Effects of Play-Therapy on some Psychological Problems of Beggars' Children in Destitute Center: Imo State-Nigeria

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Abstract

The study investigates the effects of play-therapy method in solving some psychological problems of children in Destitute Centres in Imo State of Nigeria. The study is predicated on the risk of begging in Nigeria which has created a big void in the life of children of beggars. The study is restricted to the destitute centres in Imo State for proper control of the study. The children of beggars face many psychological problems such as anxiety, depression and obsessive behaviours to mention just a few. This study is guided by three research questions. The method of the study is quasi-experimental design, pre/post-test control group design. Multi-stage sample techniques are used to select 100 participants. The Intervention, Play-Therapy method is used for experimental group. The instruments for the study were Goldberg Depression Inventory by Goldberg (1993) and Beck Anxiety Inventory by Beck (1980). The statistical tool used is Analysis of Covariance (ANCOVA) at 0.05 level of significant. The result shows that play-therapy methods significantly reduces the level of anxiety and depression of children of beggars in destitute centres in Imo State.

Introduction

Begging is seen as a social problem arising from poverty which has psychological consequences such as anxiety, depression and obsessive compulsive behaviour on the victims if not well addressed. It can also bring about the development of inferiority complex in beggars' children and prevent them from interacting freely with other children in the society. Childrenof beggars find themselves under a lot of pressure in both social and economic spheres of their lives. They tend to live at the margin of existence and opportunities. They may be exposed to a lot of difficulties, stress and psychological problems. The art of begging, especially in a developing country such as Nigeria, emanated from cumulative problems such as hunger, rural/urban migration, political instability, social insecurity, unemployment, culture and poverty resulting in homelessness. Without a home, most individuals would face emotional difficulties. Beggars in Imo State, like in other parts of Nigeria, appear to ply their trade in all busy roads with potholes and public places at all times in order to survive. Periodically, law enforcement officers raid or arrest the beggars in an attempt to get them off the streets and place them in destitute centres.

Hectic life and activities surrounding children of beggars inside and outside destitute centres pose serious challenges to the children and these tend to affect the physical, social and psychological aspects of their lives (Sadiku, 2002). These often manifest as psychological problems such as anxiety, obsessive-compulsive behaviour (OCB) and depression.

Anxiety is a combination of heightened physiological arousal and excessive worry (Jelili, 2006). This behaviour occurs in these children when they experience excessive worry over their well-being, fear of isolation from other children in the society and other environmental challenges (Bratton & Ray, 2000). Obsessive-Compulsive Behaviour (OCB), which is characterized by

unreasonable thoughts and fears, lead children of beggars to engage in repetitive behaviours which may interfere with their social behaviour and ability to function well in social activities and even in public places.

In order to effectively help children of beggars who are experiencing social, emotional, psychological and behavioural difficulties, play therapy is one of the interventions that a trained counsellor can employ to ameliorate the problems before they degenerate to major psychopathologies that only trained and experienced clinicians can handle. Play therapy is an interpersonal process whereby a trained counsellor systematically applies the curative powers of play (for example relationship enhancement, role-playing, communication and mastery) to help clients resolve their current psychological difficulties and help prevent future occurrence (Landreth, 2001). Play therapy was established by Association for Play Therapy (1982) as a specialized treatment modality. Play Therapy is widely used among psychologists and counsellors to treat a wide range of emotional and behavioural problems (Bratton & Ray, 2000). It is a vehicle for communication between children and a counsellor on the assumption that children will use play materials to directly or symbolically act out feelings, thoughts and experiences that they are not able to meaningfully express through words (O'Connor, 2005). The Therapy is used for children aged from 4 to 15 years to provide a way of expressing their experiences and feelings through a natural, self-guided, self-healing process. Due to the peculiar status of children of beggars who are often not educated, play therapy may be adequate to bring out the likely psychological problems they face in their daily activities. Knowledge is often communicated through play. Therefore, it becomes useful as an important vehicle for them to know and accept themselves and others.

There are numerous and sensitizing play-materials that can be used to identify negative feelings in them. The use of games such as Colour Your Life, Pick-Up-Sticks, Balloons of Anger, 'Worry Can'and others are some of the components of play therapy techniques (Adedibu, 2000). Play Therapy may therefore provide numerous benefits to the affected children of beggars, among them are enjoyment, relationship building, improved communication and healthy physical, mental, emotional and social benefits. Play has restorative functions when dealing with social challenges, grief, depression, obsessive compulsive behaviour, anxiety and cooperative skills (Jensen-Hart, 2010). Play therapy is in consonance with basic concepts and postulations of psychoanalytic theory of Sigmund Freud (1958) that individual beings have feelings and thoughts that are unacceptable to and are repressed by the conscious mind. In a situation where they are isolated, they may feel rejected, depressed, anxious and exhibit obsessive-compulsive behaviour. The theory is also useful in bringing about social interaction between children of beggars and their environment. In order to effectively meet the mental health needs of children, counsellors need to leave the abstract world of verbalization and enter the child's world of concrete reality via the child's language and play. Play, a natural phenomenon amongst children irrespective of their circumstances, can therefore be a veritable strategy for improvement as they play with adults. Landreth (2001) believes that a therapeutic working relationship with children is best established through play and the relationship is crucial to the activity referred to as therapy.

Previous studies in Nigeria such as O'Connor, (2005) and Okunmadewa (2001) have focused on beggars and ignored the more critical and even more vulnerable segment of the beggars

population; these are children of beggars. Among the children are also those who are disabled, in terms of their physical, emotional, social, moral state and behaviours. Children of beggars would fall within this category because of the presence of social and psychological problems in their lives which makes it impossible for them to adequately meet their educational, vocational, personal and social needs. Children of beggars in destitute centres often experience a variety of difficulties ranging from poor living conditions, lack of finance, personal problems (isolation and loneliness), risk of accident, abuse from the public and exposure to criminal acts among many environmental problems.

Poverty makes some children to live and/or work in the street, do odd jobs, increases their vulnerability to trafficking, armed robbery attacks/involvements, rape and other vices (Okunmadewa, 2001). The Significance of the study is that it provides information for counsellors to use in providing adequate counselling services to these set of learners and also to help the children psychologically to acquire effective skill for their development.

Therefore, the study seeks to examine if there would be a significant difference in the post-test mean scores on depression between children of beggars in destitute centres exposed to Play Therapy and those in the control group. It will also explore the effect of Play Therapy on post-test mean scores on Anxiety among children of beggars in destitute centres.

The research is guided by the following questions:

- 1) What significant difference, if any, would occur in the post-test mean depression scores of children of beggars in Play Therapy and those in control groups?
- 2) What will be the effect of Play Therapy on the post-test mean scores on Anxiety between children of beggars in destitute centres?

Methods

The design for this study was quasi-experimental pre-test/post-test control group design. This is used so as to eliminate bias and provide an avenue for attributing the difference(s) if there is any between the experimental and control group.

Simple random sampling, through the hat and draw method, is used to select two destitute centres from the three existing ones. The two destitute homes selected are Akpodim Rehabilitation home as Training centre 1 and Orlu Cheshire home as Training centre 2. Through stratified random sample, 120 participants which consist of 69 and 51 from the two training centres homes respectively are selected. The base data were administered to them and the participants who scored 30 and above were selected and this showed that they had psychological problems. In all, 103 participants were selected because they all scored 30% and above while the remaining 17 participants were not used because they had scored below 30%. From these 103 participants, 3 participants were dropped because they could not provide their bio-data and other necessary information. Therefore, the total participants used for this work were 100. Data collected were analyzed using both descriptive and inferential statistical tools.

Results

Table 1: T-test of Pre and Post-test Depression scores of the participants across the

experimental conditions

Group	N	Pre-test Depression		Post-test Depression		
		Mean	Std. Dev	Mean	Std. Dev	Mean Difference
Play-therapy group	58	33.24	2.11	27.66	1.05	5.58
Control group	42	33.05	1.75	31.76	1.69	1.29
Total	100	33.16	1.93	29.71	1.37	3.44

Evidence from Table 1 shows that participants exposed to Play Therapy training had a higher mean difference of 5.58, whereas the Control Group had 1.29. To determine whether significant difference exists in depression scores among participants, one-way ANCOVA was used and the results are presented in Table 2.

Research Question (1): What significant difference if any would occur in the post-test mean Depression scores of children of beggars in Play Therapy and those in control groups?

Table 2: ANCOVA Test of Difference in Post-test Depression between Experimental and

Control Groups

Source	Sum of Squares	Df	Mean Square	F
Corrected Model	430.41	2	215.21	129.64*
Covariates(Pre-test Depression)	19.57	1	19.57	11.79*
Experimental condition	418.67	1	418.67	252.21*
Error	161.15	97	1.66	
Corrected Total	599.39	99		

^{*}Significant at 0.05; df= 1 & 97, F-cal =252.21; F-critical= 3.94

It is, therefore, evident that there is a significant difference in post training depression between children of destitute beggars in the Play Therapy group and those in the control group. It is therefore concluded that training in play therapy was successful in ameliorating depression among children of beggars in destitute centres.

Hypothesis two states: that play-therapy will not have a significant effect on the post-test mean scores on Anxiety among destitute children of beggars. The results of the analysis are presented in Tables 3 and 4.

Table 3: T-test of Pre and Post-test Anxiety scores of the participants across the

experimental conditions

Group		n	Pre-test Anxiety		Post-te	est Anxiety	
-			Mean	Std. dev	Mean	Std. dev	Mean Difference
Play th	erapy	58	21.83	2.50	14.32	1.54	7.51
Control grou	ıр	42	21.48	2.72	18.83	1.91	2.65
Total		100	21.66	2.61	16.58	1.73	5.08

Results in Table 3 shows that participants exposed to Play Therapy had a post-test mean Anxiety score of 14.32 (Sd=1.54) against a pre-test mean anxiety score of 21.83 (Sd = 2.50) which yielded a mean reduction of 7.51 between the pre- test and post-test mean Anxiety. The control group obtained a mean pre-test Anxiety score of 21.48 and recorded a post-test score of 18.83 (sd=1.91) at post-test thus yielding a pre-test post-test mean difference of 7.51. Analysis of Covariance was used to determine whether significant differences exist in post test anxiety scores between participants in the Play Therapy and Control groups. The results are presented in Table 4.

Table 4: ANCOVA Test of Difference in Post-test Anxiety between participants in Play

Therapy group and those in the Control group

Source	Sum of			
	Squares	Df	Mean Square	${f F}$
Corrected Model	499.24	2	249.62	86.08*
Covariates(pre-Anxiety)	4.69	1	4.69	1.62ns
Experimental Condition	498.81	1	498.81	172.00*
Error	281.92	97	2.90	
Corrected Total	785.42	99		

^{*}Significant at 0.05; F-cal =172.00; F-critical= 3.94; df= 1 & 97, ns = not significant.

The results in Table 4 show that for the treatment condition, the F-value obtained was 172.00 which is greater than the F-critical value of 3.94 given 1 and 97 degrees of freedom at 0.05 level of significance This indicates that training with Play Therapy was effective in reducing anxiety among children of beggars in destitute centres. Therefore, hypothesis 2 was rejected.

Discussion of findings

The first hypothesis states that there is significant difference in depression among children of beggars in destitute centres in the play-therapy group and those in control group. These differences may be as a result of acquisition of knowledge received from the play-therapy training programme which is seen as a viable intervention for treating a variety of emotional and behavioural problems such as withdrawal, anxiety and depression in the lives of children of beggars in destitute centres. Bratton & Ray (2000) summarized the results of a comprehensive literature review of 82 play therapy research studies from 1942–2000 in which positive outcomes were noted with each of the research areas. Self-concept, behavioural adjustment, social skills, emotional adjustment, intelligence, and anxiety/fear are topics demonstrating the most significance regarding the efficacy of play therapy. They maintained that Play Therapy

intervention is to help children participate in learning, self-avoidance, gaining a sense of responsibility, controlling emotions, showing respect, self-acceptance and accepting others, improving behaviours such as social skills, increasing self-esteem and reducing depression.

The findings show that there is significant difference in the level of anxiety among children of beggars in destitute centres exposed to Play Therapy group and those in Control group. These differences may be as a result of acquisition of knowledge received from the Play Therapy Training programme which is seen as a viable intervention for treating emotional problems such as anxiety in the lives of children of beggars in destitute centres. The treatment and game used helped the children to gain self-esteem and fight anxiety as they realized they can win in life if they win in games. The researcher interpreted the colour of sticks that the children chose and the colours that they avoided. In support of this finding, Victor (2007) pointed out that many children with the problem of anxiety undergo a successful cognitive-behavioural treatment with play therapy though some children show the least response to the treatment. It has been suggested that in a counselling context, play is to the child, what verbalization is to the adult.

The implications of the findings on anxiety here support the use of play therapy to assist children of beggars in dealing with their fears of social stigma, hunger and even poverty. The counsellor's resourcefulness in using some of the play therapy techniques such as worry can and balloons of anger was positive in assisting the children's development of their self-concept and self-esteem. This finding therefore fills the gap in knowledge.

In a nutshell, the findings were that play-therapy had significant impact on depression among children of beggars in destitute centres and that there is significant effect of experimental conditions on post-test scores of anxiety among beggars' children.

Conclusion

In the light of the discussions and summary of findings, the following conclusions are made: There is significant effect of experimental conditions on post test scores of anxiety among beggars' children; and that play-therapy had significant effect on obsessive compulsive behaviour among children of beggars in destitute centres.

Recommendations

Based on the findings of this study, the following recommendations are made:

- 1. Stakeholders should ensure the establishment of Counselling Centres in the destitute centres to be managed by a trained counsellor.
- 2. A workshop should be planned for beggars' children in all states educating them on the need to be free from begging, inviting resource persons to teach various trades and liaising with federal, state and local governments to provide funds for take-off projects such as shoe making, weaving, soap making etc industries.
- 3. Ministry of Social Welfare should establish a destitute department funded by government in order to organize and manage destitute centres in all the states.
- 4. Government should instruct employment agencies to reserve certain percentage of their work force for them.
- 5. A destitute centre should perform three main functions such as physical restoration, educational, vocational, psychological and psychosocial rehabilitation.

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