



## **Autogenic Relaxation Therapy To Reduce Mother Anxiety**

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### **Abstrak**

*Parents who have children with mental retardation often experience anxiety disorders due to inadequate feelings about care. One popular modality therapy is an autogenic relaxation technique that aims to overcome the symptoms of physical and mental disorders. Based on data on the number of people with mental retardation in Banyumas Regency, 225 children have mental retardation. Banyumas Special School of Yakut and Kuncup Mas Banyumas has 63 students with mental retardation. Health education and training in autogenic relaxation therapy is given to parents of mentally retarded children who attend the Yakut Special School. An indicator of decreased anxiety by measuring the physiological responses of participants' bodies before and after therapy. After autogenic relaxation therapy for participants there was a decrease in respiratory frequency of 0.6%, a decrease in pulse rate of 3.05%, a decrease in systolic blood pressure of 6.4%, and a decrease in diastolic blood pressure of 3.5%.*

***Kata-kata kunci*** : *Mental Retardation, Autogenic Relaxation Therapy*

### **1. BACKGROUND**

Based on United Nations (UN) data, up to 2000 it was estimated that around 500 million people in the world experienced disabilities and 80% were found in developing countries (Maulina, 2005). Data from the Central Bureau of Statistics (BPS) in 2006, of 222 million Indonesians, as many as 0.7% or 2.8 million people were disabled. While the population of mentally disabled children occupies the largest number compared to the number of children with other limitations. The prevalence of mentally disabled tuna in Indonesia is currently estimated at 1-3% of Indonesia's population, around 6.6 million people (Triana et al, 2009).

Psychological problems in parents usually arise because they are concerned about the growth and development of a child's mental retardation. Parents who know their child is mentally retarded will experience fear of the child's death, loss of dreams and hopes. This anxiety response finally leads parents who have mentally retarded children to experience

severe depression (Farber, 1986 in Muninggar, 2008). If this problem cannot be resolved properly, then the family will feel (Sutini, 2009).

The number of mentally retarded sufferers is 225 people in the Banyumas Regency area (data for 2017). There were 43 children with mental retardation in SLB C and Yakut C1, while in Kuncup Mas SLB there were 20 children. The results of a survey with an interview at SLB Yakut Purwokerto, it was found that some mothers said they were often worried about their children's future. Some parents sometimes feel embarrassed about the response of the surrounding community about their children and some others claim to have resigned to accept this situation.

One form of support for parents who have children with mental retardation (RM) is through socialization efforts and the application of modality therapy to reduce anxiety, namely autogenic relaxation techniques in the elderly. Autogenic relaxation techniques are a form of psychotherapy performed by an individual with passive concentration combined with certain psychological therapies according to Mills & Budd (2000). Autogenic has the meaning of self-regulation or self-formation. Autogenic relaxation is relaxation that originates from oneself in the form of words / short sentences that can make the mind calm (Aryanti, 2007).

Autogenic relaxation techniques provide a calming effect on the mind and body, and are used to treat medical conditions associated with excessive emotional responses that lead to stress, such as increased vital signs, namely breathing frequency, pulse rate, and increased blood pressure. According to the results of Pratiwi's study (2012) there was a significant influence between autogenic relaxation techniques on the level of maternal anxiety with moderate mental retardation children in SLB C and C1 Yakut Purwokerto.

Growth and development of mental retardation children is one of the causes of psychological problems in parents such as the emergence of anxiety responses to severe depression. Social support has an important role to protect individuals, especially parents from mental health threats. As the number of sufferers of mental retardation in the Banyumas Regency increases the number of parents at risk of experiencing psychological problems. One form of social support for parents who have children with mental retardation (RM) is the application of modality therapy, an autogenic relaxation technique. This therapy has been proven to be effective in reducing anxiety as well as preventing stress responses in parents

who have mental retardation children, so wider socialization activities and applications are needed to help parents with children with special needs, especially mental retardation.

## **2. OBJEKTIF**

The purpose of this study was to determine the effectiveness of health education and training in autogenic relaxation therapy to reduce of mother anxiety mentally retarded children who attend the yakut special school.

## **3. METHOD OF IMPLEMENTATION**

Based on the analysis of the problem above, the method of carrying out community service activities is carried out as follows:

### **a. Preparation and Coordination**

The preparation and coordination phase is carried out by the method of surveying the location of the Yakut Purwokerto SLB, arranging permits, and identifying the number of students experiencing mental retention and asking for data on the names of parents and full addresses to send invitations. Coordination needs to be done to provide an overview of the implementation of community service activities to the school in order to identify and obtain support from the school as the manager of special education so that the event can run smoothly.

### **b. Implementation of Activities**

- 1) Providing health education about the symptoms of somatization
- 2) Measurement of vital signs of parents before and after the action of autogenic relaxation therapy
- 3) Provision of autogenic relaxation therapy in the elderly
- 4) Autogenic relaxation therapy training for parents

### **c. Infrastructure**

- 1) Leaflets and papers about somatization symptoms
- 2) Standard operational procedures for autogenic relaxation therapy
- 3) Autogenic relaxation CD
- 4) LCD, microphone

#### 4. RESULTS AND DISCUSSION

- 1) Providing health education material about the symptoms of somatization
- 2) Measurement of vital signs of parents before and after the action of autogenic relaxation therapy
- 3) Provision of autogenic relaxation therapy CDs to all participants and the Purwokerto Yakut SLB school
- 4) Autogenic relaxation therapy training for parents

The invitations given to 43 parents and attended by 29 participant (67.4%)

Tabel 1. Characteristics education of participants (n=29)

Characteristics		Frequency	
		n	%
Education			
D3		2	7
Senior high school	high	12	41,2
Junior high school	high	7	24,2
Elementary		8	27,6
Age			
30-40 yo		13	44,8
40-51 yo		16	55,2

The level of education of the participants is a high school / vocational graduate equivalent, and most are in the age range of 40-51 years.

Tabel 2. Gambaran tanda-tanda vital partisipan sebelum dan sesudah pemberian terapi relaksasi autogenik (n=29)

Characteristics		Pre	Post	Vital signs decreased	
		Mean±SD	Mean±SD	Score	%
Respiratory rate		16,9±0,92	16,8±0,66	0,1	0,6
Pulse rate		75,3±7,2	73±7,5	2,3	3,05
Blood pressure (sistole)	pressure	121±11,8	113,2±8,7	7,8	6,4
Blood pressure (diastole)	pressure	76,1±8,6	73,4±6,1	2,7	3,5

The implementation of autogenic relaxation therapy is done once a meeting. Before and after therapy, vital signs were measured including the frequency of breathing, pulse, blood pressure of participants. Vital signs are physical measures that respond quickly to changes or physical and psychological stimulation and are easily measured. There was a decrease in respiratory frequency of 0.6%, a decrease in pulse rate of 3.05%, a decrease in systolic blood pressure of 6.4%, and a decrease in diastolic blood pressure of 3.5%.

Somatization disorder is characterized by a large number of somatic symptoms that cannot be adequately explained based on physical and laboratory examinations. This disorder is distinguished from other somatoform disorders because of the many complaints and involves multiple organ systems. This disorder is chronic accompanied by significant psychological suffering, disruption of social and work functions, and excessive medical seeking help.

Relaxation is a condition where a person is free from stress and anxiety or the return of equilibrium after a disturbance occurs. Autogenic relaxation has a calming sensation effect, light and feels warmth that spreads throughout the body. This body warmth is a result of peripheral arterial vasodilation, while mild sensations are caused by decreasing body muscle tension. Relaxation techniques developed with simple exercises or self-suggestion commands for one of them provide a change from a state of internal anxiety to be calmed in a short time (Saunders, 2006). The changes that occur during and after relaxation affect the work of the autonomic nerve. Emotional responses and the calming effects caused by this relaxation change the sympathetic dominant physiology into the dominant parasympathetic system (Oberg, 2009).

Autogenic specifically describes an individual who has the ability to control various bodily functions such as heart frequency, blood pressure and blood flow. Widyastuti (2004). Luthe (1969) in Kang et al (2009) defines autogenic relaxation as a deliberate effort directed at an individual's life both psychologically and somatically causing a change in consciousness through autosuggestion or suggestion so as to achieve a relaxed state of self.

Autogenic relaxation is useful in a variety of body disorders such as migraine, mild to moderate hypertension, coronary heart disease, bronchial asthma, stress response to

depression, somatization disorders and for functional sleep disorders. Autogenic relaxation carries the body's commands through autosuggestion to relax so that it can control breathing, blood pressure, heart rate and body temperature (Varvogli, 2011).

The physiological mechanism of the autogenic relaxation technique is surrender to oneself so that it allows various areas in the body (arms, hands, legs and feet) to become warm and heavy. This warm and severe sensation is caused by a shift in blood flow (from the center of the body to the desired area of the body), which acts like an internal message, soothing and relaxing the muscles around it (Widyastuti, 2004).

This activity is the application of the results of the main service research that is autogenic relaxation therapy that is useful to help reduce anxiety in mothers who have mental retardation children. In this service, vital signs were measured including respiratory frequency, pulse, blood pressure (systolic and diastolic). The measurement results that decrease in respiratory frequency, pulse, blood pressure (systolic and diastolic) are the body's response to the cardiorespiratory system which shows a relaxed state. With the application of this therapy also succeeded in increasing the ability of parents (especially mothers) of children who are mentally retarded in conducting autogenic therapy independently at home to reduce the sudden anxiety that often arises while reducing the impact of continued stress response in parents.

## **5. CONCLUSION**

The administration of autogenic relaxation therapy has successfully reduced parental anxiety (especially mothers) of mentally retarded children characterized by a decrease in respiratory frequency of 0.6%, a decrease in pulse rate of 3.05%, a decrease in systolic blood pressure of 6.4%, and a decrease in diastolic blood pressure of 3.5%.

Autogenic relaxation therapy training in parents can improve the skills of parents independently in applying this therapy in daily life, especially when anxiety arises. The skill to do autogenic relaxation therapy independently by parents is important to have to reduce the impact of the stress response that continues on the parents, so that care for children with mental retardation can still be done optimally.

## **6. ACKNOWLEDGMENTS**

The Dedication Team would like to thank LPPM Jenderal Soedirman University so that community service activities can be carried out.

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