

# THE EFFECTIVENESS OF FINGERHOLD RELAXATION TECHNIQUE AND SPIRITUAL EMOSIONAL FREEDOM TECHNIQUE (SEFT) TO THE PAIN INTENSITY SCALE ON PATIENTS WITH POST CAESAREAN SECTION

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## ABSTRACT

Post caesarian section pain can cause physical and psychological effects to mothers. The pain can be reduced with pharmacological or non-pharmacological pain management. One of the pharmacological techniques is fingerhold relaxation and spiritual emotional freedom technique (SEFT). The study aimed to discover the effectiveness of fingerhold relaxation and SEFT to pain intensity of post caesarean section. This study was categorized into quasi-experiment research with two groups comparison pre-test and post-test design. The samples were 45 respondents comprising of 15 respondents for experimental group using SEFT, 15 for experimental group using fingerhold relaxation, and 15 for control group . The data was analyzed using regression linier test. The result showed that the correlation value of control group was 0,431 with R-Squere 18,6 %. Meanwhile, in experimental group with fingerhold relaxation, the correlation value was 0.671 and R-square value was 45%. Furthermore, the correlation value of experimental groups using SEFT was 0.874 and R square was 76%. In conclusion, SEFT is effective to decrease the pain on patient with post caesarean section. Therefore, nurses are required to help mothers to feel comfortable in controlling the pain of post caesarean section.

**Keywords:** caesarean section, fingerhold, pain, SEFT

## INTRODUCTION

Caesarean section is the birth of fetus through the abdominal and requiring incision into the uterus (hysterotomy) (Norwitz, 2007). The developmet of caesarean section operation in Indonesia based on the simple survey conducted by Gulardi and Basalamah towards 64 hospitals in Jakarta in 1993, the result presented that 35,7-55,3% of 17.665 births were done through caesarean section operation (Kasdu, 2009). The pain of post operation will cause physical and psychological reactions to mothers with postpartum such as impaired mobility, less likely to have activities, insomnia, loss of appetite, baby blues in order that there should be a technique to control the pain to make them adaptable with the pain of caesarean section post operation and to fasten masa nifas (Bobak et al, 2004 in Miranti, 2011).

Uncomfort or pain must be overcome because comfort is the human basic need as stated in Maslow's hierarchy. The pain will affect to the daily activities and the sleep of someone (Potter & Perry, 2006).

Pain management has several interventions or a procedure either pharmacology or non-pharmacology. The pharmacological procedure is conducted by giving analgesic – to decrease or to heal the pain (Potter & Perry, 2010). Whereas, non-pharmacological one is done through relaxation, breathing technique, position mobile, massage, acupressure, hot/cold therapy, hypnobirthing, music, and Transcutaneous Electrical Nerve Stimulation (TENS) (Yuliatun, 2008).

One of pharmacological treatments that can be used is fingerhold relaxation technique. It is easy technique to control emotion. The emotion likes energy wave which moves through our body, thought, and soul.

According to a study on the implementation of fingerhold relaxation technique firstly conducted by Pinandita (2011) entitled "The effectiveness of fingerhold relaxation technique to the decrease of pain intensity on patient with laparotomy post operation", the result shows that p-value of t-independent test is 0.000 ( $p < 0,05$ ) – meaning that there is an effect of fingerhold relaxation technique towards the decrease of pain intensity on patients with laparotomy operation.

SEFT therapy is technique combining body energy system (energy medicine) and spiritual therapy using tapping method on some certain spots on the body, SEFT has been proven to overcome physical and psychological (Faiz, 2008).

Fajar's study on the effectiveness of spiritual emotion freedom technique to the decrease of pain level at Tugurejo Regional Public Hospital of Semarang shows that the result of SEFT therapy is effective to decrease the pain on mothers with caesarean section

post operation. The research recommends that SEFT therapy can be used as an independent nursing to decrease pain (Fajar, 2010)

Rajin's study, 2010, SEFT therapy to increase the sleeping quality on post-operation patients at hospital shows that SEFT therapy can increase patients' sleeping quality significantly.

Prof. Margono Soekardjo Regional Public Hospital is a referral hospital which almost 100 patients/month conduct section caesareans operation with various indication. To overcome the pain of post operation, pharmacological therapy is still used to handle pain of post operation where there is only pharmacological therapy and the procedure operational standard of non-pharmacological therapy has not been available yet. Fingerhold technique is easy and low cost method as well as SEFT that can be done by every patient in five minutes. The objective of this study is to identify the effectiveness differences of fingerhold relaxation and SEFT to decrease client's pain of caesarean section post operation.

## **METHODS**

The study is quasi experiment research with pre- and post test design with control group design yaitu observasi conducted twice: before and after the treatment using control group. Pre- and post test with control group design was used to investigate the effectiveness of the treatment through the difference between experimental and control groups (Arikunto, 2009). This study would examine two variables, they are: dependent variable of this study was pain intensity of caesarean section post operation and independent variable was fingerhold relaxation technique and SEFT.

The population in this study were mothers with caesarean section post operation at Prof. Margono Soekardjo Regional Public Hospital. Sampling technique was purposive sampling to determine the sample in accordance with the researcher (Setiadi, 2007). Inclusion

criteria of mothers with caesarean section post operation in the first day without complication such as myocardial infarction or diabetes mellitus. The number of sample was determined by the formula of the amount of sample of experimental research or clinical test. As the consequence, there were 45 respondents as the sample which would be divided into three groups: first group with fingerhold treatment, second group with SEFT treatment, and the last group being control group.

Data gathered would be analyzed through statistical test using a computer. Data analysis methods used in this study were univariate and bivariate analysis. The following are the analysis types used (1) Univariate analysis was used to get a description of each variable. It includes mean, mode, median and maximal, deviation standard and proportion characteristic as well as the variable of pain level in each measurement either pre-test or post-test; and (2) Bivariate Analysis to recognize the difference of pain level on control group, intervention 1, and intervention 2, paired-t test was used for normal data distribution and *Wilcoxon* was for abnormal data. To know the difference of pain level between control group and group with intervention 1 and intervention 2, One Way Anova was used for normal data and Kruskal Wallis Test was for abnormal data. After applying different test with more than two samples, it would be more effective to continue the analysis using *Posthoc test*.

**RESULTS**

**Table 1. The Difference of Pain Level of Caesarean Section Post Operation Before and After Implemented with SEFT**

Variable	N	Mean	Z	p-value
Before in experimental group with SEFT	15	6.4	3.391	0.01
After in experimental group with SEFT	15	4.07		

Based on the Table 1., the result of *p value* is 0.01 ( $p < \alpha$ ), it means that there is a significant different of pain scale before and after implemented with SEFT in experimental group with the average difference of the pain decrease is 2.23.

**Table 2 The pain Level Difference of Caesarean Section Post Operation Before and After Implemented with Fingerhold Relaxation**

Variable	N	Mean	Z	p value
Before in fingerhold group	15	4.67	-3.416	0.001
After in fingerhold group	15	3.13		

Based on the Table 2., the result of *p value* is 0.001 ( $p < \alpha$ ), it means that there is a significant different of pain scale before and after implemented with SEFT in experimental group with the average difference of the pain decrease is 1.54.

**Table 3. The Pain Level Difference of Caesarean Section Post Operation in Control Group**

Variable	N	Mean rank	Z	<i>p</i> value
Before in control group	15	4.53	-2.889	0.004
After in cotrol group	15	3.60		

Based on the Table 3., the result of *p* value is 0.004 ( $p < \alpha$ ), it means that there is a significant different of pain scale before and after in control group with the average difference of the pain decrease is 0.93.

**Table 4. The Pain Level Difference of Caesarean Section Post Operation between Experimental and Control Groups**

Pain	<i>F</i>	<i>R</i>	<i>R</i> -square
Control Group	2.971	0.431	0.186
Fingerhold Group	28.930	0.671	0.450
SEFT Group	41.929	0.874	0.763

Based on Table 4., it can be seen that the control group with correlational value was 0.431 with 18.6% of R-Square indicating that the treatment control group only can affect the pain about 18.6%. While the correlational value of experimental groups with fingerhold relaxation was 0.671 with 45% of R-Square and the correlational value of experimental group with SEFT was 0.874 with 76% of R Square.

In conclusion, SEFT has more effectiveness value in decreasing pain of post operation than fingerhold therapy as well as in control group.

## **DISCUSSION**

### **The effect of Fingerhold Relaxation Technique on the Decrease of Caesarean Section Post Operation Pain at Prof. Margono Soekardjo Regional Public Hospital**

Relaxation is one of ways to decrease pain or to prevent the presence of pain by decreasing muscle tension. It is an effort to minimize the pain stimulation by resting or relaxing body muscles. This technique is easy to be learnt by mothers with post-partum. They just breath in deeply with regular breathing pattern and relax, releasing endorphin in the body or relaxing naturally in the body with normal condition. (Hidayat dan Uliyah, 2008).

The decrease of pain mostly happened on experimental group rather than on control group. This is in line with the theory of Gate Control from Melzack and Wall (1965) in Potter & Perry (2006) who suggested that pain impulse can be controlled or even blocked by defence mechanism along the central nerve system. This theory states that pain impulse delivered when the defense is opened an impulse is blocked when the defense is closed. The efforts to closed the defense are the theoretical foundation to loss the pain. The Blockage is done through distracting attention or doing relaxation.

Handling pain with non-pharmacological technique is the main asset to reach comfortableness (Yusrizal, 2012). The use of non-pharmacological management is more low cost and without side effect than pharmacological management.

In experimental group, the respondents were treated with fingerhold relaxation therapy for  $\pm$  30 minutes. The result of the study showed that pain scale after the treatment was lower than those without the fingerhold relaxation technique. This aimed to make them relax and to decrease their pain scale. Meanwhile, in the control group the respondent did not get fingerhold relaxation technique in order that there was no the decrease of pain scale because of no stimulation.

Fingerhold relaxation technique is an easy way to manage emotion and to develop emotional intelligence (Cane, 2013) and Potter and Perry (2006) stated that relaxation technique enabled patients to control themselves when they felt uncomfortable or painful, physical stress and emotion because of pain.

In line with study of Pinandita (2012) with the title of “The Effectiveness of Fingerhold Relaxation Technique towards the Decrease of Pain Intensity on Patients with Laparotomy Post Operation”, the result showed that there was an effect between fingerhold relaxation technique to the decrease of pain intensity on laparotomy post operation patients with *p value* 0,000 ( $p < \alpha$ ). In conclusion, the fingerhold relaxation technique is one of ways to decrease pain on patients with caesarean section post operation.

### **The effect of Spiritual Emotional Freedom Tehnique (SEFT) Therapy on the Decrease of Caesarean Section Post Operation Pain at Prof. Margono Soekardjo Regional Public Hospital**

Intervention with SEFT was proven to be effective in decreasing the pain scale intensity of caesarean section post operation. It could be seen from the result of pain intensity decrease in group with SEFT intervention. Spirituality was an important aspect and the highest because this was related to transcendent with God, it would guide and gave meaningful life purpose of someone (Mauk & Schimdt, 2004). Spiritual aspect of the subjects was touched through guiding them to utter sincere and resigned sentence which finally guided them in surrendered condition. This condition was the same as meditative condition that influenced physiological change of someone. Mothers would experience the decrease of heart rate frequency, the breathing becoming soft, decreasing metabolism, and increasing perifer blood circulation. Furthermore, it caused psychological effects such as self-esteem, optimism, calm and peaceful (Jantos & Kiat, 2007; Breslin & Lewis, 2008). The



comliness effect could be seen mostly when the subjects were given with the intervention, they looked more ecalm in responding the pain of caesarean section post operation, their face and body muscles seemd more relax in order to decrease or even disappear.

Moreover, SEFT intervention also combines psychological energy technique in the form of tapping on 18 main meridian spots. Tapping will likely influence central nerve system. According to gate control theory, if the central brain has high activity, the gate in the spinal cord will close in order tah the sensation of pain will not reach to the brain centerand will not be interpreted as pain. Tapping or light hitting can stimulate acupoint in order to release internal opioids (endorphins, encephalins and dynorphins) (Ulett, 1992 in Lane, 2009). It is also claimed as external stimulation which can disturb pain impulse delivery to brain center, so pain impulse sent to the brain is getting less.

Performing SEFT therapy, either emotional or physical problems experienced by someone like pain of caesarean setion post operation will decrease, or even disappears immediately. The reason is that SEFT emphasize more on spiritual element (pray) and body energy system using tapping methode on several certain spots in the body. Moreover, there is also relaxation methode involving belief factor of patient that enable to decrease the pain (zakiyyah, 2010).

This study qualitatively informs that pain will not disappear by itself, but patients will be more tolerant to the pain and report that their pain runs out faster even though there is caesarean section post operation injury left. It is in line with the statement of Dezutter et al. (2011) stating that praying has a meaning on painful tolerant of someone. Yuniarsih's study in 2012 is also stated that SEFT can decrease pain level on mothers of one-scale maternal as well as the study conducted by Wijiyanti (2010).

**The effectiveness differences of fingerhold relaxation technique and SEFT to the pain intensity scale on patients with caesarean section post operation at Margono Soekardjo Hospital – Purwokerto**

In conclusion, spiritual emosional freedom technique has better value of effectiveness to decrease the pain of post operation than fingerhold technique as well as control group. It was 76% in SEFT group, while that in fingerhold relaxation technique group was 45% and in control group was 18.6 %.

In control group there was a decrease of pain though non-pharmacological therapy had not been implemented yet – fingerhold relaxation or SEFT because patient had still got analgesic medicine in the form of ketorolac. Instead of getting medicine, the respondents in experimental group were given non-pharmacology. The result showed that SEFT was effective to decrease the pain significantly. It is because SEFT therapy combined spiritual science, showing resigned and surrendered attitude of patients towards the illness they have, and it was accompanied with tapping on acupressure spots in order to make patients relax and lack of feeling painful.

SEFT intervention requested that healthcare provider should be next to the client in order to give direct care to overcome the pain. As the consequence, it gave calmness automatically to the subject in order to handle the fraith of being alone and powerless could be solved. Brattberg (2008) and William & Carey (2003) stated that resigned and surrendered sentences uttered repeatedly would be affirmative sentence that caused someone relax. Accordingly, it affected the increase of energy, minized fatigue, decreased stress hormone in order that the pain would decrease.

## **CONCLUSION**

The result of this study shows that the SEFT intervention can give positive impacts in decreasing the pain of section caesaria post operation. There is a significant difference on the decrease of average pain between experimental and control groups. The result of this study presents that SEFT including tapping is really effective in decreasing the pain of SC post operation. The study recommends that SEFT therapy can be used as an independent nursing intervention to overcome pain.

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