the family who cares for children with stunting, especially mother. Parents who take care of the children with stunting often get unpleasant treatment from the community even from health stakeholders. Health workers, especially in integrated services post often gives a wrong judge to the parents of children with stunting, especially mother (7). The family needs emotional support to face this condition and to optimize child care with health problems.

Interviews result in five mothers who take care of children with stunting showed all of the respondents suffer anxiety. A mother in moderate anxiety level and four mothers in mild anxiety. Anxiety is one of the mental disorders that necessary to be treated immediately and completely in order to avoid the risk of mental disorder.

Thought stopping is one of intervention to decrease anxiety. Thought stopping help individual to stop disturbing or threatening thought. Individual with anxiety instructed to said stop when disturbing or threatening thoughts appear and the change into a positive thought. Based on that, the author interested to conduct a case report about anxiety treatment in the mother of children with stunting with thought stopping therapy.

## **2. Objectives**

The study aimed to determine the effect of the thought stopping therapy on reducing anxiety among the mother of children with stunting.

## **3. Methods**

The method of this study was a case report. The client reported was a mother with moderate anxiety. The client was Mrs. I, 22 years old, she has a child 2,5 years old, her child was diagnosed with stunting. The author conducted thought stopping for 3 times consist of 3 sessions with a difference of 3 days in each session. The author used ethical principles of anonymity and confidentiality in this study.

#### 4. Results

Mrs. I is 22 years old, she has a child 2,5 years old, her child was diagnosed with stunting. Mrs. I's child stunted because of inadequate nutrition caused by pulmonary tuberculose that attacked her child since 6 months ago. Mrs. I's child just finished the treatment and the doctor has been stated that Mrs. I's child was cured and the child does not need to continue the treatment, but her child recovery does not make her calm. Mrs. I worried about stunting in her child.

##### a. Assessment

Mrs. I said that she was worried about her child condition, she was afraid if her child did not grow up and develop like other children in the same age. Mrs. I also said she was afraid if her child condition will affect the future of her child if her child cannot be as smart as other children without stunting if her child will be mocked by other children because of her child small body. Mrs. I said she was hard to sleep if she thinks about her child condition. She also said she wanted to cry when she saw her child was shorter than other children at the same age. Mrs. I said that she often gets a negative comment from her neighbors about her child condition, like *"you don't provide adequate nutrition for your child so your child is small"*. Mrs. I was sad and worried, she often blamed her self that as a mother she can't take care of her child. These various thoughts make Mrs. I cannot focus on caring for her child. The data from the assessment showed the client in moderate anxiety. Client anxiety showed by over sadness, crying when saw the child, thought about her child with stunting.

##### b. Intervention

The author conducted thought stopping therapy to solve the anxiety of the mother. Thought stopping therapy conducted in 3 times consist of 3 sessions with a difference of 3 days in each session. The first session conducted by identified a bad experience, disturbing thoughts, and stop the most disturbing thought. The most disturbing thought of the client was stunting in her child. The client thought the negative impact of stunting that may occur in her child, that's are development and growth delay, intelligence disorder, and client also afraid if her child condition will affect the future of her child.

The author teaches how to stop the disturbing thought by exhale-inhale in 3-4 times until the client feels relax, then close her eyes and imagine when the disturbing thought really happen. After that, the author instructed to stop the thought by said "stop!". The author said stop when the client seems sad or crying. And then the author asked the client to imagine the positive thought or against the disturbing thought. The client said she relief enough although this is the first time she tried. The author asked to write down the schedule of thought stopping exercise. The client decides to do the exercises twice a day in the morning, that is when he wakes up and when he wants to go to sleep. The author made a record of sound "stop!" in 2 minutes as an alarm. The author was to evaluate client self-exercise before started the second session.

When the author evaluated the client's self-exercise, the client said that she has been done the exercise regularly. The client also said her worried was

reduced. After evaluated the client's self-exercise, the author conducted the second session of the therapy. The second session was conducted to teach the client to stop the disturbing thought automatically. In the second session, the author did not say, "stop" or used a sound record, but client tried to stop the disturbing thought automatically. The client could not stop her disturbing thought by her self in the first exercise. The client can do it in the second exercise. The client does the thought stopping therapy to interfere automatically independently by herself according to the schedule as before in the first session, that is the morning after waking up and at night before going to bed. Evaluation of the exercise was carried out at the third meeting.

### **c. Evaluation**

The third session of thought stopping therapy was the evaluation of the benefit of thought stopping. The client said that thought stopping therapy was very useful. The client's anxiety and worry were decreased, so she can focus on taking care of her child. The client is more often stimulating her child. She also did not care about negative judgments from other people about herself and her child.

## **5. Discussion**

Anxiety experienced by the client, in this case, was marked by excessive sadness to cry when she saw her child because she thought about the condition of her child who was diagnosed with stunting. An individual who experiences anxiety is only focusing on things that is important with the land of perception narrowing (1,5). Mrs. I experienced the narrowing of perception in this case. Mrs. I said that her mind only focused on the effects of stunting which did not necessarily occur in her child so that it made her unable to be optimal in caring for her child.

Fear that is not clearly accompanied by feelings of uncertainty, helplessness, isolation, and insecurity is a description of the condition of anxiety that can be experienced by someone (1). This is evidenced by the condition of Mrs. I, where is Mrs. I worry about something that is not necessarily happening to her child. In addition, anxiety is described as a confusing concern about future threats, where individuals who experience anxiety tend to experience disturbances in sleep patterns (8). In this case, Mrs. I revealed that she had difficulty sleeping thinking about the condition of her child. This is supported by research in which sleep patterns in individuals who experience moderate and severe anxiety undergo changes, namely difficulty in starting to sleep and often awake (9). Although someone who experiences anxiety at a level is experiencing a narrowing of perception, she is still able to follow orders if directed to do so. In contrast to severe anxiety, it will require a lot of direction to be able to focus on other things (1). Moderate anxiety experienced by individuals can be overcome by several actions, one of the therapies is thought stopping therapy.

Thought stopping therapy is right to solve Mrs.I's problems. Thought stopping is an action to reduce distress and anxiety associated with disturbing thoughts, clients are asked to sit with their eyes closed verbalizing their thoughts in sequence until the therapist says "stop!" and emphasizes the client to stop thinking about

things that disturb her mind. The procedure is carried out repeatedly until the client is able to stop her negative thoughts with the lips move without sound (10-11). The words "Stop!" will physiologically give orders to the brain, so it will affect the activity of the Gamma-Aminobutyric Acid (GABA) neurotransmitter, which is responsible for influencing anxiety (12). GABA neurotransmitters play a role in controlling activity. When the client stops thinking about disturbing things, GABA activity will decrease, so the anxiety response also decreases, especially physiological responses, such as heart palpitations, and rapid breathing (1). Based on the evaluation, the client showed a decrease in signs of anxiety symptoms. The client's cognitive response shows that her mind is calm. This happens to clients who get thought stopping because of the repeated information by the nurse to decide or stop the thoughts that interfere with the client. Based on this explanation it can be concluded that thought stopping therapy can be used as psychotherapy to reduce anxiety in clients.

Some studies showed that thought stopping therapy increased the ability to control negative thoughts and effectively overcome anxiety (13-18). Thought stopping combined with family psychoeducation can also reduce anxiety due to degenerative diseases (19). Besides being combined with family psychoeducation, thought stopping can be combined with progressive muscle relaxation and cognitive therapy to reduce anxiety due to physical illness (20). Based on this explanation, thought-stopping therapy is very appropriate for clients in this case.

Many studies have shown that thought-stopping therapy is effective in reducing anxiety, but there are several studies that show the opposite results. Research by Supriati (2010) showed that there is no significant effect of thought stopping on decreasing anxiety. This study explains that although a person's anxiety remains at the level of moderate anxiety, the cognitive, behavioral and emotional responses of the individual have decreased (9). Other studies also mention that to overcome anxiety symptoms in the form of insomnia is more effective using cognitive behavioral group therapy which includes progressive muscle relaxation (PMR), cognitive relaxation with positive imagery, rules for a good night sleep, and cognitive techniques that are more specific than thought stopping (21). The two studies show the ineffectiveness of thought stopping towards decreasing individual anxiety levels. Even so, thought stopping can still reduce symptoms or responses that accompany anxiety.

Based on some research results, the author argues that in the case of Mrs. I who experienced anxiety is being thought stopping therapy. However, in giving thought stopping therapy the author emphasizes the client's ability to control her. The main goal is given thought stopping to Mrs. I is to stop disturbing negative thoughts in Mrs. I. Mrs. I is 22 years old. The author argues that according to the opinion of Bentelu et al (2015) age affects emotional conditions and the way of thinking in overcoming existing problems. The age of a young person makes the emotional stability possessed immature (22). So, the implementing thought stopping on Mrs. I must consider its ability to change the thought process by paying attention to the emotional level and sensitivity.

## 6. Conclusion

Thought stopping therapy can be used as psychotherapy to reduce anxiety in mothers who have stunted children. The implementation of thought stopping therapy emphasizes the client's ability to control herself. This can affect how the client stops her negative thoughts and turns them into alternative positive thoughts. Changes in negative thoughts into positive thoughts by clients are influenced by the existence of repeated information by nurses to decide or stop the thoughts that interfere with the client. Because the study was only done on one subject, the author suggests doing further research with more subjects to know the effectiveness of thought stopping therapy to reduce anxiety mothers of children with stunting.

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