

Play Therapy Techniques as an Intervention to Address Tantrums in Early Childhood

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ABSTRACT: This study examines the effectiveness of play therapy in reducing tantrum behavior among early childhood students at an Early Childhood Education (PAUD) institution in West Nusa Tenggara, Indonesia. A quasi-experimental approach with a one-group pretest-posttest design was employed. The participants consisted of 12 children aged 4–6 years exhibiting high levels of tantrum behavior. Data were collected through structured observations, a tantrum rating scale (measuring frequency, intensity, and duration), and documentation. Analysis was performed using descriptive statistics and a paired sample t-test at a significance level of $\alpha = 0.05$.

The results reveal a significant reduction in tantrum behavior following the intervention. Descriptive analysis showed the mean tantrum score decreased from 3.42 (high category) to 2.01 (low–moderate category). Inferential analysis indicated a significant difference between pretest and posttest scores ($t = 9.27$; $p < 0.05$), with a very large effect size (Cohen's $d = 3.57$). Empirically, children demonstrated reduced frequency and intensity of tantrums and an improved ability to express emotions adaptively. These findings suggest that play therapy is an effective intervention within early childhood guidance and counseling services to support emotional regulation. While tantrums were not entirely eliminated, they were reduced to developmentally appropriate levels. Consequently, the systematic integration of play therapy into early childhood education is highly recommended.

KEYWORDS: play therapy, tantrum behavior, emotional regulation, early childhood, PAUD.

INTRODUCTION

Early childhood represents a critical developmental phase often referred to as the "golden age," a period that determines the formation of cognitive, social, emotional, and moral foundations. During this stage, rapid brain development ensures that early experiences significantly influence future developmental quality (Shonkoff & Phillips, 2021). A primary focus of this period is the development of emotional regulation—the ability to recognize, understand, and manage emotions adaptively. However, young children often lack optimal emotional maturity, leading to impulsive emotional expressions (Denham et al., 2015).

A common manifestation of this emotional immaturity is tantrum behavior. Tantrums are emotional outbursts characterized by loud crying, screaming, rolling on the floor, throwing objects, or aggressive actions (Potegal & Davidson, 2017). These behaviors are typically triggered by frustration, limited communication skills, or an inability to manage unfulfilled needs. While relatively common in children aged 2–6, excessive frequency and intensity can indicate significant barriers to socio-emotional development (Belden et al., 2016).

In the Indonesian context, particularly in West Nusa Tenggara (NTB), behavioral issues in early childhood remains a priority in PAUD (Early Childhood Education) practices. Data from the Central Bureau of Statistics (BPS, 2023) indicate rising PAUD participation rates in NTB; however, this has not been fully matched by service quality oriented toward socio-emotional development. Furthermore, the Ministry of Education, Culture, Research, and Technology (Kemendikbudristek, 2022) reports that many PAUD teachers lack the competence to manage disruptive behaviors and emotional regulation. This highlights an urgent need for effective, contextual intervention strategies.

Guidance and counseling services play a strategic role in PAUD by helping children develop adaptive emotional regulation. These services focus not only on academic readiness but also on psychological well-being (Geldard et al., 2018). Play therapy is considered a highly effective approach aligned with developmental characteristics, as it utilizes play—the natural language of children—as the primary medium for communication (Landreth, 2012).

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Play therapy allows children to express feelings, experiences, and internal conflicts nonverbally through symbolic play. Through this process, children discharge emotions while learning to manage them with the help of a facilitator (Ray, 2016). Recent meta-analyses confirm that play therapy significantly improves emotional regulation and reduces problem behaviors in young children (Lin & Bratton, 2015; Bratton et al., 2017).

Despite its potential, research on play therapy within the Indonesian PAUD context, specifically in NTB, remains limited. Existing studies often focus on general behavioral management without systematically integrating counseling techniques into the classroom setting. Furthermore, many implementations lack measurable behavioral indicators. This study offers novelty by: (1) systematically integrating play therapy into PAUD guidance services, (2) quantifying tantrum behavior via frequency and intensity, and (3) applying the intervention within the specific socio-cultural context of NTB.

RESEARCH METHODOLOGY

This study utilized a quasi-experimental approach with a one-group pretest-posttest design to evaluate the effectiveness of play therapy in reducing tantrums.

1. Participants

The subjects were 12 children aged 4–6 years at a PAUD institution in NTB, identified as having high tantrum tendencies. Purposive sampling was applied based on: (1) exhibiting tantrums at least three times per week, (2) difficulties in emotional regulation, and (3) parental consent.

2. Data Collection

Data were gathered through:

- **Structured Observation:** Recording the frequency and forms of tantrum behavior.
- **Tantrum Rating Scale:** Measuring frequency, intensity (mild, moderate, severe), and duration.
- **Documentation:** Activity logs and child development progress notes.

The instrument utilized a 1–4 Likert scale, validated by experts in early childhood education and counseling.

3. Research Procedure

- **Pretest:** Initial measurement of tantrum levels.
- **Intervention:** Eight sessions over four weeks (30–45 minutes each). Activities included role-playing (emotional expression through characters), expressive play (drawing, sand play, puppets), and symbolic play (representing emotional conflict).
- **Posttest:** Re-measurement following the intervention.

4. Data Analysis

Descriptive statistics (mean, standard deviation) and paired sample t-tests were used to analyze the data, with a significance level of \$0.05\$.

RESULTS AND DISCUSSION

1. Descriptive Statistical Results

The descriptive analysis provides an empirical overview of tantrum conditions before and after the intervention, as shown in Table 1.

Table 1. Descriptive Statistics of Child Tantrum Scores

Variable	N	Mean	Std. Deviation	Category
Pretest	12	3.42	0.38	High
Posttest	12	2.01	0.41	Low–Moderate

Descriptive Analysis:

Prior to the intervention, the mean tantrum score was high (3.42). Observations revealed frequent outbursts (≥ 3 times per week) characterized by excessive crying, screaming, and occasional aggression (throwing objects). Tantrum durations often lasted 5–10 minutes, indicating poor emotional regulation. Post-intervention, the mean score dropped to 2.01 (low–moderate). Children demonstrated faster self-soothing, reduced frequency (1–2 times per week), and more controlled emotional expression. Notably, some children began using verbal labels for their feelings (e.g., "I am angry") rather than relying solely on physical outbursts.

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2. Inferential Analysis (Paired Sample t-Test)

A paired sample t-test was conducted to confirm the statistical significance of these changes.

Table 2. Paired Sample t-Test Results

Variable	Mean Diff	t-value	Sig. (p)	Conclusion
Pretest–Posttest	1.41	9.27	0.000	Significant

Inferential Analysis:

The significance value ($p = 0.000$) indicates that play therapy had a statistically significant impact on reducing tantrum behavior. The high t-value (9.27) suggests a robust difference between stages. However, given the one-group design, factors such as natural maturation or environmental adaptation should be considered as potential confounding variables.

3. Effect Size Analysis (Cohen's d)

To determine the practical strength of the intervention, an effect size analysis was conducted.

Table 3. Effect Size Calculation

Component	Value
Mean Difference	1.41
Average SD	0.395
Cohen's d	3.57
Category	Very Large

Effect Size Analysis:

A Cohen's d of 3.57 represents a "very large" effect. While this indicates powerful practical significance, the value may be amplified by the small, homogeneous sample ($N=12$). Nevertheless, the results suggest that the intervention produced meaningful real-world changes in the children's daily emotional management.

Synthesis and Implications

The findings indicate a significant and consistent reduction in tantrum behavior across both descriptive and inferential measures. Play therapy helped children:

1. Express emotions more adaptively.
2. Reduce the frequency and intensity of outbursts.
3. Improve self-regulation skills.

Realistically, the intervention did not "cure" tantrums entirely—nor should it, as tantrums are part of normal development. Instead, it successfully moderated them to adaptive levels.

CONCLUSION AND RECOMMENDATIONS

Conclusion

Play therapy is an effective technique for reducing tantrum behavior in early childhood. Statistically, the significant reduction from a "high" to a "low-moderate" category, supported by a very large effect size ($d = 3.57$), confirms that the intervention is both statistically and practically impactful. Empirically, children showed improved verbal expression and reduced behavioral intensity. Play therapy serves as a developmentally appropriate approach for PAUD guidance and counseling.

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Recommendations

1. **For PAUD Teachers:** Integrate play therapy principles into classroom management and counseling to create a supportive emotional environment.
2. **For Parents:** Maintain consistency by using structured play at home to stimulate emotional regulation, avoiding repressive responses to tantrums.
3. **For Institutions:** Develop school-based counseling programs and provide therapeutic play facilities and teacher training.
4. **For Future Researchers:** Employ true experimental designs with control groups and larger, more diverse samples to enhance the generalizability of these findings.

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