

Play Therapy as a Nursing Intervention in Pediatric Surgical Wards

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Key points:

- Introduction
- Understanding Preoperative Anxiety in Children
- What is Play Therapy?
- Nursing-Led Play Therapy in Surgical Settings
- Evidence of Effectiveness
- Implementation Framework
- Barriers and solutions
- Example from case study
- Conclusion and Future Recommendations

Introduction

Hospitalization can be a distressing experience for children, triggering fear related to needles, discomfort, medications, and unfamiliar environments. Unpleasant feelings, distress, and anxiety might be brought on mainly by being separated from their parents, unknown staff, and perceived loss of autonomy¹⁰. Procedural pain exacerbates psychological suffering, evoking fear and emotional turmoil in children. Anxiety before or during procedures can cause considerable psychological suffering in children, resulting in deterioration, intense negative feelings, apathy, and sleep difficulties.²

Understanding Preoperative Anxiety in Children

Preoperative anxiety in children is impacted by age, phase of development, and prior medical encounters. This fear may lead to behavioral shifts, increased pain perception, and surgical complications.⁸ In clinical terms, distress manifests as inconsolable, agitated weeping soothed by the presence of mother or nurse comfort¹¹. Severe cases, such as emergence delirium involves disorientation in which the youngster cries,

acts irrationally and disobediently that can lead to long-term detrimental behavioral changes.³

What is Play Therapy?

Play therapy is a structured and developmentally appropriate clinical approach that uses the natural medium of play to help children express emotions, resolve internal conflicts, and adapt to stressful environments. It recognizes that children often lack the verbal sophistication to articulate fear or trauma. Instead, they communicate through symbolic or imaginative play. In healthcare settings, play therapy provides a safe mode of emotional exploration.⁶

• Directive and Non-Directive Approaches

Two primary approaches dominate therapeutic play: directive and non-directive. In directive play therapy, the nurse or therapist actively guides the session, using selected toys or role-playing scenarios to target specific issues such as surgical anxiety, behavioral resistance, or trauma. In contrast, non-directive play therapy is led by the child. The healthcare provider acts

as an observer, allowing the child to choose how to play and what narratives to explore.⁶

- **Modalities and Clinical Integration**

Therapeutic play can take several forms depending on the child's needs and the clinical context, such as Instructional play for procedural preparation, physiological play to stimulate motor coordination, or manage physical recovery. Incorporating therapeutic play into pediatric settings reduces procedural fear, enhances compliance, and improves communication between children and healthcare teams.⁶

Nursing-Led Play Therapy in Surgical Settings

Nurses are uniquely positioned to lead therapeutic play in surgical settings due to their continuous, direct interaction with pediatric patients and their families. They integrate play therapy into routine care and transform the hospital from an intimidating place into a therapeutic environment where children can find familiarity and emotional safety.⁹

- **Medical Play and Surgical Preparation**

Medical play is one of the most common and effective forms of therapeutic play used by nurses in surgical wards. Through the use of toy instruments, anatomical dolls, and illustrated stories, children simulate their upcoming procedures in a safe and controlled way, exhibiting fewer signs of distress during postoperative recovery.⁵

- **Creative and Technological Interventions**

In addition to traditional methods, nurses also employ storytelling, drawing, puppet theatre, and interactive technology to engage children emotionally and cognitively. Digital applications and virtual reality tools are now being used to distract children during needle insertions, significantly reducing perceived pain and stress.⁶

- **Developmental and Cultural Considerations**

Effective nursing-led play therapy requires a thoughtful understanding of child development and cultural sensitivity. Not all children will respond similarly to the

same intervention, so play strategies must be adapted according to age, language, developmental stage, and family background. Nurses must assess each child's emotional state and personal preferences, ensuring that the chosen intervention resonates with their lived experience. By doing so, nurses not only support individual healing but also uphold the broader principles of family-centered and trauma-informed care.⁵

Evidence of Effectiveness

Several studies have proven that including play-based interventions into surgical preparation dramatically reduces anxiety, allows for smoother procedural transitions, and improves postoperative recovery. These gains were not restricted to the children alone; parents of these patients reported lower worry and better satisfaction with care.⁵ Children who are allowed to digest their surgical experiences through play are more likely to exhibit adaptive behaviors such as working with personnel, expressing themselves verbally, and displaying interest rather than dread⁶.

Implementation Framework

Play therapy needs to be successfully integrated into nursing practice through organized training and institutional support in order to be effective and long-lasting on pediatric surgery wards. To confidently and accurately provide child development, communication therapy, and play modalities, nurses must get stress.¹

- **Standardization in Preoperative Procedures**

Including play therapy in preoperative procedures should be considered a basic part of child-centered surgical treatment, not an optional addition. Incorporating play therapy into the care protocol from the beginning can significantly lessen the anticipatory stress that children endure before surgery.⁴

- **Cooperation and interdisciplinary assistance**

Collaboration between nurses, child life specialists, psychologists, and families is also essential for

successful implementation. Although they are frequently the main play facilitators in surgical settings, nurses' efforts are significantly enhanced when they are incorporated into a multidisciplinary care paradigm.⁹

- **Environmental Support and Resources**

Planning resources is crucial to play therapy's long-term sustainability. Hospitals must set aside specific areas where uninterrupted therapeutic play can take place and keep a stock of suitable games, toys, art supplies, and computer tools on hand⁹.

Barriers and solutions

Following table indicates the barriers in implementation of play therapy⁶ and their potential solutions:

Barrier	Description	Potential Solutions
Time Constraints	Nurses have limited time for customized play treatments due to their hectic schedules	Integrating play therapy in routine plans with time slots.
Workforce Shortages and Role Ambiguity	Lack of committed child life professionals	Training of more nurses.
Cultural Sensitivity	Cultural differences affect therapy acceptance	Adapt play therapy to cultural norms.
Lack of Evaluation Tools	No tools to assess therapy outcomes	Developing assessment Scales

Example from case study

A four-year-old kid who had multiple venipunctures for post-surgical lab monitoring developed increasing

resistance during blood draws. To combat this, the ward implemented a tablet-based distraction game geared toward young patients. During the next surgery, the nurse entertained the child with a game featuring animated hospital characters going through similar experiences. The boy became involved in the game, which effectively diverted his attention during the process, resulting in little movement and no crying. This case demonstrates the value of interactive digital tools in procedural pain management, particularly when employed as part of a comprehensive therapeutic play strategy in surgical settings.⁷

Conclusion and Future Recommendations

Play therapy is an evidence-based method for reducing anxiety, discomfort, and emotional distress in pediatric surgery patients. Future research should focus on standardizing techniques and investigating emerging technologies such as virtual reality to improve therapy effects. Sustaining and expanding therapeutic play treatments requires institutional support, cultural adaptation, and multidisciplinary teamwork.

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