PLAY THERAPY FOR ADHD CHILDREN IN EARLY CHILDHOOD

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ABSTRAC

ADHD is a childhood disorder that occurs during early development (before age 7) and is characterized by an inability to concentrate, impulsivity, and hyperactivity. According to DSM IV-TR (2005), children with ADHD are characterized by inattention to an activity and difficulty maintaining attention (concentration) when carrying out tasks and play activities. Therefore, special treatment is needed to improve concentration and reduce symptoms of hyperactivity and impulsivity in ADHD children. The purpose of this article is to explain how to maintain attention (focus) in childhood ADHD and one way to treat it is play therapy. This research is designed based on the concept of literature, or finding research sources by collecting documents from several sources based on journals related to ADHD in early childhood. This method was applied by identifying, reviewing, evaluating and interpreting all existing research. The researchers reviewed magazines that were relevant to the topic. The review process was carried out systematically and structured in each process, following predetermined steps. (Triandini, 2019).

Keywords: ADHD; Play Terapy; Childhood

INTRODUCTION

Childhood or early childhood, is a time when children observe everything around them to learn, experience, and grow. Children who are human resources that need to be prepared early so that they can develop optimally according to their abilities, but not all children are born in normal conditions. In the case of a problem, when a child has a personality or character that is different from other children in general, then he can be considered to have a disorder if he meets the criteria of the disorder itself. Attention Deficit Hyperactivity Disorder (ADHD) is a neuropsychiatric syndrome recently observed in many young children, often with symptoms of hyperactivity and impulsive behavior.

According to the DSM-IV-TR, ADHD is characterized by a child's inability to pay complete attention to the task at hand. In addition, children with ADHD easily shift their attention from one activity to another. Therefore, the boy's concentration ability is very low compared to other children of the same age. The symptoms of inattention that occur in ADHD children can interfere with their cognitive, behavioral, socialization, and communication development. Some of the behaviors that arise include: tends to be careless, irritable, forgets lessons and homework, difficult to do homework and school work, difficult to listen, difficult to carry out certain orders, daydreaming, often difficult to say what to say, not doing what should be done. Lack of patience, noise, difficulty understanding speech, and interrupting and interrupting others are other common behavioral patterns that characterize ADHD. In addition, they tend to move constantly and cannot calm down.





As a result, children often have difficulty in learning at school, listening and following instructions from parents, and communicating with their peers (Flanagen, 2005; Fanu, 2006). The main disadvantage that children with ADHD face is the huge barriers between them and the accompanying consequences in life. This highlights the problem that children with ADHD are always considered uncooperative and very cruel to the people around them. Children with ADHD do not respond to instructions the same as other children due to a lack of ability to concentrate and respond to tasks or activities (Baihaqi & Sugiarmin, 2006). In typical development, hyperactivity and impulsivity appear early and usually around 3 or 4 years of age, and attention problems appear in the early school years, around 5 to 7 years of age. Although hyperactivity and impulsivity may decline slightly during elementary school, poor attention control remains relatively stable during adolescence (Weisz, 2004: Davison, John, Ann, 2014).

According to Judarwanto (2006), children with ADHD often have poor concentration skills, namely the inability to maintain attention on an activity. In DSM IV-TR (2005), children with ADHD are often characterized by a lack of attention to an activity and difficulty maintaining attention or concentration while performing tasks and play activities.

Every activity requires concentration and with concentration, humans can work faster with better results. In the world of education, ADHD children's understanding is far behind their peers. (Baihaqi and Sugiarmin 2006) suggest that if this disorder is not treated early on, it will risk having learning difficulties, decreased levels of self-confidence and of course this will affect the optimal growth and development of children and other problems that can have long-term effects. Therefore, children with ADHD should receive special help from parents, schools, or professionals related to the child.

Symptoms that interfere with social, academic or occupational functioning that begin to appear before the age of seven and are observed in more than one place. While the dominant symptom that appears on the subject leads to inattention. The impact of inattention is that the child often switches his attention to various other objects according to what he hears, sees or feels. In addition, another problem lies in low concentration, difficulty focusing on something and very easily distracted (Larasati et al., 2017). The purpose of this literature study is to increase knowledge of ADHD children when doing tasks by increasing them through play therapy.

Many medical professionals are trying to develop interventions to address the problems of children with ADHD where children with ADHD are not proven to have severe damage in the brain (Karic et al., 2019). Factors that can lead to ADHD symptoms are prenatal factors, such as infections, heavy metal poisoning, premature birth, birth trauma or pregnancy complications (Yusuf et al., 2022). There are several places in the brain that function abnormally in individuals with ADHD, including the prefrontal cortex region, frontal cortex, cerebellum, corpus callosum and two basal ganglia regions namely the globus pallidus and nucleus caudatus (Gehricke et al., 2017). Likewise, the results of PET Scan (Positron Emission Tomography) examination in ADHD children showed a decrease in glucose metabolism in the prefrontal and frontal cortex, especially the right side (Ueda et al., 2018; Zimmer, 2019).





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Therapy for ADHD patients must be comprehensive. According to several experts (Flanagen, 2005; Baihaqi & Sugiarmin, 2006; Ray, 2008; Fanu, 2008), interventions that can be applied to overcome inattention in ADHD children are oral diet therapy, drug therapy, and play therapy. Nutrition and diet therapy are often used in the treatment of ADHD patients. This therapy aims to regulate food substances that may cause allergies. According to Judarwanto (2006), this therapy is done because there is a possibility that ADHD children experience digestive disorders due to allergies to certain substances. However, not all children with ADHD are allergic to food substances such as sugar. According to Flanagen (2005), all kinds of special diets have been suggested to reduce all ADHD symptoms, but there is no evidence linking ADHD with diet. A study conducted by several experts carefully observed 25 different aspects of the behavior of boys with ADHD, including academic performance, social behavior, rule breaking, and body movements. The experts found no difference between boys fed a diet with added sugar and boys on a low-sugar diet (Richard & William, 1986 in Flanagen, 2005).

In addition, some experts such as Bradley, an American doctor (in Fanu, 2006) use drugs such as methylphenidate (Ritalin) and benzedrine, which are drugs believed to reduce hyperactivity, improve attention control, and control anxiety to improve academic performance. However, stimulant therapy has side effects such as: personality changes, loss of appetite, poor sleep, abdominal pain, headache and will disappear on its own after a few weeks of treatment. If these drug effects persist after a few weeks of treatment, it may mean that the time of administration, dosage, or type of stimulant needs to be changed. It is possible for other effects to occur, usually after discontinuation of the drug (Fanu, 2006). This negative impact has led to the need for alternative therapies to improve concentration in ADHD children, therapies that are effective so that children with ADHD disorders do not feel pressured by medication and do not feel burdened to carry it out.

Alternatively, researchers have found that children with ADHD are unable to communicate their thoughts and feelings when the abstract thinking and language skills needed to articulate them are not optimally developed. Play therapy can also be used to help (Hall, Kaduson, & Schaefer, 2002). For children, in general, toys are language and games are entertainment. Moreover, games are also the most universal language. Even if it is not counted among the thousands of languages around the world. Children can express whatever they want through play. From this explanation, we can conclude that play activities can be used as one of the methods in play therapy. Therefore, researchers try to present play therapy as one of the therapies as an alternative to improve concentration in ADHD children.

According to Mulyanti (2008), play therapy has several principles of play that are in accordance with the characteristics of ADHD itself. One of them is the principle of play, in channeling hyperactive energy through play and directing children's destructive, hyperactive, or aggressive behavior into activities that can benefit themselves and their social environment in overcoming it in the future. Based on more than 60 years of research (Hall, Kaduson, Schaefer, 2002), play therapy has become one of the reliable means of treating children with ADHD in direct practice properly and correctly.





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One of the reasons for using play therapy is that it is one of the activities that has proven to be a very effective approach for children when the abstract reasoning and verbal abilities needed to articulate their feelings, thoughts, and behaviors are not yet optimally developed. This is also supported by previous research, namely in the psychology journal (Pykhitna, Balaam, Wood, Pattison, & Oliver, 2011) play therapy researchers with the title "Designing for attention deficit hyperactivity disorder in play therapy: the case of Magic Land" stated that play therapy can help children who have difficulty remembering, focusing and concentrating on ADHD. Then research conducted by (Ray, 2008) play therapy researchers with the title "Impact of play therapy on parent-child relationship stress a mental health training setting" states that play therapy has been empirically validated as an effective intervention to overcome children's problems, especially ADHD. In addition, research conducted by (Burtch, 1999) play therapy researchers with the title "The use of play therapy in the private clinical setting" states that play therapy is the most likely method to treat, is also widely used, and is accepted in dealing with children's problems in overcoming future problems and making it easier to blend in with the surrounding environment without feeling difficult by playing.

As well as research conducted by (Ray, Bratton, Rhine, & Jones, 2001) play therapy researchers with the title "A meta-analysis of the play therapy outcome research from 1947 to Present" states that play therapy provides a large positive effect based on treatment outcomes across all groups, gender, clinical and non-clinical populations, environments and on theoretical thinking. In addition, the positive effects of play therapy can be an even greater help if there are parents fully involved in the child's care by applying what has been done or just in supporting the child. Some play techniques can be used to treat ADHD children, playing "build a tower" for example can be used to improve attention and concentration. Playing "where is my home" for example can be used to control behavior in gross motor, so that children can increase the intensity of their attention more focused on the games provided by researchers, with it can facilitate helping children and people involved such as teachers and even parents.

ADHD or distraction or hyperactivity is a syndrome that arises in children with a pattern of symptoms of restless or cannot be silent (hyperactivity), cannot focus attention (inattention), at will (implusive) and inhibitory or distructive behavior; which can cause imbalance in most of their life activities which in general can interfere with the learning process at school and academic achievement (Saputro, 2009; Semiawan & Mangunsong, 2010; Fanu, 2006, Sugiarmin & Baihaqi, 2006). In addition, some of the characteristics that appear in ADHD children such as: a child who never sits quietly in the classroom, he is always moving for example; tapping fingers, shaking legs and so on; in addition, if the child is too tired throughout the day, feeling depressed, then he has difficulty performing attention functions which causes day dreaming episodes or can be called bengong; or children who are always bored with the task at hand and always move to something else, are common forms of behavior that characterize ADHD children themselves (Davison, Neal, & Kring, 2006).

The American Psychiatric Association (APA) in DSM-IV-TR (2005) categorizes ADHD into three types and in this category is widely used in other countries, provided that six (or more) of the following symptoms of inattention continue to appear for at least 6 months to a maladaptive level and are not consistent with the level of mental development in its scope: (1) ADHD characterized by "inattention" which is: (a) Frequently unable to pay attention to small things or make mistakes, not careful in schoolwork, while doing it or doing other activities; (b) Often has difficulty in maintaining attention in doing tasks or playing activities that are being carried out; (c) Often appears inattentive when talking directly with others; (d) Frequent failure to follow instructions and failure to complete





schoolwork, daily tasks, or obligations at work or activities (not due to oppositional behavior or failure to understand instructions); (e) Frequent difficulty in organizing tasks and activities; (f) Frequent refusal, dislike, or reluctance to participate in tasks that require sustained mental effort (e.g., schoolwork or homework); (f) Frequent refusal, dislike, or reluctance to participate in tasks that require sustained mental effort (e.g., schoolwork or homework); (f) Frequent refusal, dislike, or reluctance to participate in tasks that require sustained mental effort (e.g., schoolwork or homework): schoolwork or homework); (g) Often loses objects needed for tasks or other activities (eg: toys, schoolwork, pencils, books, or other tools); (h) Often easily distracted by unfamiliar stimuli; (i) Often forget in daily activities that want to be done or are in progress, (2) ADHD with "hyperactive" characteristics, namely; (a) Often fidgeting with hands or feet by wriggling in the chair (can not be quiet); (b) Often leave the seat in the classroom or in other situations in which the activity requires sitting quietly; (c) Frequent running around or excessive climbing in situations where it is considered inappropriate; (d) Frequent difficulty in playing or participating in fun activities calmly; (e) Frequent rushing or moving constantly as if driven by a machine that cannot stop; (f) Frequent excessive talking that sometimes has nothing to do; (3) ADHD characterized by "implusiveness", namely: (a) often answers questions without thinking before the question is finished; (b) often has difficulty waiting for their turn; (c) often interrupts or pushes others (interrupting a conversation and pushing in play).

Play is a term that is used so liberally that its primary meaning may be lost. The correct meaning is any activity done for the pleasure it brings, without considering the end result (Hurlock, 2001). Play is a fun activity and is favored by most people, especially children, based on research he had done in 1920 revealed that "play could voice the inarticulate", namely playing can voice or express things that are pent up or cannot be expressed directly by children or even other people (Choen, 1993). White (in Landerht, 2001) says that in play children build their confidence in the surrounding environment. In addition, Freud (in Djiwandono, 2005) used play as a way to study children and toys to attract children to participate in the therapy process which in the process can help children's growth and development.

Choen (1993) describes play therapy as equipment or preparation from play that is used to help children to talk about the hidden things in the child to bring the child's form of self to the surface. In this case, it emphasizes more in the theory of relaxation, that with calm or orderly conditions children can eliminate feelings of intimidation and are easier to talk. Children who experience ADHD disorders generally have low concentration skills, namely children are unable to maintain attention to an activity for a long period of time. Lack of concentration itself has the meaning of not being able to maintain attention so that the attention span is very short (Judarwanto, 2006). To increase the attention of ADHD children, therapists can invite them to play and learn to devote their attention to what others are doing. Thus the child can understand what is meant by paying attention (Baihaqi & Sugiarmin, 2006). In addition, play is a projection that relates to one's own abilities, personality, and ability to deal with a problem. Some experts state that play is widely used by child psychotherapists to help children solve problems. It becomes very clear that play therapy provides many advantages for therapy and therapists who emphasize certain aspects of play to meet the needs of clients. Apart from fun, play therapy can also be used for diagnosis, enjoyment, therapeutic alliance, selfexpression, ego enhancement, cognitive and socialization. In this case, cognitive is meant to explain about skills, such as concentration, memory, anticipating the consequences of one's behavior, and creative problem solving that can be developed through play therapy (Reid & Schafer, 1986).





From some of these definitions, it can be concluded that the definition of play therapy is a therapeutic process or commonly referred to as part of treatment that aims to cure the disease, namely by showing how to cure each disease using play as a therapeutic medium to easily see the natural expression of a child who cannot be expressed in verbal language, because play is the entrance to the world of children. Besides, play therapy can help in improving children's concentration, especially in early childhood ADHD. Based on this explanation, the research hypothesis is that play therapy can improve concentration in Attention Deficit Hyperactive Disorder (ADHD) children.

Play therapy can expand an individual's image through the experience of expression with non-threatening feelings and attitudes and become a safe place for children to express themselves (Blanco, Ray, & Holliman, 2012). Play is considered a component of healthy growth, where children develop emotions, language, social competence and self-esteem. Play therapy indirectly alters children's experiences by creating the pleasurable impressions they desire, as well as providing children with opportunities to gain a positive appraisal of their own abilities (Salter, Beamish, & Davies, 2016).

From all these descriptions to find out more deeply whether the concentration ability of ADHD children can be improved by providing play therapy. Therefore, the purpose of this study is to find out whether play therapy can improve the concentration of ADHD children. With the theme raised, it is hoped that it can provide understanding and even help teachers related to the effect of play therapy or even just additional information, besides that it is hoped that it can provide contributions and input to parents or institutions for children with special needs related to efforts to increase concentration, especially in ADHD children in a good and correct way.

RESEARCH METHODS

This research was designed using the concept of literature, which is looking for research sources by collecting literature from several journals to facilitate the search for Play Therapy for ADHD in early childhood. This method is applied by identifying, reviewing, evaluating and interpreting all available research. The researchers conducted a review of periodicals that were appropriate to the topic of the research discussion. The review process is carried out systematically and structured in each process, following predetermined steps. (Triandini, 2019).

The Systematic Literature Review technique is carried out in five steps, namely: (1) formulating the research discussion, (2) mapping and searching for articles that are in accordance with the proposed research title, (3) conducting inclusion or classification and evaluation by selecting articles that have been collected, (4) presenting and processing data, (5) interpreting the findings in the article and ending with drawing conclusions. (Nurfadilah, Fitriani, Putra, 2022).





RESULTS AND DISCUSSION

Play therapy is one of the tools or suggestions to build communication for children who have problems or difficulties to be able to express the problems they are facing in a fun way so that they can be like other children, relaxed and open (Schaefer & Reid, 1986). In addition, Landreth (2002) defines play therapy as a dynamic interpersonal relationship or always easy to move from various aspects between children and therapists trained in play therapy procedures that provide selected play materials and facilitate the development of a safe relationship for children to fully express and explore themselves (feelings, thoughts, experiences, and behaviors) through the medium of play.

Hatiningsih (2013) in her research explained that play therapy is a therapeutic process that uses games as a therapeutic medium to easily see the natural expression of a child who is unable to express in verbal language. On the other hand, play itself is a door into the child's world. In this case the game used was building a tower and putting letters into the frame. The tower is made with wood with numbers and arranged according to the needs of the therapy, while the letter puzzle game is paired with the frame. After playing the game, the subject is directed to write the letters A to Z on the paper provided, then read the letters A to Z by showing the letters mentioned. In addition, the subject also wrote the numbers 1 to 20 on the paper provided and read the numbers 1 to 20 by pointing to the corresponding numbers mentioned. These behaviors will see the subject's attention during the activity and the subject's attitude and expression when given directions and rules in the game.

Play therapy interventions that have been carried out can be implemented well and have positive results. This can happen because the therapy used is tailored to the child's development at that time, namely play. Research conducted by O'neill et al. (2012), also explains that play-based interventions can be effective for building skills in ADHD children. In addition, play therapy has a positive effect on reducing the symptoms of children with ADHD and increasing attention (Houmaniyan et al., 2016).

Freud (in Djiwandono, 2005) used play as a way to study children and toys to attract children to participate in the therapy process. The types of games used for play therapy include:

1. Beat the Clock

This game is adapted from the game "Beat The Clock" described by Kaduson & Schaefer (1997), which states that this game is designed to increase children's self-control and implusive behavior. The goal of this game is for children to resist distractions in activities and focus for a certain period of time.

In this game the therapist gives 10 poker chips to the participant, then within 10 minutes the participant must build a tower with blocks, and do not stop building until the participant hears the timer sound. Participants should not be distracted by stimuli from the surroundings and should focus on their respective tasks. If the participant asks questions, is distracted or does anything other than building the tower, the participant must pay a chip to the therapist. If the participant can stay on task for 10 minutes, the therapist will give another 10 chips. After the participant has 50 chips, the participant can choose the prize they want that has been provided in the box.

The therapist remains calm for the first few minutes and then creates some distractions for the participant or child. The purpose of these distractions is to get the child to stay focused on the task and not care about what is happening inside or outside the room. The child will be highly motivated to get 50 chips and choose a prize. The therapist should increase the time by 5 minutes each time the 50 chip prize is reached. Finally, many participants can stay on task for the entire session.





There is a difference between the game adopted and the game used in this study, namely in this study does not use token economy or one of the ways that can be used to achieve learning goals, especially as an effort in shaping children's behavior and extranos stimulus as a distraction. Because the subjects in this study are very easily disturbed when there is a stimulus from outside, if an extraneous stimulus is given, it is feared that the therapy process will not be maximized.

In the game that will be used in this study, participants must build a tower that has been determined for 10 minutes. During the period of building the tower the subject should not ask questions and be influenced by things from outside (focus on their respective work). The subject must build the tower as soon as possible, and there is no specified time limit. When the subject is able to build the tower faster than other friends, then the subject is declared to be able to beat the time.

2. Where is My Home

This game is adapted from Tomatis Therapy (a game with sound stimulation to improve children's concentration). Tomatis or designer therapy challenges the brain in exactly the same way. By changing the contrast of the sound, the brain is forced to try to cope with this change. In other words, Gating wakes up the brain from its automatic routine and puts it in an active listening position. developed in the 70s through sound stimulation to improve auditory function and overcome concentration difficulties in ADD/ADHD children. By introducing musical instruments and sounds in addition to stimulating the child's artistic spirit, it is also a sound stimulus to get the child's attention, so that it is centered on us and not distracted by other things around him. Especially ADD/ADHD children who are not sensitive to sounds at certain frequencies need practice hearing sounds that will help them to develop their ability to concentrate.

Each child stands in his/her own house, in the middle of a colored rope that forms a circle or in the middle of a hola-hop. To the sound of a song or music cassette, the children begin to move out of their houses and run around the room. On the teacher's signal or when the music stops, the children find their houses and sit back in the center of their houses. The children must recognize their house, either by its color or its shape. To facilitate the re-recognition of their house, children can put their favorite items such as dolls, wallets, bags and so on in their house. In this play therapy, the author wants to provide knowledge related to things that can be done to later be able to see how quickly children can do these activities.

In the game that will be used in the study, each participant must be in their respective homes in a colored rope or a place that has become a benchmark that it is his house by putting his belongings or the chair he is sitting in. By following instructions from the researcher the subject began to get out of his house and surround the chair in the middle of the room. Through a signal from the researcher or at the sound of a whistle, the subject must find his house and sit back in the center of his house. The subject must really recognize his house, whether through its color or shape. To facilitate the re-recognition of his house, the subject can put his favorite items such as dolls, wallets, bags and so on in his house. In this play therapy, the researcher wants to see how quickly the subject can find his house.





In the course of this play therapy, it has a significant change in changing the habits of ADHD early childhood, although sometimes it still has the same habits in the process and cannot change immediately in an instant and the need for parental support in carrying it out. According to Suveg, Zeman, Flannery-Schroeder & Cassano (2005) the influence of the environment on emotional development by stating that emotional education in children can be done through direct teaching, but can also be indirectly such as through modeling, emotional climate in the family, social references, communication, and disclosure of emotional stimuli.

In addition to being based on the characteristics of children as a period of play, play therapy is also applied in accordance with the stage of cognitive development of children by using symbols that are used in the process of processing information received through imitation activities or one's actions to imitate others through attitudes, lifestyle appearance, even what is owned by others (Sasmita, 2011), indirect, symbolic play, drawing, mental images and speech language (Papalia, Olds, Fildman, 2002; Padmonodewo, 2000).

Reviewing all the scientific articles analyzed, it was stated that the play therapy provided was able to increase concentration and reduce symptoms and disruptive behavior in GPPH children. However, in the research of Mirzae H et al., (2019) mentioned that the Filial Play Therapy method is more effective in reducing symptoms of hyperactivity and increasing the attention of GPPH children and the effect can last up to 3 months (20). These results are in line with the results in a metaanalysis study by Bratton et al., (2005) which states that the Filial Play Therapy method has a greater therapeutic effect for GPPH children than other play therapy methods.

CONCLUSIONS

The detailed examination of ADHD and its treatment methods reveals the complexity of addressing this condition. From the observation of childhood development to the neurological factors associated with ADHD, various interventions are explored. Play therapy emerges as a promising approach, leveraging children's natural inclination towards play to improve their concentration and mitigate symptoms.

ADHD, characterized by inattention, hyperactivity, and impulsivity, poses significant challenges for children's academic, social, and emotional development. Traditional treatments like medication and dietary adjustments are common, but play therapy offers a unique avenue for intervention. Through play, children can express themselves, develop social skills, and improve concentration in a non-threatening environment.

The systematic literature review underscores the efficacy of play therapy in enhancing attention and reducing disruptive behaviors in ADHD children. Various play-based interventions, such as "Beat the Clock" and "Where is My Home," are tailored to engage children and foster self-control and attention. Importantly, play therapy aligns with children's cognitive development, utilizing symbols and imitation activities to facilitate learning and emotional expression.

While medication and dietary interventions remain valuable components of ADHD management, play therapy offers a complementary approach that addresses cognitive and emotional aspects. By tapping into children's innate desire for play, therapists can create a safe and supportive space for skill-building and behavior modification.





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In conclusion, the integration of play therapy into ADHD treatment plans holds promise for improving outcomes and enhancing children's overall well-being. Further research and collaboration among professionals are essential to refine and expand the use of play therapy in addressing the complex needs of ADHD children.

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