PROCEEDING BOOK

THE 4th INTERNATIONAL CONFERENCE ON HEALTH SCIENCE 2017

“The Optimalization of Adolescent Health in The Era of SDGs”

INNA GARUDA HOTEL YOGYAKARTA, INDONESIA
November 5th, 2017

HEALTH POLYTECHNIC OF HEALTH MINISTRY
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Oral Presentation

O-18

EFFECTS OF HUSBAND’S SUPPORT IN THE DURATION OF SECOND STAGE OF LABOR AMONG PRIMIGRAVIDA IN INDONESIA

Sagita Darma Sari1 Desi Ratnasari Midwifery Academy of Abdurahman, Palembang, Indonesia Email: gita_sweetz2000@yahoo.com

ABSTRACT

Based on the Demographic Health Survey and Indonesian Health (DSIH) data in 2012 Maternal Mortality Rate experienced a very increasing result from 307/100.000 of life birth. In 2007 Maternal Mortality Rate increased to be 359/100.000 of life birth. The direct causes are hemorrhage (42%), eclampsia or pre-eclampsia (30%), abortion (12%), infection (10%), prolonged labor or obstructed labor (54%), and ect (15%). The purpose of this study is to determine the Influence of the husband’s support on the duration of second stage labor among primigravida mothers in the Public Health Center of Alang–Alang Lebar Palembang in 2016. The research method is using the observational analysis with the quasi-experimental study design with post-test only group. The data was analyzed using the T-test analysis test not in pair. Based on the T-test statistic test, we obtained the P value = 0.002 < α 0.05 with the average of 53.33 minutes on the duration of the second stage labor of primigravida mothers, while the average duration of the second stage labor on the maternity mothers not being accompanied by their husbands is 92 minutes. It shows that the primigravida mothers being accompanied by their husbands are more quickly than those not being accompanied by their husbands. It means there is a significant influence of husband support in the duration of second stage of labor.

Keywords : Husband’s Support, Second Stage

INTRODUCTION

Maternal Mortality Rate (MMR) in Indonesia still high compared to the Association of Southeast Asian Nations (ASEAN) countries. Based on the Demographic Survey and Indonesian Health data, in 2012 MMR experienced the very increasing rate, from 301/100.000 of life birth. In 2007 MMR increased to be 359/100.000 of life birth, of which the direct causes were hemorrhage (42%), eclampsia or pre-eclampsia (30%), abortion (12%), infection (10%), prolonged labor or obstructed labor (54%), and other causes (15%).

MMR in South Sumatera Province in 2013 was 146 of life birth and increased to be 155 of life birth in 2014. The number of MMR in Palembang city in 2013 was 13 persons of 29.911 life birth and in 2014 MMR became 12 persons of 29.235 life birth, of which the cause was hemorrhage (41.7%). The cause of hemorrhage was due to the duration of the second stage caused by contraction of abdominal muscles disturbed significantly so that the infant labor became longer.

Labor is the process of opening and depleting cervix and the fetus goes down into the birth passage. Labor and normal birth is the process of expelling fetus that happens on the adequate month gestation (37 – 42 weeks), delivered spontaneously with the back head lasting an average of 18 hours without any complication to either mother or fetus. Senses of security, comfort, spirit and peace which helps reduce to decrease to be less tense, and to improve emotional status so that labour process can be shortened.

When in labor, there are some essential factors in the labor progress, that is, power, passages, passenger, psyche, labor helper. To know the psycho factors,
research is done that the existence of support from the trainee will reduce the labor duration, reduce the tendency of consumption of painkillers and decrease the incident of operative vaginal labor without considering whether the person giving support is the mother’s choice or not. If the support is given continuously, the value of APGAR neonatal is more than 7 in 5 minutes, and the existence of a supporter decreases the caesarean section labour.\(^6\)

Second stage is the stage that needs high energy in a labor. It is said the labor work stage, that is a mother efforts to release her infant by following the strong contraction so that it may contribute actively and positively. Positive contribution and active participation of a maternity mother make the mental state of the mother become more relaxed, and this really supports the labor smoothness and does not make the infant stressed. This can be facilitated through the husband’s support in the labor process.\(^7\)

The objective of this research is to know the influence of husband’s support on the duration of second stage of labor among primigravida mothers in Public Health Center of Alang-Alang Lebar Palembang, Indonesia.

**METHOD**

The research uses the analytical observational research design with the quasi-experimental study design with post-test only group. This research is the research draft by grouping/classifying the groups between the maternity mothers with their husbands’ support and the maternity mothers without their husbands’ support the duration of their second stage of labor was recorded using a timer. The Population in this research is all the primigravida mothers at the work area of Public Health Center of Alang-Alang Lebar Palembang in 2016.

The Sample is part of the object to be researched and considered representing the whole population. The Samples in the research are the primigravida mothers. The number of samples being taken is 30 respondents who are divided into 2 groups (treatment group and control group). The sample withdrawal is conducted by using “purpose sampling” technique. The instrument used in this research is using a timer commenced at the opening 10 till the childbirth which is included in the check list sheet.\(^8\)

The data analysis uses the T-Test analysis with the level of significance \( \alpha \) 0.05. The data are presented in the table form. The data already measured and collected are analyzed by using software. The result of the duration of the second stage labor will be examined its data normality by using the kolmogonor smirnov test. The hypothesis test uses the parametric test that is T-Test.

**RESULT**

The result of univariate analysis is obtained the research which is the maternity mothers with their husbands’ support as follows:

<table>
<thead>
<tr>
<th>Husband’s Support</th>
<th>Frequency</th>
<th>Percentage(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>15</td>
<td>50%</td>
</tr>
<tr>
<td>No</td>
<td>15</td>
<td>50%</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100%</td>
</tr>
</tbody>
</table>

**Table1. Frequency Distribution Based on Husband’s Support**

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Based on the table 1, it is known that from 30 respondents the maternity mothers with their husbands' support are 15 respondents (50%) and those without their husbands' support are 15 respondents (50%).

**Table 2. Frequency Distribution Based on The Duration of the Second Stage**

<table>
<thead>
<tr>
<th>Duration of 2\textsuperscript{nd} Stage</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;1 hour</td>
<td>19</td>
<td>63.3%</td>
</tr>
<tr>
<td>&gt;1 hour</td>
<td>11</td>
<td>36.7%</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100%</td>
</tr>
</tbody>
</table>

Based on the table 2, the number of mother whose duration of second stage of labour lasted < 1 hour were 19 respondents (63.3%) and while those whose second stage lasted more than 1 hours were 11 respondents (36.7%).

The bivariate analysis was conducted to see the relationship between the two variables. In this case, the variable to be analyzed was the variable of husband's support during the second stage by using the T-Test statistic test with the level of significance on $\alpha = p \text{ value} < 0.05$, which was interpreted as having significant relationship whereas if $p \text{ value} > 0.05$, it implied there was no significant relationship.

**Table 3. Normality Test on Variable Data during the Second Stage**

<table>
<thead>
<tr>
<th>During the 2\textsuperscript{nd} stage</th>
<th>N</th>
<th>Mean</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30</td>
<td>72.67</td>
<td>0.063</td>
</tr>
</tbody>
</table>

One of the conditions from the T-test is the ration scale data or interval and the data must be normal distribution; therefore, the data during the second stage are examined by means of the statistic test of one sample of Kolmogorov Smirnov test with the result of $P$ value $0.063 > \alpha 0.05$, which means that the data are normal distribution.

**Table 4. Effect of Husbands' Companion With the Duration of the Second Stage Labor on Primigravida**

<table>
<thead>
<tr>
<th>Husbands' Companion</th>
<th>Duration of the 2\textsuperscript{nd} Stage</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>&lt;1 hour 43.3%</td>
<td>&gt;1 hour 6.7%</td>
</tr>
<tr>
<td>No</td>
<td>6 20%</td>
<td>9 30%</td>
</tr>
<tr>
<td>Total</td>
<td>19 63.3%</td>
<td>11 36.7%</td>
</tr>
</tbody>
</table>

Based on the table 4, it is seen that the primigravida mothers with their husbands' companion < 1 hour are 13 respondents and those > 1 hour are 2 respondents, while the primigravida mothers without their husbands' companion < 1 hour are 6 respondents and those > 1 hour are 9 respondents. After the implementation of the T-test statistic test with the P value $0.002 < \alpha 0.05$, it shows that there is the significant influence between the primigravida mothers with their husbands' companion and those without their husbands' companion.

**Table 5. Average of The Second Stage**

<table>
<thead>
<tr>
<th>No</th>
<th>Companion</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accompanied by husbands</td>
<td>53.33 minutes</td>
</tr>
<tr>
<td>2</td>
<td>Not accompanied by husbands</td>
<td>92 minutes</td>
</tr>
</tbody>
</table>
Based on the table 5, it can be seen that the duration of second stage of labor for the primigravida mothers with their husbands’ companion was on average 53.33 minutes compared to those without the companionship husband, who had an average duration of 92 minutes.

**DISCUSSION**

Labor Companion is someone who can do more to help the mother when delivering a baby. Companion means the existence of someone who accompanies or is involved directly as a labor guide, who can give support during gestation, labor, and postnatal in order that the labor process runs smoothly and it can give comfort to the mother in labor. The existence of a companion is very significant because of being able to do more to help a mother in labor. The companion will give support and faith to the mother during the labor, and help create the comfortable situation in the labor room.

Based on the research on the mothers being accompanied by their husbands, they seem to be calm and comfortable. The husbands accompanying their wives seem to give gentle massages on their wives’ backs, give words of motivation that can strengthen the mothers’ mental, wipe off the mothers’ sweat, and give drink to the mothers to add their power when expelling while the mothers who are not accompanied by their husbands partially feel tense and worried. This is seen from the attitude of mothers who tell their complaint of being aching to the health staffs as well as their quick breathing rhythms. This according to the researcher’s opinion proves that the role of a labor companion is very significant in keeping the mothers’ psychology during the second stage labor. Thus, it is necessary to involve the husbands during the labor process in order to give support so that the mothers become more courageous in facing the labor and the labor may run smoothly.

Based on the table 5, it can be seen that the average duration of the second stage labor on the respondents being accompanied by their husbands is 53.33 minutes, while the average duration of the second stage labor on the respondents not being accompanied by their husbands is 92.00 minutes. The result of statistic test is found p value = 0.002, which means p <α = 0.05. The average duration of the second stage labor on the respondents being accompanied by their husbands seems to be faster than the average duration of the second stage labor on the respondents not being accompanied by their husbands. This shows that there is the influence of husbands’ companion toward the duration of the second stage labor at BPM Lismarini and BPM Sumiyati.

From the research result, it is known that from 30 respondents, the mothers with the faster duration of second stage are 19 respondents with the percentage rate 63.33%, and it is fewer that the mothers with the longer duration of second stage are 11 respondents with the percentage rate 36.67%. The nineteen respondents being accompanied by their husbands have the duration of second stage labor on average 53.33 minutes. This according to the researcher’s opinion is due to the maternal experience factor, where all the respondents are the primigravida patients or give birth to the first child. The first experience often caused worry and uncertainty to the mothers. The husband companion can a little decrease the mothers’ worry, but the factors of mothers’ knowledge and skill in practicing the pushing technique which is still not good enough cause the duration of second stage labor on the respondents to be longer. To the 11 respondents not being accompanied by their husbands, the duration of the second stage labor is on average 92.00 minutes. The relationship of husbands’ support with the duration of the second stage labor can be assumed with the physiological labor colored with psychological components. By avoiding or reducing stress of mothers’ psychology and increasing the mothers’ sense of well-being, this can encourage the physiological labor process so that the progress of labor can be obtained.

Physiological factors such as fear and worry become the cause of the duration of labor, his becomes less good, and opening becomes less smoothly. The effect of worry
will increase the activity of sympathetic nervous system and will increase the genital secretion (epinephrine and nonepinephrine). Epinephrine stimulates α and β receptors, and nonepinephrine stimulates α receptor. The stimulation of α receptor will increase vasoconstriction of increased uterine muscle tone which causes the blood flow to uterus decreasing and increases maternal blood pressure, while the stimulation of β receptor will cause the uterus muscle relaxation and vasodilatation of blood vessels that will cause the decreased placental perfusion. Decreased blood flow to the placenta will disturb the fetal oxygenation, and the effectiveness of disturbed uterine contractions will slow the cervical dilatation and result in prolonged labor.9

CONCLUSION

From the result of the computerized T-test, it is obtained the p value 0.002 <α (0.05). This shows that there is a significant influence on the primigravida mothers being accompanied by their husbands on the duration of the second stage labor of 53.33 minutes who are faster than the primigravida mothers not being accompanied by their husbands on average of 92 minutes.

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