

Universitas Pakuan
Lembaga Penelitian dan Pengabdian Kepada Masyarakat
Jl. Pakuan No 1, Ciheuleut, Tegalega - Bogor Timur
Kota Bogor, West Java - Indonesia
email : jhss@unpak.ac.id

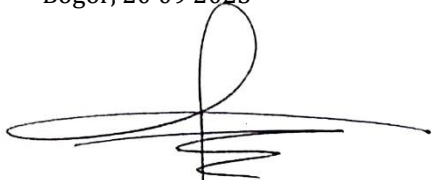
Letter of Acceptance To Whom It May Concern 020.d/JHSS/Journal/LoA/IX/2023

Chief Editor of JHSS (Journal of Humanities and Social Studies) has decided that the name article below has been accepted on JHSS will be published in Vol. 08 No. 02.

Author : **Rosela Iftita, Desy Arisandy**
e-mail : 191810041@student.binadarma.ac.id
Title : Effectiveness Child-Centered Play Therapy Stacking Blocks To Improve Eye Contact Children With Autism At My Kids Therapy Center
Link Jurnal indexed : <https://journal.unpak.ac.id/index.php/jhss>
Status : Crosreff, Sinta 3, Google Scholar, Garuda, dll
Status : **Accepted**

To develop our management system and add some indexations like Crossref and others. we need your donation before publishing your article.

Thank you for your attention
Bogor, 20 09 2023



Yudhie Suchyadi, S.Si., M.Pd.
Secretary of Chief Editor Journal of Humanities and Social Studies
Universitas Pakuan

CP WA. 087770220700



EFFECTIVENESS CHILD-CENTERED PLAY THERAPY STACKING BLOCKS TO IMPROVE EYE CONTACT CHILDREN WITH AUTISM AT MY KIDS THERAPY CENTER

Rosela Iftita ^{a*)}, Desy Arisandy ^{b)}

^{a)} Universitas Bina Darma, Palembang, Indonesia

^{b)} Universitas Bina Darma, Palembang, Indonesia

^{*)}191810041@student.binadarma.ac.id

Article history: received 00 0000000 0000; revised 00 0000000 0000; accepted 00 0000000 0000

Abstract. This study aims to determine the effect of the child-centered play therapy method using block stacking games to improve eye contact skills in children with autism at My Kids Therapy Center. This research approach is an experimental design with a design that can be used, namely quasi-experimental, which is a research method used to find the effect of treatment under controlled conditions. The design used in this study is a one group pre- and post-test design, so in this study there is a pre-test before treatment and a post-test after treatment. The subjects in this study were 2 new autism students at My Kids Therapy Center who had low eye contact skills. This study used the Childhood Autism Rating Scale (CARS-2) instrument to measure the severity of autism, the Eye Contact Social Skills Individual Intervention Assessment (PII-KS) form to measure eye contact ability, and a checklist observation sheet as an additional support tool for observation reference during treatment. The results of the pretest and posttest that were conducted can be seen that there is a difference in the subject's eye contact ability, where the mean of the posttest $Me = 35.5 >$ pretest $Me = 24.5$. There was an increase in the posttest score after treatment with the child-centered play therapy method compared to the pretest score. The results showed that there is an effect of child-centered play therapy method on eye contact ability of children with autism at My Kids Therapy Center.

Keywords: Child-centered play therapy, Autism Spectrum Disorder, Eye Contact

I. INTRODUCTION

Child development is a process of stages from infancy to adulthood that includes physical, social, emotional and cognitive development. This process is very important as it affects the quality of life of children in reaching their full potential in the future. However, not all children have optimal development, there are so many factors that influence a child's development, including genetics, environment, and experiences. Various terms that overlap with developmental disorders and are often considered the same despite having different definitions include: children with special needs, disability, developmental psychopathology, abnormal, handicapped and/or difabel (Kristiana, 2016).

According to (Ambarsari, 2022) children with special needs are conceptually divided into two, namely which is with a temporary nature and with a permanent nature, while based on the type of grouping consists of blind, deaf, tunagrahita (mental retardation), tunadaksa, tunalaras, tunawicara, learning difficulties, high intelligence children (gifted), slow learners, hyperactive children (ADHD) and autism.

In 2020-2021, WHO received reports of up to 5,530 cases of developmental disorders in children, including autism spectrum disorders, which are estimated to increase by 500 people each year (Kemenkes, 2022). Autism or Autism Spectrum Disorder (ASD) can be defined as an individual developmental disorder in which behavior results solely from the presence of an internal drive that is not responsive to stimulation from others, causing impairment in

behavior and social interaction. The disorder affects an individual's ability to communicate, socialize, behave, and learn (Center for Disease Control and Prevention, 2022)

Children with autism have limited social interaction and tend to avoid eye contact (Paramita et al., 2018). Eye contact shows attention and visual coordination of objects, individuals, or other things by attracting attention, so that it can help a person to pay attention and understand messages conveyed by others through body language, movements, and facial expressions. Thus, it can make eye contact ability important to be stimulated or trained in children with autism, to make the beginning of improving their social interaction and communication (Pradita, 2021).

Several interventions can be given for children with autistic disorders (Iswinarti et al., 2020) including (a) picture exchange communication system (PECS) therapy, (b) structured direct instruction, (c) treatment and education of autistic and communication handicapped children (TEACCH), (d) sensory integration therapy, (e) Denver therapy, (f) play therapy, (g) applied behavior analysis (ABA), (h) inclusive education, and (i) intervention through family approach.

According to (Salter et al., 2016) play therapy can create a positive impression that is very fun and gives children the opportunity to get a positive assessment of their own abilities. This therapy requires a play medium and additional therapist roles that focus on maximizing children's potential, one of which is the Child-centered play therapy (CCPT) method (Iswinarti et al., 2020)

Child-centered play therapy (CCPT) method as one of the play therapies is equipped with carefully selected toys and materials to encourage a wide range of emotions and build relationships with children (Ray et al., 2019). In this method, the child is allowed to play and explore fully and the therapist is required to understand the child's behavior and emotions by empathizing and focusing on creating a safe and comfortable environment so that the child can grow through their positive emotions in a facilitative relationship (Landreth, 2023).

Child-centered play therapy (CCPT) requires the selection of appropriate play media to train children's eye contact skills. Playing with blocks has been shown to develop eye-hand coordination and provide children with freedom of expression and imagination (Vanvleet et al., 2011). Among the different types of block play media, block stacking games have been shown to be effective in training children's eye contact skills. Children can be creative with different types of blocks of different sizes, colors, and shapes. They must carefully observe the blocks and manipulate them with their hands to build the desired structure or object (Cunningham, 2022).

My Kids Therapy Center is one of the therapy centers for children with special needs located in Kayuagung City, Ogan Komering Ilir Regency. In the field of therapy for children with special education needs, My Kids has 1.8 years of experience with available child therapy services, namely behavioral therapy (ABA), speech, sensory integration, and preschool.

with autism is low eye contact ability, therefore, in providing interventions by therapists, building and training children's eye contact ability is the most important thing to be obtained to facilitate children's communication and learning. Therefore, the child-centered play therapy method is expected to help improve children's eye contact skills at My Kids Therapy Center.

II. METHOD

This research is an experimental design with the design used is quasi-experimental, which is a research method that can be useful by looking for the influence of other treatments under controlled conditions. The design that can be used through this research is a group pre and post test design, so this research has a pretest before being given the treatment and a posttest after being given the treatment (Saifuddin, 2019).

The subjects selected were 2 new autistic students at My Kids Therapy Center who have low eye contact skills. The instruments used in this study are the Childhood Autism Rating Scale (CARS-2) to measure the severity of autism, Penilaian Intervensi Individual Keterampilan Sosial (PII-KS) form to measure eye contact skills, and a observasi checklist sheet as an additional support tool for observation reference during treatment.

In this study, the pretest and posttest will be administered with an observation timed of 45 minutes. The subject will be placed in the therapy room and given a block stacking toy to play with. During the observation, the researcher will observe and record the frequency of the subject's eye contact when prompted by calling his name every 2 minutes. After the observation is completed, the researcher will use the Eye Contact PII-KS formula to calculate the pretest score based on the recording results. Therefore, at PII-KS instrument eye contact ability score is obtained by recording the subject's eye contact frequency, which is then calculated using a formula so that the score can be categorized (Herlina et al., 2019).

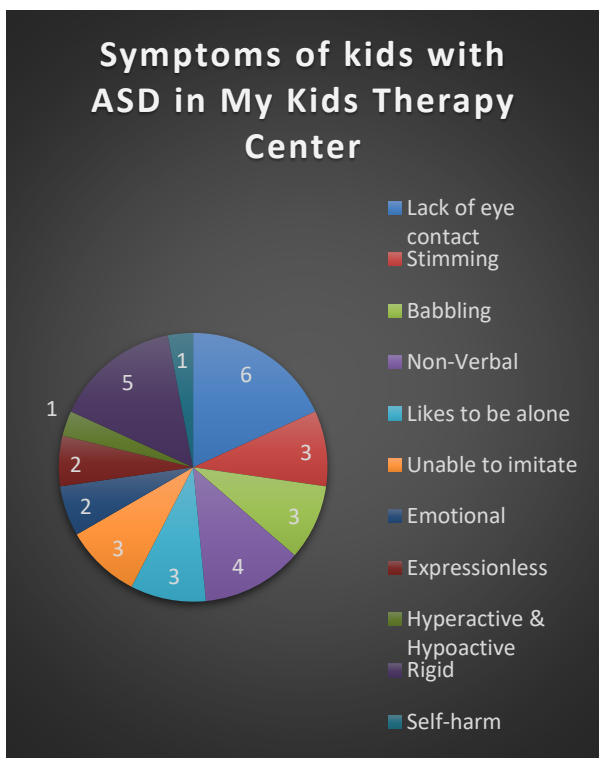


Fig. 1 Symptoms of kids with ASD in My Kids Therapy Center

Based on Figure 1, it can be seen that at My Kids Therapy Center, the most common symptom seen in children

$$\frac{f}{N} \times 100$$

Fig. 2 Eye contact ability score formula

Note:

f = Frequency of eye contact made
 N = Number of prompts given

TABLE 1
 EYE CONTACT ABILITY CONSISTENCY CATEGORY

Score	Consistency Category	Meaning
>80	Almost always	Children capable to consistently show eye contact in various places,

		occasions, and with various people
60 - 80	Often	Children are able to show eye contact on several occasions, places, and with several people
30 – 59	Occasionally	Children tend to rarely show eye contact but can demonstrate this skill even though not often
<30	Almost never	The child never or very rarely makes eye contact. Eye contact does not usually appear in a child's daily routine

III. RESULT

The purpose of this study was to determine the effect of a child-centered play therapy method on the eye contact skills of children with autism at My Kids Therapy Center. The subjects of this study were 2 new autism students of My Kids Therapy Center who had symptoms of low eye contact ability. First, a pretest was administered to see the initial score of eye contact ability of the research subjects before they were given the treatment of child-centered play therapy method. After the initial score of eye contact ability was obtained, the treatment was carried out for up to 8 sessions to train the subject's eye contact ability. The final test (posttest) was conducted after the subject's treatment was completed to see the final score of the subject's eye contact ability.

TABLE 2
 DATA PRETEST RESULT

Subject	Eye contact frequency	Score	Category
DM	5	22	Almost never
MF	6	27	Almost Never

TABLE 3
 DATA POSTTEST RESULT

Subject	Eye contact frequency	Score	Category
DM	7	31	Occasionally
MF	9	40	Occasionally

Based on the table 1 and 2, it can be seen that the eye contact score owned by the subject there are differences in eye contact ability scores after calculating the score using the Eye Contact PII-KS given to each subject after being given the treatment of child-centered play therapy method. In addition, after obtaining the pretest and posttest scores, the researcher conducted a descriptive statistical analysis, which included calculating the mean and median and finding the maximum-minimum value of the data.

TABLE 4
 DATA ANALYSIS OF EYE CONTACT ABILITY PRETEST AND POSTTEST RESULTS

Descriptive statistics	Pretest	Posttest
Minimum	22	31
Maximum	27	40
Mean	24,5	35,5
Median	24,5	35,5
Range	5	9

Based on Table 4, it can be seen that the pretest results, which were conducted before the subject received treatment with the child-centered play therapy method, obtained the highest eye contact ability score of 27 and the lowest was 22. The mean was 24.5 and the median was 24.5. The results of the post-test conducted after the subject was given the treatment of the child-centered play therapy method obtained the highest eye contact ability score of 40 and the lowest was 31. The mean score was 35.5 and the median was 35.5.

Descriptive statistical analysis was also performed on the data, and the mean of the post-test score was $Me = 35.5$ with a median of 35.5, and the highest score was 40 and the lowest score was 31. Based on the results of the pretest and posttest that were conducted, it can be seen that there is a difference in the subject's ability to make eye contact, where the mean of the posttest $Me = 35.5 >$ pretest $Me = 24.5$. There was an increase in the posttest score after treatment with the child-centered play therapy method.

IV. DISSCUSSION

The process of providing treatment part of one of the efforts can be done by training the development of children's eye contact skills, because children who cannot possibly learn without seeing, looking or giving their attention. According to Josefi and Ryan in (Salter et al., 2016) theoretically identify four target areas of CCPT intervention, namely imitation response, joint attention, theory of mind, and symbolic function skills during play, which are suitable to be given to children with autism who have developmental barriers in communication and social interaction.

This is in line with (Ray et al., 2019) eye contact plays an important role in social interaction. Eye contact can show attention and visual coordination between people, objects, or other things that attract attention, so it can help a person pay attention and understand the messages that others convey through body language, movements, and facial expressions (Paramita et al., 2018). Eye contact ability of children with autism at My Kids Therapy Center showed a difference before being trained without any intervention and after being trained using the child-centered play therapy method.

Observing the treatment in the first session, both DM and MF were still not paying attention to the therapist who had invited them to get to know each other, and were still

being instructed to sit facing the therapist at all times, but were still interested in the block stacking toys that were available. For response skills such as name calling, he has not been able to respond spontaneously and will only respond such as turning his head when his toy is taken away, which can be seen by the subject immediately looking at the toy and immediately screaming when he feels disturbed when his toy is touched. Then for spontaneous eye contact training responses, through verbal calls and assisted physical touch (non-verbal), DM can respond to 1 out of 5 trial calls during 15 minutes of observation. Then for the ability to respond such as name calling, he has been able to respond spontaneously by turning his head, but to look at other people who call MF is still minimal to make eye contact. Then for the response to spontaneous eye contact training through verbal calls and assisted physical touch (non-verbal), MF can respond 2 out of 5 trial calls during 15 minutes of observation.

Furthermore, in the final treatment session, DM and MF were able to pay attention to the therapist playing the toy, but were still instructed to sit facing the therapist and look at the therapist consistently. Then for the response to spontaneous eye contact training, through verbal calls and assisted physical touch (non-verbal) DM can respond 2 out of 5 trials of calls and 2 times make eye contact with the therapist spontaneously with the duration of eye contact for 4-5 seconds in 15 minutes of observation. Subjects DM and MF in the ability to respond such as name calls have begun to be able to respond spontaneously, although they still occasionally turn their heads and have begun to make brief eye contact spontaneously. Then for the response to spontaneous eye contact training through verbal calls and assisted physical touch (non-verbal) MF can respond 2 out of 5 trials of calls and 2 times make eye contact with the therapist spontaneously with eye contact duration for 4-5 seconds in 15 minutes of observation.

The use of child-centered play therapy is one of the positive outcomes for children with autism at My Kids Therapy Center to further improve their eye contact skills. This method is an intervention that facilitates the relationship between the child and the therapist and the environment that is designed to train imitation skills as a progression of cognitive and behavioral maintenance focus (Bratton et al., 2014). In the process of providing treatment, one of the efforts made is to train the development of the child's eye contact skills, as it is unlikely that the child will learn if he or she does not see, look, or pay attention. In addition, games are also selected in accordance with the child-centered play therapy method, namely block game media, block toys have been shown to develop the development of eye and hand coordination and provide freedom of expression and imagination in children (Vanvleet et al., 2011) and among different types of block game media, block stacking games have been shown to be effective in training children's eye contact skills (Cunningham, 2022).

The child-centered play therapy method has several benefits, especially when given to children. Some of the benefits of child-centered play therapy are: a) Helping children develop better social, emotional and cognitive skills

by allowing them to express themselves freely through play; b) Helping children overcome anxiety by making them feel comfortable and providing positive ways to overcome anxiety, especially when they have difficulty interacting and communicating; c) using play to help children feel more relaxed and reduce stress caused by troubling problems or situations; d) helping to build a positive relationship between the child and the therapist or other adults so that children feel more comfortable opening up, talking about their problems, and getting help (Ray et al., 2019). The child-centered play therapy method contributes greatly to the developmental process of children with autism at My Kids Therapy Center, especially in the development of children's social skills in the practice of improving eye contact skills.

Based on the results of the research, it can be carried out on the subject of the effect of child-centered play therapy method on the eye contact ability of children with autism at My Kids Therapy Center. This is supported by the posttest and pretest data of the subject's eye contact ability where DM's posttest score is 22 higher than the pretest score of 31 and MF's posttest score is 27 higher than the pretest score of 40. This is related to the research conducted by (Megawati et al., 2021) the results of the study concluded that the provision of child-centered play therapy methods is effective for the eye contact ability of children with autism. This study is said to be effective because in the posttest results there was an increase in eye contact ability with objects and people with a comparison of scores on the posttest higher than the pretest after being given the child-centered play therapy method.

V. CONCLUSION

All The conclusion of this study is that there is an effect of the child-centered play therapy method on the eye contact ability of children with autism at My Kids Therapy Center, as evidenced by the posttest score being higher than the pretest score.

For any institutions who providing child therapy services may wish to consider using and developing child-centered play therapy as an additional intervention to support children's learning, especially to improve eye contact skills in children with autism.

For future researchers, it is expected to look for more various sources and references related to the child-centered play therapy method, and explore other types of toys besides block stacking games that are suitable for helping therapists to provide child-centered play therapy methods, so that the results of their research can be better and more complete.

REFERENCES

- Ambarsari, M. A. (2022). *Mengenal ABK (Anak Berkebutuhan Khusus)* (Baquandi Lutvi Yoseanto, Ed.; Vol. 1). PT Human Persona Indonesia.
- Bratton, S. C., Ray, D. C., Edwards, N. A., & Landreth, G. (2014). Child-Centered Play Therapy (CCPT): Theory, Research, and Practice. *Person-Centered and Experiential Psychotherapies*, 8(4), 267–281.

- Center for Disease Control and Prevention. (2022, December 14). *Autism Spectrum Disorder*. <https://www.cdc.gov/>
- Cunningham, D. (2022). *Symbolic Representations of Preschool Children: Relations Among Block Play, Picture Drawing and Emergent Literacy*.
- Herlina, Susilana, & Rudi. (2019). *Program Intervensi Mandiri: Melatih Keterampilan Sosial Pada Anak Dengan Autisme*. Universitas Pendidikan Indonesia.
- Iswinarti, Hormansyah, R., & Dwi. (2020). Meningkatkan harga diri anak slow learner melalui Child Centered Play Therapy. *Persona: Jurnal Psikologi Indonesia*, 9(2), 319–334. <https://doi.org/10.30996/persona.v9i2.3491>
- Kemkes. (2022). *GSA (Gangguan Spektrum Autisme) - ASD (Autism Spectrum Disorder)*. <https://www.kemkes.go.id/folder/view/01/structure-publikasi-data-pusat-data-dan-informasi.html>
- Kristiana, I. F. (2016). *Psikologi Anak Berkebutuhan Khusus*. UNDIP Press.
- Landreth, G. L. (2023). *Play Therapy: The Art of the Relationship* (4th ed.). Routledge.
- Megawati, V. L., Sani, Y., & Wardany, O. F. (2021). Efektivitas Child-Centered Play Therapy Untuk Meningkatkan Kemampuan Kontak Mata Pada Anak Autism Spectrum Disorder Di Pkkl Growing Hope. *SNEED: Jurnal Pendidikan Khusus*, 1(1), 9–16. <https://doi.org/10.36269/sj.v1i1.608>
- Paramita, P. N., Dewa, A. D. T., & Hartiani, F. (2018). Modifikasi Perilaku Kontak Mata Pada Anak Dengan Autism Spectrum Disorder (ASD). *Seurune: Jurnal Psikologi Unsyiah*, 1(1), 34–52. <https://doi.org/10.24815/s-jpu.v1i1.9923>
- Pradita, V. G. (2021). *Identifikasi Ragam Terapi Bermain Pada Anak Autisme: Studi Literatur*. Universitas Muhammadiyah Malang.
- Ray, D. C., Landreth, & Garry. (2019). Child Centered Play Therapy. *Association Of Play Therapy*, 14(3), 18–19.
- Saifuddin, A. (2019). *Penelitian Eksperimen Dalam Psikologi* (1st ed.). PRENAMEDIA GROUP.
- Salter, K., Davies, M. D., & Beamish, W. (2016). The Effects of Child-Center Play Theraphy (CCPT) on The Social and Emotional Growth of Young Australian Childern with Autism. *International Journal of Play Therapy*, 25(2), 78–90. <https://doi.org/10.1037/pla000001278>
- Vanvleet, R., Andrea, E., & Cynthia, S. (2011). *Child-Centered Play Therapy*. The Guildford Press.