

The Effectiveness of SEFT Method to Overcome Dysmenorrhea Problem on Senior High School Students of Cipanas in 2018

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Abstract— Adolescence is a period marked by physical, emotional and psychological changes called puberty. One sign of puberty is the occurrence of menstruation, a disorder that arises in the menstrual cycle, namely dysmenorrhea. According to Anwar¹, the prevalence of dysmenorrhea in Indonesia is 60-70%. Handling of dysmenorrhea can be overcome by the SEFT (Spiritual Emotional Freedom Technique) method, a blend of the science of Acupuncture and Psychology that is enhanced with a Spiritual touch.

This research was a quasi-experimental research design with one group pre-post-test method. The sample was determined by purposive sampling. The research was conducted by providing training to female students, then practiced on their own. The sample was taken from a total population of 82 people, data collection was carried out by assessment and observation using an observation sheet.

The results revealed that descriptively the average pain scale had a higher reduction in the intervention group than that in the control group. The results of the statistical test showed that in the intervention group, the p-value of 0,000 was obtained, there was a difference in the mean score of the pain before and after the intervention of the SEFT Method in the intervention group. In the control group, the p-value was 0.003 showing that there was a difference in the mean score of the pain at the first measurement and the second measurement in the control group. For the mean difference in the two groups, the pvalue was 0.000 revealing that there was a difference in the mean score of the pain in the intervention group after being given the treatment of the SEFT method different from the mean score of pain in the control group that was not treated with the SEFT method.

Socialization is needed for all students about the benefits of the SEFT method in reducing dysmenorrhea during menstruation.

Keywords: *SEFT method, effectiveness, pain, dysmenorrhea*

I. INTRODUCTION

Adolescence is a transition period characterized by physical, emotional and psychological changes, during which this is a period of maturation of the human reproductive organs, and is often called puberty. One important event at puberty is the occurrence of menarche or menstruation that first occurs. Adolescence's gynecological disorders are very common, one of which is a disorder related to the menstrual cycle, namely dysmenorrhea, premenstrual syndrome, and hirsutism, and the most common disorder is dysmenorrhea.¹

Dysmenorrhea is painful menstruation which is usually cramped and centered on the lower abdomen that is felt before or during menstruation, sometimes to severe so that disrupts activity. Pain can increase due to stress, or lack of exercise. The incidence of dysmenorrhea in the world is very large. On average more than 50% of women in each country experience dysmenorrhea. According to Anurogo (2011)², the prevalence of dysmenorrhea in Indonesia is quite high, 60% -70% generally occurs in adolescents and it is estimated that 55% of dysmenorrhea occur in productive age. Teenagers who experience dysmenorrhea often experience symptoms of pain that feels piercing and is great in the suprapubic and lumbo sacral regions, some teens feel heartburn sensations, nausea, vomiting and headache.¹

From some research in Indonesia, such as the one conducted at SMAN 1, Bone Regency, South Sulawesi Province, 2012/2013 academic year, of a sample of 232 people, it was found 87.1% of these students had dysmenorrhea. Research in another place on students of SMKN 10 Medan in 2013 showed a fairly high number of 81.3% of 171 female students. On the contrary, research at SMPN 3 Manado found that most respondents (98.5%) had experienced dysmenorrhea.³ The results of a preliminary study conducted at class XI and XII of SMAN 1 Cipanas, of the total number of students of 333, 82 experienced dysmenorrhea during menstruation. These complaints greatly disrupt the activities of teenagers at the time of learning as well as when doing other activities.

Many methods can be used to reduce the level of pain or reduce pain and stress. Handling of dysmenorrhea can be done with pharmacological and non-pharmacological therapy, non-pharmacological therapy can be done by relaxation, yoga, music therapy, etc. One method that is also developing in Indonesia and the world in general is SEFT. SEFT (Spiritual Emotional Freedom Technique) is a blend of the science of Acupuncture and Psychology that is enhanced by a universal touch of Spirituality. SEFT is effective in dealing with various physical and emotional problems (such as prolonged headaches, back pain, asthma, allergies, easily tired, to chronic diseases such as diabetes, cancer, high blood pressure, trauma, depression, cigarette addiction, phobias, stress, insomnia, lazy, tired of being nervous, upset, anxious, not confident and others).⁴ Hakam said that the average reduction in pain levels of stage II b cervical cancer after being given an intervention between respondents who carried out the SEFT technique in the intervention group and respondents who were given standard analgesic therapy in the control group obtained a significant difference. The reduction in pain level in the intervention group was far greater when compared to the control group. It can be concluded that the administration of SEFT techniques is more effective in decreasing the level of pain in patients with cervical cancer stage II b ($p = 0.047$, $\alpha = 0.05$).⁵

In addition, the results of previous studies according to Budiarto that the usual SEFT method reduces pain intensity in migraine patients, before getting SEFT intervention migraine pain is at scale 8, after being given an intervention the SEFT method of migraine pain is reduced on a scale of 4. And can reduce the level of migraine recurrence.⁶ The SEFT method is quite effective when applied to patients who experience pain accompanied by an emotional level that is disturbed. This method directs patients to emphasize positive beliefs in themselves to be able to control pain. The higher level of confidence in the patient, the higher the chance for a reduction in pain.⁴

With the number of complaints suppressed by female students of SMAN 1 Cipanas, a method is needed to reduce pain during menstruation. The purpose of this study was to find out the effectiveness of the SEFT method in overcoming the dysmenorrhea problem in Cipanas SMAN 1 students.

II. RESEARCH METHODS

This study was designed using a quasi-experimental design with one group pre-post-test method. The stages of research on this quasi-experiment are by measuring data on the group of respondents at the time before giving treatment (pre-test) followed by giving treatment in the form of the SEFT method. Moreover, at the final stage data were also measured after treatment (post-test). Then the measurement results were analyzed and tested for differences statistically.⁷ In this study the study population was all 11th and 12th grade students of Cipanas 1 Senior High School in Lebak Regency in the 2017-2018 academic year of 333 people. Furthermore, the sample was determined by purposive sampling, i.e. samples that met the research criteria. The number of samples were determined by looking at the number of 11th and 12th

grade students who had sampling criteria. Because the sample size was determined according to the number of students who had a disruption, the sample size was taken from a total population of 82 female students who were known to experience disruption of dysmenorrhea if they were menstruating. On the other hand, for groups (intervention and control), it was carried out by Random. The type of data collected in this study is primary data.

Data collection is done by measuring and evaluating. The tools used to collect data are questionnaires and observation sheets that were made by the researchers themselves. Data collection was done twice on each respondent, namely once before the SEFT method treatment in the intervention group and the control group. and once again after being given treatment (control group) the SEFT method. The control group was given treatment after completing treatment in the intervention group. The application of the SEFT method will be carried out by SEFT therapists who are trained and certified.⁷

SEFT therapy is divided into 3 stages, the first is the Set-up which is rubbing the chest (afternoon spot), while praying fervently 'aims to neutralize "Psychological Reversal" or psychological resistance (usually in the form of spontaneous negative thoughts or negative unconscious beliefs). Errors or lack of specific set-up sentences can cause SEFT less effective.²

The second stage is Tune In, which is by feeling the pain that is experienced, then our mind centers on where the pain is felt by accepting the condition. This stage is part of selfhypnotherapy to remove our subconscious which is the cause of the negative energy experienced.

The third stage is tapping by lightly tapping on parts of the body using two fingers. At this stage certain body parts are tapped several times so that the impact can neutralize the pain that is felt, because the body's energy flow goes normally and. By doing this technique, a person will be trained to relax when facing situations that make individuals angry and reduce tension. The SEFT method is performed when a woman experiences pain before or during menstruation. The respondent is given an intervention for 15 minutes.^{6,8)}

The pain scale used in this study is to use the Numerical rating scale.² With the following information: 0 no pain, 1-3 mild pain goes away without treatment, does not interfere with daily activities, 4-6 moderate pain that spreads to the lower abdomen, interferes with daily activities and requires medication to reduce it. 7-9 severe pain controlled pain accompanied by dizziness, headache, vomiting, diarrhea, very disturbing activities and 10 Uncontrolled severe pain that is crying, grimacing, anxiety, avoiding conversation, shortness of breath, immobilization, until lost consciousness.⁹

III. RESULTS AND DISCUSSION

A. Univariate

From the table 1, it is shown that in each group (intervention and control group), there is a decrease in the mean score of pain before and after the treatment of the SEFT method from 3.28 to 1.54 (in the intervention group) and a decrease in the mean score of pain in the first measurement and the second measurement from 2.00 to 1.77 (in the control group).

TABLE 1. AVERAGE RESULTS DURING PAIN

No	Group	Average before	Average After
1	Intervention	3.28	1.54
2	Control	2.00	1.77

B. Bivariate

1. Intervention group.

From table 2, it can be described that based on the results of the Wilcoxon statistical test for the intervention group before and after the SEFT method, it is obtained p-value of 0.000 which means $p < \alpha$, then H_0 is rejected, which means there is a difference in the mean score of pain before and after the SEFT method intervention in the treatment group (intervention).

TABLE 2. MEAN DIFFERENCE IN THE INTERVENTION GROUP

X	Intervention Group		P
	Before	After	
	3.28	1.54	0.000

2. Control Group

In the control group, the p-value is 0.003, which means $p < \alpha$, then H_0 is rejected, meaning that there is a difference in mean score of the pain at the first measurement and the second measurement in the group that is not given control. The presentation of the reduction in pain score in the intervention group is greater, namely 53.05% compared to the control group which is 11.5%.

TABLE 3. MEAN DIFFERENCE IN THE CONTROL GROUP

Control Before	Group After	P
2.00	1.77	0.003

C. Mean Difference in the Two Groups

1. Mean Results in Pain

From the results of the study, it was found that the highest reduction in pain scores was found in the intervention group which was 1.54 after treatment with the SEFT method, this is because the SEFT method is a combination of therapeutic techniques that use psychological energy and spiritual strength and prayer to overcome negative emotions in body and can reduce or reduce pain / pain in someone, because the power of prayer is scientifically proven for healing. This is in accordance with Bobak's theory¹¹ which states that the SEFT method is giving treatment that contains elements of hypnotherapy which will be useful for suggesting itself and can heal itself when experiencing health problems with the aim of generating motivation, because motivation can improve one's quality of life

TABLE 4. MEAN DIFFERENCE IN THE TWO GROUPS

Average	P
0.99	0.000

In addition, according to the results of the study of Zaenudin (2008)¹², it is stated that emotional or stress disorders can cause energy imbalances in the body, with the practice of the SEFT method patients are asked to lightly knock on 18 SEFT points while "tune in" or imagine negative events, so that the body's energy flow runs normally and back in balance.

2. Different Results of Mean Scores of Pain in Each Group

From the results of statistical tests in the intervention group, the value of p was 0.000 meaning that $p < \alpha$, then H_0 was rejected, which means there was a difference in mean score of pain before and after the SEFT method intervention in the treatment group (intervention) and decrease in pain scores in the larger intervention group, namely 53.05% compared to the control group which was 11.5%. This shows that the SEFT method is very effective to reduce dysmenorrhea, because the SEFT method focuses on words or sentences that are repeated repeatedly and with a surrender attitude, sure, especially to the Almighty God. When someone prays calmly and surrender, the body will experience relaxation and cause a person to be calm, so that it can reduce pain or pain. According to Ahmad Faiz (2009)¹⁰ states that SEFT method therapy is carried out with the correct stages such as someone in doing the stages of therapy with full confidence, special, sincere, resigned and grateful to the problem itself, the SEFT method will succeed in overcoming the problems felt by someone both physical and psychological illnesses.

This is in accordance with the research of Hakam and Saputra⁵⁾¹³ which states that the SEFT method is able to reduce the pain felt by cancer patients in stage II, when the initial assessment of pain is quite severe felt by people with cancer, but the pain felt by patients with cancer decreases even some of which pain is not felt again after therapy.

3. Results of Mean Difference in the Two Groups

From the results of the statistical test, the mean difference in pain scores in the two groups (intervention group and control group), it was obtained a value of p was 0.000 which means that there was a difference in the mean score of the pain in the treatment group (intervention) after being given the treatment of the SEFT method different from the average pain score in control group not treated with the SEFT method. This shows that the SEFT method is very effective used to reduce pain in dysmenorrhea. According to Ahmad Faiz (2009)¹⁰⁾¹⁴, it is stated that SEFT method therapy is carried out with the correct stages such as someone in doing the stages of therapy with full confidence, special,

sincere, resigned and grateful to the problem itself, the SEFT method will succeed in overcoming the problems felt by someone both physical and psychological illnesses.

IV. CONCLUSION

The SEFT method (Spiritual Emotional Freedom Technique) has a significant effect on reducing the scale of pain in students who experience menstrual pain (Dysmenorrhea).

Suggestions for high school students is to socialize to other students about the benefits of the SEFT method in reducing dysmenorrhea during menstruation.

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