



Application of Distraction Watching Cartoons Animation to Reduce Anxiety Level During Injection in Preschool in The Children's HCU Room, Dr. Moewardi Hospital Surakarta

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ABSTRACT

Background: Anxiety experienced by preschoolers during hospitalization is an important problem; if not addressed, it can affect the growth and development process. Hospitalization can be a situation that is considered a crisis by the child. This situation arises because children are trying to adapt to a foreign environment, namely, hospitals, which can cause anxiety in children. One of the efforts to overcome anxiety can be done with distraction techniques, one of which is watching animated cartoon films.

Objective: to find out the results before and after applying Distraction Watching Animated Cartoons in Reducing Anxiety Levels During Injection in Preschool in the Children's HCU Room of Dr. Moewardi Hospital, Surakarta.

Methods: This study used a descriptive method with purposive random sampling and a HAR-S anxiety level measuring tool. **Results:** The results of the application of 2 respondents carried out for 1 time in 3 days, with a duration of 10 minutes, showed the effect of reducing anxiety in children.

Conclusion: There were differences and changes in anxiety levels in the respondents during the application of distractions, such as watching animated cartoons, in reducing anxiety levels during injection.

Keywords: Distraction, Anxiety Level, Injection, Preschool

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1. INTRODUCTION

A child is an individual who has uniqueness, with needs that are tailored to the developmental stages they go through. Children's growth and development process begins in infancy, toddlerhood, preschool, and adolescence (Jannah &

Dewi, 2023). Preschool-aged children (3–6 years) are in a critical developmental stage marked by increased independence and environmental exploration. When a child becomes ill and requires hospitalization, they often experience anxiety due to separation. This makes the child feel

threatened, fearful of medical procedures, anxious about interacting with strangers, lonely, uneasy, unfamiliar with the environment, and worried (Sukadana et al., 2020).

Anxiety is a strong factor that can influence human behavior, both standard and deviant or disturbed behaviors. Both types of behavior are ways to cope with anxiety. Anxiety experienced by children during hospitalization can affect their healing process. If this anxiety is effectively and promptly addressed, children will feel more comfortable and cooperative with medical staff, allowing treatment to proceed smoothly without obstacles (Diansari, 2024).

According to data from the World Health Organization (2020), 4%–12% of hospitalized pediatric patients in the United States experience anxiety or stress during hospitalization. About 3%–6% of preschool-aged children hospitalized in Germany also experience similar conditions, while 4%–10% of children hospitalized in Canada and New Zealand show signs of anxiety or stress during hospitalization. In Indonesia, based on data from the Indonesian Ministry of Health (2023), approximately 40% of preschool-aged children undergoing hospital treatment experience anxiety due to hospitalization. This condition is

worsened by the lack of effective interventions to address children's anxiety during hospital stays. The prevalence of children experiencing hospitalization-related anxiety in Central Java Province is 4.1% (Central Java Provincial Health Office, 2021).

The preschool period is a golden phase for stimulating various aspects of development, which play an important role in subsequent developmental tasks. Preschool-aged children (3–6 years) undergo rapid growth and development and require intense stimulation from their surroundings. Children at this age are in the stage of initiative versus guilt. During this time, their curiosity and imagination develop significantly, leading them to ask many questions about things they do not yet understand. At around four years old, children enter an optimal period to begin exploring the world beyond their immediate family (Simanjuntak et al., 2022).

In addition to rapid development and the initiative stage, preschoolers also enter an important social and emotional development phase. They begin to understand their own feelings and start recognizing the emotions of others, although emotional control is still limited. During this phase, they begin developing the ability to interact with people other

than their parents, such as playing with peers or showing empathy. However, they may still exhibit egocentric behavior. During this period, the role of parents and caregivers is crucial in providing appropriate stimulation to support the child's development. However, sometimes children fall ill and undergo hospitalization. Hospitalization can cause stress due to the unfamiliar environment. The stress experienced by children can lead to various reactions related to illness or personal issues, such as separation, unfamiliarity with the environment, loss of affection, and body image concerns. These may manifest as regression (loss of control), displacement, aggression (denial), withdrawal, protest behavior, increased sensitivity, passivity, refusal to eat, and anxiety (Putri Sari Dewi et al., 2023).

Anxiety experienced by preschool-aged children during hospitalization is a significant issue; if left unaddressed, it can negatively impact their developmental processes. Nursing care for children often involves invasive procedures such as injections or intravenous (IV) line placement. These procedures can be intense stressors that trigger anxiety in children. Nurses typically explain these procedures to parents and use therapeutic communication with the child before

performing them. However, this often causes panic in children, prompting resistance and sometimes forcing healthcare workers to apply pressure, which can result in trauma. One method to manage anxiety includes using distraction techniques (Sulfiani et al., 2023).

Distraction is a technique used to divert the client's attention away from anxiety, pain, or restlessness during medical procedures. It shifts the child's focus away from pain or discomfort. Some commonly known distraction techniques used with children include visual distractions such as looking at pictures in books or playing video games, auditory distractions like listening to music, breathing distractions using deep-breathing techniques, intellectual distractions, and guided imagery. One form of distraction involves encouraging the child to imagine or fantasize (guided imagery), which can be facilitated by watching animated cartoons. Animated cartoons contain images, colors, and stories that appeal to children. When children are focused on watching educational cartoons, their anxiety is reduced, making them less anxious during injection procedures (Marlina et al., 2023).

Based on research conducted by Lilis et al. (2019) titled "The Effect of Audiovisual Cartoon Watching on Anxiety

Levels During Injection Procedures in Preschool Children,” statistical analysis showed a significance value ($p = 0.001$, $t = 11.71\%$), indicating that watching cartoons has a significant effect on reducing anxiety levels during injection procedures in preschool-aged children. Before the audiovisual cartoon-watching intervention was implemented, most children (60.7%) experienced severe anxiety during injection procedures. It is hoped that this audiovisual cartoon-watching intervention can be applied as a nursing strategy to reduce anxiety during injection procedures in preschool children.

Based on interviews conducted with Nurse A, a nurse working in the Pediatric HCU (High Care Unit) Cempaka Dr. Moewardi Hospital on February 11, 2025, findings over the past two months indicated that out of 80 preschool-aged children admitted in the last six months, approximately 60% experienced anxiety during hospitalization. Symptoms included fear, unfamiliar environments, separation from parents, lack of information, and loss of freedom. According to the informant, when invasive procedures (blood draws, IV insertion, and injections) were performed, children showing fear and anxiety were distracted using audio methods (e.g., conversation). However, the informant also noted that

this approach was sometimes ineffective, especially for children with prior traumatic experiences.

Observations made by the researcher during clinical practice in February 2025 in the Pediatric HCU Cempaka Ward of Dr. Moewardi General Hospital revealed that all staff members used distraction techniques during IV insertions, blood draws, injections, and medication administration. However, the distraction provided was limited to storytelling only. Several children still refused, cried, and exhibited anxiety during invasive procedures. Therefore, the researcher is interested in implementing animated cartoon-watching as a distraction method to reduce anxiety levels during injections in preschool children in the Pediatric HCU Cempaka Ward of Dr. Moewardi General Hospital.

2. METHODS

The research method employed in this study is a descriptive case study, which aims to systematically describe and analyze phenomena or conditions as they naturally occur within a specific context. A descriptive approach allows for an in-depth understanding of the subject by presenting factual and accurate information based on observable realities, while a case study provides a

comprehensive exploration of individual cases through intensive and detailed investigation. This method is particularly suitable for examining complex health conditions and nursing care experiences in clinical settings. The study was conducted in the Pediatric HCU (High Care Unit) Cempaka at Dr. Moewardi General Hospital, involving two pediatric patients selected through purposive sampling based on predefined criteria. The inclusion criteria encompassed preschool-aged children between 3 and 6 years old who exhibited mild, moderate, or severe anxiety during hospitalization, with parental consent obtained for their participation. Exclusion criteria included critically ill patients, those with visual impairments or special needs, and patients diagnosed with eye diseases that could interfere with data collection or intervention. Data were collected from February 3, 2025, to February 22, 2025, using a structured nursing care format comprising assessment, implementation, and evaluation stages. During the assessment phase, comprehensive data were gathered through observation, interviews with family members, and review of medical records to identify the patients' physical,

emotional, and psychological conditions. The implementation phase involved the execution of individualized nursing interventions tailored to address identified problems, particularly anxiety related to hospitalization and medical procedures, with continuous monitoring and documentation of patient responses. The evaluation phase was conducted systematically to measure the effectiveness of nursing actions by comparing the patients' progress against predetermined goals, involving both the healthcare team and the families in assessing outcomes. Ethical considerations were strictly observed throughout the study. Informed consent was obtained from the parents or legal guardians prior to participation, ensuring full understanding of the research purpose and procedures, with voluntary participation emphasized and the right to withdraw respected at any time. To ensure confidentiality, anonymity was maintained by using coded identifiers instead of real names in all data records and reports. This ethical framework protected the rights and dignity of the participants while supporting the integrity and credibility of the research process.

3. RESULTS

Table 1. Respondent characteristics

Respondent Characteristics	Respondents	
	An. A	An. M A
Gender	Female	Male
Age	3 years 10 months	5 years 8 months
Previous Hospitalization Experience	Previously	Never
Number of Siblings	2	1
Duration of Hospitalization	13 days	5 days

Based on Table 1, there are differences in the respondents' characteristics in terms of gender, age, number of siblings, and length of hospital stay. The implementation was conducted to determine the outcomes before and after the application of watching cartoon animation distractions to reduce anxiety

levels during injections among preschool children in the Pediatric HCU Cempaka Room at Dr. Moewardi Regional General Hospital. This implementation involved two patients as research subjects, selected according to the predetermined criteria. During the implementation, results were obtained.

Table 2. Results of Patient Anxiety Levels Before Applying Animated Cartoon Distraction.

Date	Name	Anxiety Score	Anxiety level
16/02/2025	An. A	27	Moderate
15/02/2025	An. MA	29	Severe

Table 2 shows that the anxiety scores of patients before the animated cartoon-watching distraction therapy were high. For instance, Patient An. A had an anxiety

score of 27, while Patient An. MA had an anxiety score of 29. This indicates that both patients experienced moderate and severe levels of anxiety.

Table 3. Results of Patient Anxiety Levels After Applying Animated Cartoon Distraction.

Date	Patient	Anxiety Score	Anxiety level
16/02/2025	An. A	15	Mild
15/02/2025	An. MA	14	Mild

Table 3 shows that patients' anxiety scores decreased during the animated cartoon-watching distraction therapy. For Patient An. A, the anxiety score dropped to 15, while for Patient An. MA, it decreased

to 14. This indicates that both patients experienced a reduction in anxiety levels during the implementation of the animated cartoon-watching distraction therapy.

Tabel 4. Results of Patient Anxiety Levels Before and During the Application of Animated Cartoon Distraction

Patient	Anxiety					
	Day 1		Day 2		Day 3	
	Before	After	Before	After	Before	After
An. A	27 (Moderate)	24 (Moderate)	24 (Moderate)	21 (Moderate)	21 (Moderate)	15 (Mild)
An. MA	29 (Severe)	26 (Moderate)	26 (Moderate)	21 (Moderate)	21 (Moderate)	14 (Mild)

Table 4 shows that the implementation of animated cartoon-watching distraction therapy to reduce anxiety levels during injections in preschool children in the Pediatric HCU Cempaka Room was carried out once per session, three times a day, for a maximum of 10 minutes each. The results of the implementation in An. A and An. MA was not identical, but both showed a decrease in anxiety levels.

On the first day, before the animated cartoon-watching distraction was applied during injection, An. A experienced moderate anxiety with a score of 27. During the intervention, the anxiety score decreased to 24 (moderate). Meanwhile, An. MA experienced severe anxiety with a score of 29 before the intervention, which

decreased to 26 (moderate) during the animated cartoon-watching distraction.

On the second day, before the intervention, An. A had a moderate anxiety level with a score of 24, which decreased to 21 (moderate) during the distraction therapy. In contrast, An. MA had a moderate anxiety level with a score of 26 before the intervention, which also decreased to 21 (moderate) during the distraction.

On the third day, before the intervention, An. A experienced moderate anxiety with a score of 21, which dropped to 15 (mild) during the animated cartoon-watching distraction. Meanwhile, An. MA had a moderate anxiety level with a score of 21 before the intervention, which decreased to 14 (mild) during the distraction.

Table 5. Final Comparison Results of Anxiety Levels in Pre-School Children Between 2 Respondents

Intervention	Anxiety Levels	
	An. A	An. MA
Before	27	29
After	15	14

Based on Table 5, the anxiety levels before the implementation of animated cartoon-watching distraction were as follows: An. A had an anxiety score of 27

(moderate), while An. MA had a score of 29 (severe). During the intervention, which was carried out once per session, three times a day, there was a change in anxiety

levels. An. A's anxiety score decreased to 15 (mild), and An. MA's score decreased to 14 (mild).

4. DISCUSSION

Anxiety Levels During Injection in Preschool Children Before the Implementation of Animated Cartoon-Watching Distraction

Based on the initial case study assessment before implementing nursing interventions, anxiety scores were measured using the Hamilton Anxiety Rating Scale (HARS). The results showed that An. A had an anxiety score of 27, interpreted as moderate anxiety, while An. MA had a score of 29, interpreted as severe anxiety. Both cases shared common characteristics: respiratory disorders (bacterial pneumonia), irritability, disrupted sleep patterns, restlessness, and fear, that are symptoms of anxiety.

According to Atawatun et al. (2021), signs and symptoms of anxiety in children include restlessness, irritability, being easily startled, crying, resistance, withdrawal, impatience, tension, and heightened alertness toward the environment. Hospitalization can also affect child development and interfere with the treatment process. Some causes of these anxiety symptoms include fear of healthcare providers and medical

procedures, anxiety due to being in unfamiliar surroundings, separation from friends or siblings, and anxiety caused by the illness itself. Therefore, the researcher applied animated cartoon-watching distraction therapy to reduce the child's anxiety, so that the intervention program could proceed smoothly.

This study aligns with research by Balqis & Rofiqoh (2022), which states that children undergoing hospitalization often experience anxiety due to medical interventions or invasive procedures such as injections, surgeries, blood sampling, and other nursing actions.

Anxiety Levels During Injection in Preschool Children After the Implementation of Animated Cartoon-Watching Distraction

Based on observations during the nursing intervention in both cases, the anxiety levels were again measured using the Hamilton Anxiety Rating Scale (HARS). An. A's anxiety score decreased to 15 (mild anxiety), and An. MA's score dropped to 14 (also mild anxiety). It can be concluded that during the animated cartoon-watching distraction therapy, both children experienced a reduction in anxiety levels.

Anxiety is a universal human experience a distressing emotional

response filled with worry, fear, and uneasiness, often arising from unclear or unidentified threats or thoughts. One method to manage anxiety is through distraction techniques (Yanti et al., 2024).

This study supports the findings of Lestari et al. (2025), which state that animated cartoon-watching distraction therapy effectively reduces anxiety in preschool children undergoing invasive procedures such as injections. Nurses successfully implemented the animated cartoon distraction technique, resulting in reduced anxiety among children undergoing injection procedures. Both patients appeared calmer during the distraction therapy; their restlessness decreased, they became more communicative, willing to play independently, and interacted with others.

High-quality pediatric care can reduce anxiety and fear. If left unaddressed, these emotions may cause children to resist nursing treatments. The level of cooperation in preschool-aged children significantly impacts the care process during hospitalization, especially regarding recovery. Preschoolers' cooperative behavior can be enhanced through animated cartoon-watching distraction. Providing distractions can positively influence how children accept

medical treatments (Setiawati & Sundari, 2019).

Development Before and After Implementing Animated Cartoon Watching Distraction

There was a clear difference in the child's development before and after the animated cartoon-watching distraction therapy. Before the intervention, the children exhibited fear, irritability, crying, irregular sleep patterns, and restlessness when approached by nurses or doctors.

The anxiety levels of both subjects decreased following the implementation of the animated cartoon-watching distraction therapy. For An. A, the anxiety score before the intervention was 27 on day 1, interpreted as moderate anxiety; on day 2, it was 24 (moderate); and on day 3, it dropped to 21 (mild). During the intervention, the scores were 24 (moderate) on day 1, 21 (moderate) on day 2, and 15 (mild) on day 3. The total decrease in anxiety score over three days was 12 points.

For An. MA, the anxiety score before the intervention was 29 on day 1 (severe), 26 on day 2 (moderate), and 21 on day 3 (moderate). During the intervention, the scores were 26 (moderate) on day 1, 21 (moderate) on day 2, and 14 (mild) on day

the total decrease in anxiety score over three days was 15 points.

After undergoing the animated cartoon-watching distraction therapy, both children showed reduced anxiety levels measured using the Hamilton Anxiety Rating Scale (HARS). The final results showed that An. A had an anxiety score of 15 (mild anxiety), while An. MA scored 14 (also mild anxiety).

This study aligns with research conducted by Sulfiani et al. (2023), which found that implementing audiovisual distraction through watching the cartoon Upin & Ipin can reduce or eliminate anxiety experienced by patients during injection procedures. Showing the cartoon via video helped calm the patients and induced a relaxed state, thereby reducing anxiety and helping them control their emotions. One method to reduce anxiety in pediatric patients is distraction. Distraction techniques in nursing interventions are used to divert the client's attention away from distressing experiences, such as discomfort. This can be done by focusing the child's attention on something they enjoy, such as cartoons. Watching cartoons is an easy and effective way to reduce anxiety in children before medical procedures. It helps shift the child's focus from discomfort to something more engaging (Habiba et al., 2021).

Final Comparison of Anxiety Levels Between the Two Preschool-Aged Respondents

After undergoing animated cartoon-watching distraction therapy, both children experienced a reduction in anxiety levels, as measured by the HARS. An. A ended with a score of 15 (mild anxiety), and An. MA scored 14 (also mild anxiety). However, there were differences in the rate of anxiety reduction between An. A and An. MA may be attributed to differences in age, previous hospitalization experiences, and gender.

This finding supports research by Jufri et al. (2023), which shows that age is strongly related to a child's anxiety level and cognitive development. Younger children have difficulty understanding illness and unfamiliar hospital environments. The younger the child, the higher the level of anxiety caused by hospitalization. Infants, toddlers, and preschoolers are more likely to experience anxiety. Children who have previously been hospitalized tend to have lower anxiety than those experiencing hospitalization for the first time. Unpleasant experiences during hospital treatment can lead to trauma and fear, whereas positive and enjoyable experiences make children more cooperative (Latumeten, 2023).

In addition to age and prior experience, gender also plays a role. Male preschoolers tend to respond less emotionally to hospitalization compared to female preschoolers. Boys generally develop faster cognitively than girls. Girls tend to be more emotionally sensitive, while boys are more exploratory, stimulating operational thinking, seeking validation, and asking questions. This explains why male children show lower emotional responses to hospitalization than female children (Oktaviana, 2025).

5. CONCLUSION

Based on the implementation of animated cartoon-watching distraction therapy in reducing anxiety levels during injections among preschool children at the Pediatric HCU Cempaka of Dr. Moewardi Regional General Hospital, involving respondents An. A and An. MA, it can be concluded that there was a significant decrease in anxiety levels after the intervention. Before the therapy, both children showed moderate (score 27) and severe (score 29) anxiety levels, which gradually decreased to mild anxiety levels (15 and 14 respectively) over three consecutive days, indicating the effectiveness of this distraction technique in progressively reducing anxiety. The reduction was more rapid in An. MA

compared to An. A, showing individual differences in response to the intervention. This study suggests that animated cartoon-watching distraction can be an effective, non-pharmacological method to manage anxiety in preschool-aged children during medical procedures. Therefore, it is recommended that parents and caregivers adopt this approach as a supportive strategy, hospitals consider integrating it into pediatric care protocols to improve patient experience, and nurses apply it as part of standard nursing interventions to reduce anxiety in children undergoing invasive procedures such as injections.

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AUTHOR CONTRIBUTIONS

The author contributes in conceptualization, data collection and analysis: Nadia Agus Tina, Zulfa Mahdiatur Rasyida, and Suciana Ratrinaningsih. Writing and manuscript revisions: Nadia Agus Tina.

CONFLICT OF INTEREST

The authors declared no potential conflicts of interest with respect to the

research, authorship, and/or publication of this article.

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DATA AVAILABILITY STATEMENT

The data supporting the findings of this study are available upon reasonable request from the corresponding author.

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