## **ABSTRACT**

## THE EFFECT OF PROGRESSIVE RELAXATION TECHNIQUE TO LABOR PROGRESSION IN PRIMIGRAVIDA INPARTU MOTHER DURING ACTIVE PHASE OF LABOUR

A Pre Experimental Study Involving Static group Comparisson in Maternal Home Aisyiyah Bandung Tulungagung

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The main problem during active phase of labour is inadequate uterine contraction, onset of opening cervix. It takes longer length of time and no fetal descent. It occurs because mother's inpartu technique of pain control is false, so that it makes inpartu mother feel anxiety and afraid, and the pain gets worse. One technique of pain control is progressive relaxation technique. The objective of this study was to examined the effect of progressive relaxation technique on uterine contraction, cervical opening and fetal descent. The study was aimed to explain the effect of relaxation progressive technique to labor progression in primigravida inpartu mother.

Design used in this study was static group comparison. The population were all primigravida inpartu mother who giving birth at maternal home Aisyiyah Bandung Tulungagung. The sample taken comprised of 12 primigravida inpartu mother who met the inclusion criteria. These primigravida inpartu mother were devided into six mother for group receiving progressive relaxation technique, and six mother for group control. The independent variable was progressive relaxation technique. The dependent variable were labor progressions, includeds uterine contraction, cervical effacement and cervical dilatation, and fetal descent. Data were analyzed by using independent t-test with level of significance of 0,05.

Result showed that progressive relaxatation in primigravida inpartu mother had effect to frequency of uterine contraction in the group of experiment increased after intervention post 1 (p = 0.022) post 2 (p = 0.002). Progressive relaxatation in primigravida inpartu mother had effect to duration of uterine contraction in the group of experimental increased after intervention post 1 (p = 0.036) post 2 (p = 0.001). The onset of cervical dilatation was expressed at a shorter length of time in the group of experiment than in the group of control (p = 0.003). The fetal descent was faster than that in group of control (p = 0.011).

It can be concluded that progressive relaxation technique has effect on uterine contraction, cervical opening, and fetal descent. Further studies should involve larger respondents and prepare psychologic and physic mother before labour to know the effect of the progressive relaxation technique on antepartum and postpartum mother.

Keywords: labour, progressive relaxation technique, uterine contraction, cervical dilatation and cervical effacement, fetal descent, active phase