The Effect Of Yoga To The Anxiety On Pregnant WomSen In Facing The Childbirth In Yayasan Sekolah Emak Medan Tuntungan

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#### Abstract

Background: The World Health Organization (WHO) estimates there are 216 maternal deaths per 100,000 live births due to complications of pregnancy and childbirth in 2015. The total number of maternal deaths is estimated at 303,000 deaths worldwide. Indonesia is one of the developing countries as the highest contributor to the maternal deaths rate in the world. WHO estimates in Indonesia there are 126 maternal deaths per 100,000 live births with a total number of maternal deaths of 6400 in 2015. Some of the direct causes of AKI are caused by complications during pregnancy, maternity and postpartum. One of the causes of complications of childbirth is long labor which is also affected by the psychological condition of the mother. Maternal anxiety factors can cause labor to last longer and this can endanger the mother and fetal life (MOH, 2008). Purpose: Knowing the effect of yoga on pregnancy against childbirth. The research method was quasi-quantitative with a pretest and posttest nonequivalent control group design with a population of pregnant women in Sekolah Emak. Samples total 28 people. The technique sample of purposive sampling. The data analysis is used t-independent test. Results: univariate analysis of the experimental group of 28 pregnant women respondents, with primigravida as many as 15 respondents (53.6%), secundigravida as many as 6 respondents (21.4%) and multigravida as many as 7 respondents (25%) and control groups from Univariate analysis said that there were 13 respondents (46.4%), secundigravida as many as 8 respondents (28.6%) and multigravida as many as 7 respondents (25%). While the Bivariate Analysis of the experimental group the average anxiety of pregnant women was 3.46 with a standard deviation, 508 and after yoga the average pregnant woman's pregnancy anxiety dropped to 2.04 with a standard deviation of 0.693. P-value value of 0.00, it can be concluded that there is an effect of yoga pregnant on the anxiety of pregnant women in the face of childbirth. Conclusion: there is the effect of yoga to the anxiety of pregnant women in facing the childbirth

Keywords: Yoga, anxiety

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#### Introduction

The World Health Organization (WHO) estimates there are 216 maternal deaths every 100,000 live births due to complications of pregnancy and childbirth in 2015. The total number of maternal deaths is estimated at 303,000 deaths worldwide. MMR in developing countries reaches 239 / 100,000 live births, 20 times higher than developed countries. Developing countries contribute around 90% or 302,000 of the total maternal deaths estimated to occur in 2015.

Indonesia is one of the developing countries as the highest contributor to maternal mortality in the world. WHO estimates that in Indonesia there are 126 maternal deaths per 100,000 live births with a total number of maternal deaths of 6400 in 2015. Data from Indonesia's health profile 2015 Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) are one of the indicators of health development in 2015-2019 RPJMN and SDGs. In the second and third trimesters, pregnant women have discomfort or problems, including: increased frequency of voiding 20%, low back pain 10%, anxiety 35%, sleep disturbance 5%, shortness of breath 1%, edema 1%, cramps 1%, while those who do not have complaints as much as 27%. The incidence rate is 35 cases out of 27,334 number of live births or about 128.05 per 100,000 live births. The maternal mortality rate (MMR) experienced an increase compared to previous years, namely 107.95 per 100,000 live births in 2013, and 122.25 per 100,000 live births in 2014.

Some of the direct causes of AKI are caused by complications during pregnancy, childbirth and childbirth. One of the causes of complications of childbirth is long labor which is also affected by the psychological condition of the mother. Maternal anxiety factors can cause labor to last longer and this can endanger the mother's and fetal lives. One of the causes of prolonged childbirth other than because of his abnormalities, fetus and or birth canal, another cause is the emotional factor of fear and anxiety. The impact of prolonged labor is intrapartum infection which is also one of the causes of maternal mortality, uterine rupture, pathological retraction ring, fistula formation, and injury to pelvic floor muscles which cannot possibly contribute to maternal death. Fear of childbirth is still a part of the complex picture of women's emotional experiences during pregnancy.

In Indonesia, studies conducted on third trimester primigravida pregnant women as much as 33.93% experienced anxiety. 12 Another study stated that normal pregnant women in the face of childbirth experienced 47.7% of severe anxiety, 16.9% of moderate anxiety, and 35.4% had mild anxiety.13 The above problems are unlikely to occur if the maternal service unit is already comprehensive care is carried out, including interventions for psychosocial problems. Anxiety and depression in pregnancy is a problem with a fairly high prevalence of around 12.5-42% and it is even thought that this disorder will be the second largest cause of disease in 2020. Hall et al (2016) states mental health including pregnancy anxiety has been proven to be reduced or eliminated through physical exercise (physical exercise) and this needs to be promoted. One recommended physical exercise is yoga because it is low cost, easy to do and very useful for physical fitness and psychology (Shiraishi et al., 2016).

Yoga is more effective in reducing anxiety and depression in normal pregnancy (Davis et al., 2015). Yoga can reduce stress, improve quality of life, self efficacy in childbirth, interpersonal relationships, function of the autonomic nervous system, provide a sense of comfort, reduce or reduce labor pain and shorten the duration of labor (Curtis et al., 2012). Antenatal yoga can help pregnant women to control their thoughts, desires and reactions to stress. Yoga exercises include various relaxation, regulating posture, breathing

and meditation for one hour, daily routine. Relaxation movements, regulating posture and breathing are the same as movements performed during pregnancy exercise.

Preliminary survey conducted by the authors at the School The interview was conducted on 10 pregnant women who had never done yoga exercise, 3 mothers said that there was excessive worry and anxiety when facing childbirth, 7 mothers said this was a repeat labor, 5 pregnant women said still felt excessive anxiety because there was a past history of labor which also still hurts, and 2 pregnant women said they were just anxious and afraid of being light because there was already experience and knowledge about the process of childbirth being passed. In addition, of the 10 pregnant women who have never had a yoga class pregnant because of the lack of knowledge of yoga. For this reason, researchers are interested in conducting research on the effect of pregnant yoga on maternal anxiety in Sekolah Emak Medan Tuntungan Foundation.

#### Methods

The study was conducted at the Sekolah Emak Medan Tuntungan Foundation, which was conducted from June 22, 2018 to July 20, 2018. In this study researchers used quantitative type or type of design with a quantitative quasi-experimental study with pretest and posttest nonequivalent control group designs, namely a study conducted with provide a treatment to find out the symptoms or effects arising from the treatment given to compare the results of yoga exercises with a similar control group in influencing the anxiety of third trimester pregnant women in the face of childbirth

O1	X1	O2
03		04

#### Information:

O1 = Pre test before doing yoga exercises.

O2 = Post test after doing yoga exercises.

X1 = Implementation of yoga exercises.

O3 = Pre test in the control group.

O4 = Post test in the control group

The population is all pregnant women aged 28-35 weeks who have anxiety levels with inclusion and exclusion criteria. Inclusion criteria are as follows:

- 1. Pregnant women with a gestational age of 28-35 weeks.
- 2. Do not have comorbidities.
- 3. Can do yoga pregnant in the mother's physical abilities.
- 4. Not in the care of the health team.
- 5. Willing to be a respondent and follow the research procedure until the final stage.

The exclusion criteria are as follows:

- 1. Subjects are not willing or cancel to become research respondents.
- 2. Subjects do not have the opportunity to be present or not in place when collecting data.

The sampling technique used a purposive sampling technique with sampling using the Lemezhow formula, so that there were 56 pregnant women, 28 pregnant women as the experimental group and 28 pregnant women as the control group. Scale the measurement of anxiety using the HARS scale.

#### **Results**

# A. Univariate analysis

Table 1. Characteristics of respondents based on parity of pregnant women as an experimental group.

No	Paritas	F	Persentase
1	Primigravida	15	53,6%
2	Secundigravida	6	21,4%
3	Multigravida	7	25%
	Total	28	100%

Based on the table above it can be seen that from 28 pregnant women respondents the characteristics of pregnant women based on parity in pregnant women with primigravida as many as 15 respondents (53.6%), secundigravida as many as 6 respondents (21.4%) and multigravida as many as 7 respondents (25%).

Table 2 Characteristics of respondents based on parity of pregnant women as a control group.

No	Paritas	F	Persentase
1	Primigravida	13	46,4%
2	Secundigravida	8	28,6%
3	Multigravida	7	25%
	Total	28	100%

Based on the above table it can be seen that from 28 pregnant women respondents the characteristics of pregnant women based on parity in pregnant women with primigravida as many as 13 respondents (46.4%), secundigravida as many as 8 respondents (28.6%) and multigravida as many as 7 respondents (25%).

Table 3 The level of anxiety of pregnant women in the experimental group

No	Anxiety	Pre Test	Persen	Post Test	Persen
			tase		tase
1	No anxiety (sco <mark>re &lt;6)</mark>	-	0%	6	21,4%
2	Mild (score 6-14)	-	0%	15	53,6%
3	Medium (score 15-27)	15	53,6%	7	25%
4	Heavy (score >27)	13	46,4%		
Total		28	100%	28	100%

Based on the above table it can be seen that of the 28 pregnant women respondents in the pretest found the level of anxiety of pregnant women in the experimental group with moderate anxiety as many as 15 respondents (53.6%) and severe anxiety as many as 13 respondents (46.4%). The level of anxiety of pregnant women after the experiment and then post-test again the anxiety level of pregnant women with no anxiety as many as 6 respondents (21.4%), mild anxiety as many as 15 respondents (53.6%) and mild anxiety as many as 7 respondents (25%).

Table 3 The level of anxiety of pregnant women in the control group

		<i>3</i> 1 <i>C</i>		<i>C</i> 1		
No	Anxiety	Pre Test	Persen	Post Test	Persen	
			tase		tase	
1	No anxiety (score <6)	-	0%	-	0%	
2	Mild (score 6-14)	-	0%	-	0%	
3	Medium (score 15-27)	15	53,6%	11	39.3%	
4	Heavy (score >27)	13	46,4%	17	60,7%	
	Total	28	100%	28	100%	

Based on the above table it can be seen that of the 28 pregnant women respondents in the pretest found the level of anxiety of pregnant women in the control group with moderate anxiety as many as 15 respondents (53.6%) and severe anxiety as many as 13 respondents (46.4%). The level of anxiety of pregnant women after post-experiment without experimentation the level of anxiety of pregnant women was moderate anxiety as many as 11 respondents (39.3%) and severe anxiety levels, namely as many as 17 respondents (60.7%).

### **B.** Bivariate analysis

Table 4. Analysis of maternal anxiety before pregnant yoga was performed in the experimental group.

	All the second s	Annual Control of the		8 F			
No	Anxiety	Mean	Sd	Lower	Upper	Sign.	
1	Pre test	3.46	.508				
2	Post test	2.04	.693	1.233	1.624	0,000	

Based on the above table in the experimental group using the average t-test of anxiety of pregnant women before yoga was performed .346 with standard deviation, 508 and there was a significant change after yoga was pregnant, the average maternal anxiety became 2.04 with a standard deviation, 693. The statistical test results in the table above with a value of p value = 0,000, it can be concluded that there is an effect of yoga pregnant on the anxiety of pregnant women in the face of childbirth.

Table 5. Analysis of maternal anxiety before pregnant yoga was performed in the control

			510	up.		
No	Anxiety	Mean	Sd	Lower	Upper	Sign.
1	Pre test	3.46	.508			
2	Post test	.361	.497	281	005	0,000

Based on the above table in the experimental group using the average t-test of pregnant women 's anxiety in the control group that was not performed yoga, the average maternal anxiety was measured at the same time, namely 346 with standard deviation, 508 then evaluated again to the mother Pregnant 4 weeks later along with pregnant women who have been given yoga pregnant, the average anxiety level of pregnant women is increased by 361 standard deviations, 497. The statistical test results in the table above with p value = 0.043.

# **Discussion**

The results of the analysis of research conducted on pregnant women who were given yoga pregnant were found in the experimental group there was a significant decrease in maternal anxiety by using the average t-test of pregnant women 's anxiety before yoga was pregnant 3.46 with a standard deviation, 508 and occurred Significant changes after yoga

were performed on an average pregnant mother's anxiety to be 2.04 with a standard deviation, 693. Statistical test results in the table above with p value = 0.000. This shows that there is an influence of pregnant yoga on pregnant women in the face of anxiety during labor.

Yoga is all about increasing self awareness. Therefore, the most important thing is to listen to the body while exercising body positions and breathing techniques. It's important to practice safely and not too aggressively. Yoga is a motivated exercise from within.

Yoga in pregnancy combines special postures and techniques that benefit pregnant women and help relieve discomfort caused by changes in the body during pregnancy. Yoga is a science that explains the relationship between physical, mental and spiritual human to achieve overall health.

This is also evidenced by the existence of previous studies, namely the Effect of Prenatal Yoga on Anxiety Levels on Primigravida Trimester II and III Mothers at Studio Qita Yoga, South Semarang District, Indonesia, conducted by Priharyanti Wulandari, et al in 2018 for 14 pregnant women. average (mean) primigravida mother's anxiety was on the score 2,286, the standard deviation value was 2,492, the standard error value was 0,667 while the difference at the lowest value was at the score 0,846 and the difference at the highest value was at the score 3,726, the value of df (degree of freedom) at number 13, value (t count = 3,429)> (t table = 1,771) and (p value = 0,004) <( $\alpha$  = 0,05), then Ho is accepted and Ha is rejected which means there is a prenatal yoga effect on the level of anxiety of primigravida trimester II and III at Studio Qita Yoga means that there is an effect of prenatal yoga on the level of anxiety of primigravida II and III trimesters in Studio Qita Yoga, Semaran District g South of Semarang City.

The results of this study are in line with the results of research conducted by Apriliani and Wahyudi (2015) on the Effect of Prenatal Yoga on Instantaneous Anxiety in Facing Childbirth. In Primigravida Trimester III it was found p value: 0.024 (<0.05) which showed prenatal yoga at Studio Qita Yoga South Semarang Subdistrict, Semarang City with pvalue =  $0.004 < \alpha = 0.05$ .

### Conclusion

The results of the analysis of research conducted on pregnant women who were given yoga pregnant were found in the experimental group there was a significant decrease in maternal anxiety by using the average t-test of pregnant women 's anxiety before yoga was pregnant 3.46 with a standard deviation, 508 and occurred Significant changes after yoga were performed on an average pregnant mother's anxiety to be 2.04 with a standard deviation, 693. Statistical test results in the table above with p value = 0,000. This shows that there is an influence of pregnant yoga on pregnant women in the face of anxiety during labor.

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