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INFLUENCE OF PLAY THERAPY ON THE PSYCHOLOGICAL WELL-BEING OF SEXUALLY ABUSED CHILDREN IN AINAMOI SUB-COUNTY, KERICHO COUNTY KENYA

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Abstract: Child sexual abuse has been researched and found to be a serious and ongoing problem world over. World Health Organization (WHO) reported that about 20% of girls and 5% to 10% of boys worldwide are victims of sexual abuse. The Ministry of Public Service and Gender in Kenya perceives child sexual abuse as being affected by environmental, cultural, social, and gender disparities. To mitigate the effects of child sexual abuse on the victims, regular counseling needs to be arranged to manage the effects of this ordeal on the child. This study soughtto assess the influence of counseling approaches on the psychological well-being of sexually abused children in Ainamoi Sub-County, Kericho County, Kenya. Specific objectives of this study included investigating the influence of play therapy, art therapy and verbal therapy on the psychological well-being of sexually abused children in Ainamoi Sub-County, Kericho County. The study was guided by Cognitive Behavioral theory and adopted across sectional research design for addressing the study variables. The target included children who accessed therapy services in Kericho Referral hospital which is the main referral hospital in the county using the hospital records, their parents and guidance as well as the counselors. The study sample comprised of 150 participants, 4 counselors, 73 sexually abused children and 73 parents/caregivers. Simple random sampling was used in selecting the study respondents. Primary data was gathered using structured questionnaires. The instruments were pre-tested for reliability using alpha (α) method by Cronbach Alpha formula with a threshold of acceptance at 0.7. Quantitative data was analyzed using descriptive statistics with the aid of the Statistical Package for Social Sciences Version 22.0 while qualitative data was analyzed thematically using content analysis. Data was presented in the form of tables and figures. The study found out that play therapy has some influence on wellbeing of the children and thus the alternative hypothesis was accepted and the null hypothesis rejected. The study recommends that hospital in Kenya should have child counseling units where counseling approaches such as play therapy can be used to psychologically rehabilitate sexually abused children back to normalcy in the society.

Keywords: Counseling, Play Therapy, Psychological Wellbeing.

1. INTRODUCTION

According to World Health Organization (WHO), seventy-three million boys and one hundred and fifty million under-18 girls had been sexually abused in 2002 (WHO, 2014). The incident where 11% of the girls and 4% of boys were subjected to forced sex in high schools was recorded in USA by Disease Control Center and Justice Department of U.S (Irish, 2010).

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Worldwide, Department of Health (2012) found out that out of five females, more than one were affected and out of ten males, more than two were affected by sexual abuse. According to Domhardt (2015), Child Sexual Abuse (CSA) amongst boys and girls was found to be 5.6% whereby boys were abused at their tender age compared to girls in Brazil. More than 60% of the reported cases showed that it happened to them before the age of 12. Furthermore, CSA was reported to have happened concurrently with physical abuse in both younger and older children. Moreover, CSA was reported to make a cumulative percentage of 1% of the disease burden globally and associated with drinking alcohol, illegal substance misuse, psychiatric disorders occurrences in addition to spread of sexually transmitted diseases all making a 20% of disease burden globally (Domhardt, 2015).

A China-based study by Song (2014) found out that some 33 per cent of participants reported sexual harassment. Girls had a lifetime burden of 41 per cent andwhileboys29.5 per cent. Another research among urban Chinese population revealed that CSA had a prevalence of 4.2 percent (males: 5 percent, females: 3.3 percent) of sexual harassment before the age of 14 years (Luo, 2014). It has been a challenge to find out the precise number of sexually abused children due to the fact that the level reported differs across surveys and data sources. According to Ortega (2010), involving a child in sexual activity without his/her knowledge or informed consent counts to child sexual exploitation. This violates the law and societal inequalities since the child is not ready and does not have an ability to consent events. It is more less the same as inciting or exploiting a child to engage in a practice that is unlawful in relation to sexual activity for instance prostitution, child abuse of pornographic production and materials and human trafficking.

Al-Mahroos (2011) explains child abuse as every kind of bodily and or emotional mistreatment, sexual violence, child negligence and degradation whose outcome in actual or possible harm to the health of a minor, their life, their development or reputation based on a responsible relationship or trust or control. Al-Mahroos (2011) further defines child violence as 'any indecent act or failure by a parent or caregiver to protect a child. Cast (2015) published a report on sexual abuse of children and classifies adverse effects into three groups: physical health effects, social outcomes, emotional and sexual outcomes, and victimization. People who are survivors of childhood sexual abuse suffer physical health issues, such as persistent pelvic pain and non-epileptic seizures.

Depression, anxiety, obsessive-compulsive symptomology, eating and post-traumatic stress disorders, dissociative and borderline personality disorders count to mental health problems that are associated with childhood sexual abuse in terms of psychological impact. According to Cast (2005) many of the behavioral and/or psychological effects that are linked to sexual abuse in adolescence comprise loss of self-esteem, frustration and anger, suicidal tendencies, self-injurious behaviour, inadequacy in learning, alcohol addiction, social disadvantage and feelings of inadequacy.

Based on a study done by Domhardt (2015), many sexually exploited children and adolescents tend to get involved in an extensive variety of mild adverse effects adulthood whereas some only manifest the symptoms in later infancy and adolescence or later on. Intervention studies often remove victims who are asymptomatic, as their addition is to be expected to underestimate the cumulative impact of the symptomatic the victim's intervention has. Chances are low that a patient without symptoms would undergo counselling in routine clinical practice; regardless of how, attention needs to be given to the likelihood of an asymptomatic patient experiencing "sleeper effects". Adults with personality disorders and other psychological conditions such as stress show a number above average of incidence of children sexually abused at a younger age. According to Domhardt (2015), stress management can be easily achieved through parental support; however, parental support provision can be compromised by Parents' perception on the CSA disclosure to them. The relationship of the children with a partner and essence of the relationship between the children and the parent as a result can be affected (Fresno 2014). Considering that younger children have a higher dependence on parental care as compared to children who are older and considering the significance of parental assistance for children in post-CSA transition, research into the consequences of CSA in young children is relevant. According to a report by WHO based on many countries, between 16 percent and 59 percent of women in African have at one time or the other ever witnessed intimate partner sexual abuse (WHO, 2005). Sex trafficking happens every 20 seconds in South Africa. According to American AIDS Research Foundation (2005), Sexual Gender-Based Violence (SGBV) and HIV have been perceived to be among the dual epidemics with small data available on the same. However, additional data show that forced sexual initiation among Sub-Saharan Africa girls is regarded as normal in relationships. Majority of the countries in Africa started valuing prevention of SGBV over the last decade with them having a unifying factor against SGBV (Keesbury and Askew, 2010).

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Kenya developed an initiative, Violence against Children Study, in the year 2020 which covered as many households as 1306 females and 1622 males between the age of 13 and 24 years old. This initiative was developed to bring together existing and lifetime emotional, physical and sexual abuse involvements for both female and male children to the highlighted groups below; ages between 18-24 years old who were involved in violence act before age 18 and age 13-17 years old who were involved in violence act during 1 year preceding the research (National survey on current affairs, 2010). This survey yielded results that exhibited child abuse as a big problem in Kenya. Based on abuse rates before the age of 18 as reported by ages 18-24 (lifetime experiences), 32% and 18% of females and males respectively were involved in sexual abuse at their tender age. On the other hand, 62% and 73% of females and males respectively were involved in physical abuse while 26% of females and 32% of males went through some types of abuse when they were young. Finally, the survey indicated that 13% of women and 9% of men witnessed all three types of child abuse (National Survey, 2010). The most frequent culprits for this sexual abuse against children were found to be romantic partners that comprise of 47% boyfriends and 43% girlfriends followed by neighbors. For the case of physical violence by family members, mothers and fathers were reported to be the recent victims. Among males, the most frequent victims of physical assault by an authority figure were police-pursued teachers. Three out of every ten women between the ages 18-24 who recorded having completed sexual intercourse before age 18 (i.e., physically forced or pressurized sex) became pregnant as a consequence. Around 90% of men and women who were involved in sexual abuse as children reported going to HIV testing. Among females of age 18-24 years who were sexually harassed when they were children, around 7 percent received cash to engage in sex in comparison with 2 percent who had not encountered abuse before age 18. Overall, fewer than 10% of those who encountered sexual or physical abuse sought medical assistance (State Survey, 2010).

Everyone especially in the society needs to take into account the psychological well-being of the sexually exploited children. Quite frequently children who are sexually abused have various signs of depression, dissociative behaviors, embarrassment, self- blame, remorse, anxiety, eating disorders, somatic anxiety, anxiety, fear, denial, sexual issues, relationship problems, and trauma. This should be remembered that psychological effects arise on the children sexually abuse during the assault irrespective of the individual trauma (Asociación Americana de Psychiatría, 2015).

1.1 Statement of the Problem

Child Sexual Abuse has become a serious global epidemic with World Health Organization (WHO) estimates showing that about 20% of girls and 5-10% of the boys in the world are sexually abused victims. Child Sexual Abuse victims have been reported to exhibit a number of irregular habits which differ from one age to another. Statistics show that victims of adolescent CSA can experience psychological and social disorders ranging from low self-esteem, promiscuity, depression, anxiety and suicidal thinking. Child sexual abuse is rife in Kenya Ainamoi included with caused ranging from developmental, cultural, social, to gender disparities. These involves pressure from peers, alcohol and abuse of drugs, orphanage, deprivation, impact on internet community, a climate of silence on sexual problems in addition to inequalities between the sexes.

The situation of sexual abuse in children in Kenya has worsened over the past ten years largely due to migration of people from rural to urban areas, dysfunctional social morals together with norms, rapid growth in local and international tourism, globalization and advancement in information communication and technology. Kenya has ratified several regional and international conventions and treaties to protect children from sexual exploitation. Despite these efforts, the rate of sexual abuse among children is still on the rise in Kenya more so in Ainamoi Sub-County, Kericho County Kenya. To help in the reintegration of victims in society, it is important that they are counseled appropriately. This study therefore sought to examine the influence of Play Therapy on the psychological well-being of sexually abused children in Ainamoi sub-county, Kericho County Kenya.

2. PLAY THERAPY AND PSYCHOLOGICAL WELLBEING

Play has an important part to play in the child's growth. Research literature has well established the importance of play to children (Schafer, 2010). Learning and growth are best achieved through the playing cycle. Play helps children to express complex ideas and messages without needing to have well-developed language skills — ideas and messages they would otherwise not be able to convey (Schafer, 2010). Children can communicate their emotions, feelings, conflicts and fears through play while at the same time gaining greater self-awareness, self-esteem, coping skills and a more versatile attitude (Rakesh & Srinath, 2010). Rakesh and Srinath (2010), acknowledged that children can explore, experiment, and learn new

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skills through play. Schafer (2010) suggested this cycle gives children a sense of control about themselves and their world, which is a significant step in their development.

According to Chazan (2010), play is a cycle of growth and mastery that affects the "problem solving ability, socialization, language development, imagination, and sensorimotor skills" of children. Cognitive development research indicates a close association between cognitive development and game play. Research indicates a positive association between play and changes in concentration, skills training, and attitudes, imagination, and divergent thought and production of languages. Play is necessary for the development of basic cognitive skills; therefore, it is an effective and useful tool for the treatment of children who are unable to engage in cognitively advanced types of (Chazan therapy 2010),

There's also been good empirical evidence revealing a relation between play and the divergent thought innovative cognitive cycle. Divergent thought is a process of creating several ideas and involves many different ways of thinking. An example of a divergent work of thought would be to think of as many uses as possible for a piece of wood. This reasoning includes free association, strong scanning skills, and flexible thinking (Chazan 2010). In a sample of children in Boston, Schafer (2010) found a connection between thematic play and divergent thought.

For children experiencing a lot of issues, involving mental, social, behavioral, in addition to learning challenges and difficulties related to life stressors, the efficacy of play therapy has been studied and accepted (Schafer 2010). Play offers a healthy psychological buffer from the concerns of children and allows for freer expression of thoughts and emotions suited to the growth of children (Stout 2011).

Webb (2011) identified three aims of child play therapy: (a) growing self-worth and self-acceptance as a result of an adult therapist's caring relationship; (b) communicating, discussing and working through interpersonal disputes and issues; (c) recognizing the meaning of play, its connection with past childhood experiences, and its interaction with outside feelings and behaviors; Children use toys as their vocabulary in the world of play therapy, and play as their language to express meaning (Webb,2011). Through the use of toys and play, kids can share thoughts, feelings and fears that they otherwise cannot convey. The play therapist will help the child develop coping strategies and overcome the emotional and social ability deficits (Robinson 2011). Game therapy also promotes cognitive growth and resolution of 11 unhealthy thought patterns or internal conflicts (Robinson 2011). Play therapy can solve even the most challenging problems, and long-term approaches can be found, learned, perfected and converted into lifelong strategies (Robinson 2011).

Practice is believed to connect the inner thoughts of a child with the outside world by encouraging the child to influence or manipulate outer objects. Play combines concrete experience and abstract thinking, thus allowing the child to convey safely perceptions, emotions, feelings, and desires that may be more disturbing if addressed directly. To promote contact, play can be integrated into many forms of psychotherapy, such as CBT. Play therapy, however, was characterized for the purposes of this review as a method that uses play as the primary means to promote the speech, comprehension, and control of experiences, and not simply a means of facilitating communication. A new meta-analysis showed that play therapy had positive effects on many outcome measures, including anxiety and internalization and externalization of habits, for a broader variety of issues than exposure to traumatic events.

3. RESEARCH DESIGN

This study employed a mixed research methodology that included both quantitative and qualitative approaches. According to Wisker (2007), the approaches allowed the researcher to collect one set of findings harnessing one approach and another different method to gather facts using various methodological approaches. Questionnaire were used by the researcher to collect data

The target population were children who had been sexually abused, parents and counsellors from Ainamoi sub-county. The focus for the study was sexually abused children between the ages of 10 - 13 years who accessed therapy services from Kericho district hospital in the year 2020. The parents and guardians of these children as well as counselors deployed in the hospital who attend to them also formed part of the target population.

Simple random sampling was used to select the subjects studied. The sample size included, 73 sexually abused children, 73 parents of identified children and 4 identified counsellors seconded to Kericho district hospital.

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4. FINDINGS

The researcher sought to find out the influence of play therapy on psychological well-being of the children from the children, guardian and counsellors' perspectives where cultivation of positive energy variable was measured through dance table. This is reflected in Table 1 and Table 2 below.

Table 1: Children's Perspective on Cultivation of Positive Energy Through Dance Table

	Frequency	Percent 25	
Strongly Disagree	18		
Disagree	4	4.2	
Undecided	17	23.6	
Agree	16	22.2	
Strongly Agree	18	25	
Total	73	100	

Source: Researcher (2022)

As reflected in Table 1 above, 25% of the respondents recorded that they strongly disagreed that dancing has a positive impact on their energy with a representation of 18 respondents who took part in the study. 18 of the children who took part in the study also strongly agreed that dancing does have an impact to the energy on them with a percentage of 25% of the sampled children who took part in the study. 23.6% of the children did record that they are not decided on if dances allow them to have a positive energy or not with a presentation of 17 respondents. 16 respondents did follow with a presentation of 22.2% of the sample population did agree that dances do help them in having a positive impact around them. Only 4 of the respondents did record to disagree with dancing to having a positive energy around them with a presentation of 4.2% of the sampled population.

4.1: Counselors Perspective on influence of Information passed through the Dance Table

The researcher sought to find out the experts' opinion on how dance influences behaviours and how children see life through dancing. The findings are reflected in Table 2 below

Table 2: Influence of Information passed through the Dance Table

Change in Behaviour	Frequency	Percent	
Strongly Disagree	1	25	
Agree	3	75	
Total	4	100	

Source: Researcher (2022)

The findings in Table 2 above indicate that 75% of the experts did agree that dancing has some information that it passes to the person dancing that can change children's behavior with a frequency of 3 respondents recording this while only 1 person did record that it does not pass any information with a representation of 25 of the sampled population.

4.2: Influence of Play Therapy on the Psychological Wellbeing of Sexually abused Children

The researcher therefore sought to find out if Play Therapy has any influence on wellbeing of sexually abused children. This was done using chi square test analysis which sought to find the relationship between play therapy and wellbeing of the children. The findings are reflected on Table 8 below.

Table 3: Pearson's coefficient test between Play Therapy and Wellbeing of Sexually abused children

	Value	df	Asymptotic Significance (2-sided)
Pearson's coefficient	825.387a	255	.000
Likelihood Ratio	325.962	255	.002
Linear-by-Linear Association	64.096	1	.000
N of Valid Cases	73		

Source: Researcher (2022)

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From the findings in Table 3 above the p value obtained was 0.000 which is lower than the significant value of 0.05. This means the researcher did have an observed likelihood ration to be sure of the p value and the result obtained was 0.02 at 255 degrees of freedom. From the results obtain it can be concluded that Play therapy has some influence on wellbeing of the children and thus the alternative hypothesis was accepted and the null hypothesis rejected. The outcomes of this study agree with those of Schafer (2010) who stated that learning and growth is best achieved through the playing cycle. He further underscores that play helps children to express complex ideas and messages without needing to have well-developed language skills — ideas and messages they would otherwise not be able to convey (Schafer, 2010). In addition, Webb (2011) also supports the above and states that through the use of toys and play, kids can share thoughts, feelings and fears that they otherwise cannot convey. The play therapist will help the child develop coping strategies and overcome the emotional and social ability deficits (Robinson 2011). Godino-Iáñez, Martos-Cabrera, Suleiman-Martos, Gómez-Urquiza, Vargas-Román, Membrive-Jiménez and Albendín-García (2020) concur with this finding and they argue that play is a very important aspect of the life of children. They note that circumstance such as hospitalization which causes a lot of disruption in the lives of children mostly produce anxiousness, fear and in other cases pain. They therefore state that there is need for a holistic process in their care that ought to encompass play therapy.

5. CONCLUSION AND RECOMMENDATIONS

From the findings it was concluded that play therapy has some influence on wellbeing of the children and thus the alternative hypothesis was accepted and the null hypothesis rejected. Thompson and Elefant (2019) in the findings of their study highlight that use of musical games as a therapy accentuates the value of relationships that are mutually created and shared between the children and the counselor. These approaches they note are very important because they become foundational in expanding the children's repertoire of social and relational experiences. The study recommends that hospital in Kenya should have child counseling units where counseling approaches such as play therapy can be used to psychologically rehabilitate sexually abused children back to normalcy in the society. Parents should work together with the school authority in helping sexually abused children in choosing and formulating the most appropriate type of therapy in relation to their personality and experiences. The therapist need to work with the parents of sexually abused children to instill therapeutic skills in them that can be used to assist such children. The government should come up with strict policies for controlling child abuse in order to minimize the psychological impact of such abuse.

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