

Conference Paper

Effectiveness of Progressive Relaxation Therapy among Clients with Risk of Violence Behavior in Indonesia

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Abstract

Objective: Clients diagnosed with risk of violent behavior might affect the surrounding environment. A therapy is necessary to control the behavior and reduce clients aggression. Progressive muscle relaxation is one of therapy aims to reduce tension and anxiety by relaxing the muscles of the body with rhythm relaxation exercises of muscle from head to toe. (a) The purpose of this study was to identify the effect of progressive relaxation therapy in decreasing signs and symptom of aggression among clients with risk of violent behavior. **Method:** A quasi-experimental study was used with pre and post-test one group design. The samples used were 16 respondents and resulted in 50% of patients had red face signs and sharp eyes before intervention. **Results:** research results shows that (b). P value 0,017 was obtained showing the influence of progressive relaxation therapy on clients with risk of violent behavior **Conclusion:** It was concluded that progressive relaxation can be recommended for health care providers as one strategy action in managing client with violent behavior or risk of violent behavior, especially to control anger and aggression. This therapy could be suggested as one of patients' preparation for discharge from hospital.

Keywords: Relaxation Therapy, Nursing Problem, Violence Behavior Risk

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Received: 22 September 2019

Accepted: 4 October 2019

Published: 10 October 2019

Publishing services provided by
Knowledge E

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Selection and Peer-review under the responsibility of the ICHT 2019 Conference Committee.

1. Introduction

Advanced stages of mental disorder induce aggressive behavior which might harmful for both the sufferer and the closest social environment. Schizophrenia is one of severe mental disorder, which affects client perceptions, intellectual function, language, emotion and social behavior (Hermann, 2008). Patient with schizophrenia have higher risk to behave aggressively in which dramatically behavior changes occurs within days or weeks. In some cases, attacks can increase when the disease become severe (chronic schizophrenia). At this condition, client becomes savage, loses character as a human in social life, has no motivation at all, depressed, and has no sensitivity to their own feelings [1]. Positive symptoms often appear at the beginning of the schizophrenic phase

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and violent behavior become the main cause of patients hospitalization. The National Institute of Mental Nursing Health's Epidemiologic Catchment Area [2].

Progressive muscle relaxation (PMR) is one form of relaxation therapy that can be used as a therapeutic choice in patients who experience anxiety or the psychological conditions that often manifest to the existence of muscle tension (Sustrani, Alam and Hadibroto, 2004; Lilik, 2010). The mechanism of this therapy involving deep muscle relaxation technique by repeatedly stretching and relaxing muscle [3]. The goal of this therapy is to reduce tension and anxiety through relaxation by targeting autonomic nerves (Utami, 2007). Previous studies using this therapy for violent prevention showing a significant decrease in anger and the feeling of ability to control violent behavior among the intervention group compared to the control group (Jewell and Elliff's, 2013).

2. Methods

2.1. Design

A quasi-experimental study was conducted using pre and post-test one group design.

2.2. Participant and Setting

The study was carried out in West Java province hospital, (name of city), Indonesia. In total, 20 participants were involved in this study. Subjects were recruited....

2.3. Measurement

(State your variable and how to measure it such as demographic and clinical characteristics and etc.)

2.4. Intervention

2.4.1. Data collection procedure

(State how you collect data)

2.5. Data analysis

(Example: Statistical analysis was carried out using the SPSS statistical program) version ... Characteristic of the sample were described using mean and standard deviation ...

2.6. Ethical considerations

Approval for this study was obtained from ...

3. Results

3.1. Population characteristics

3.1.1. Signs or symptoms of violent behavior before progressive relaxation therapy is carried out.

Signs or symptoms of violent behavior that are often shown by clients can be seen from the following table:

TABLE 1: Frequency distribution of signs and symptoms of violent behavior before progressive relaxation therapy is carried out.

Signs and symptoms of PK	Yes		No		Total	
	f	(%)	f	(%)	f	(%)
Red / Tense	8	50	8	50	16	100
Eyes bulging / sharp eyes	8	50	8	50	16	100
Rigid body posture	5	31,2	11	68,8	16	100
Jaws closed	2	12,5	14	87,5	16	100
High voice	5	31,2	11	68,8	16	100
Walk back and forth	5	31,2	11	68,8	16	100
Speak roughly	3	18,7	13	81,3	16	100
ketus	2	12,5	14	87,5	16	100
Distance yourself	3	18,7	13	81,3	16	100
Dominate	3	18,7	13	81,3	16	100
Emotional labile	2	12,5	14	87,5	16	100
Etc	6	37,5	10	62,5	16	100

Based on the table above shows that the dominant symptoms of clients with a risk of violent behavior are red / tense face and 8 eyes (50%) glaring / sharp eyes.

3.1.2. Signs or symptoms of violent behavior after progressive relaxation therapy

Signs or symptoms of violent behavior that are still shown by the client after progressive relaxation therapy can be seen from the following table:

TABLE 2: Frequency Distribution of signs and symptoms shown by the client at risk of violent behavior after progressive relaxation therapy 2017.

Signs and symptoms of PK	Yes		No		Total	
	f	(%)	f	(%)	f	(%)
Red / Tense	7	43,7	9	56,3	16	100
Eyes bulging / sharp eyes	4	25	12	75	16	100
Rigid body posture	2	12,5	14	87,5	16	100
Jaws closed	1	6,2	15	97,8	16	100
High voice	1	6,2	15	97,8	16	100
Walk back and forth	2	12,5	14	87,5	16	100
Speak roughly	1	6,2	15	97,8	16	100
Ketus	2	12,5	14	87,5	16	100
Distance yourself	2	12,5	14	87,5	16	100
Dominate	2	12,5	14	87,5	16	100
Emotional labile	0	0	16	100	16	100
Etc	6	37,5	10	62,5	16	100

Based on the table above shows that the symptoms that are still often shown to clients with a risk of violent behavior after progressive relaxation therapy is a red / tense face of 7 clients (56.3%).

3.1.3. Effectiveness of progressive relaxation therapy on clients at risk of violent behavior

TABLE 3: Effectiveness of progressive therapy for clients with a risk of 2017 violent behavior.

Variable	P value
Before	0,017
After	

Based on the table above shows the results of the analysis which has a value of p value $< \alpha$ (0.05) which can be interpreted to be different signs or symptoms of violent behavior on clients the risk of violent behavior before and after progressive relaxation therapy.

4. Discussion

Start with univariate findings that important to be discussed, then bivariate. Do NOT repeated the results of this study in discussion section, paraphrase the results of this study that you would like to discuss then compare with supporting literature.

Clients with a risk of violent behavior based on the results of the study obtained from 20 clients there were 16 clients who showed some signs or symptoms of violent behavior, most of which were red / tense and 8 clients (50%), while other symptoms such as rigid body posture, high voice, pacing back and forth. This can still show that clients are still at risk of committing violent behavior. Anger is a normal response, but if it is expressed poorly it can lead to aggression and hostility [2]. Clients with experience of committing violent behavior of course have entered a maladaptive response that is aggressive to rampage in the range of their anger response. [1] considers violent behavior as an extreme result of anger or fear (panic). Aggressive behavior and violent behavior itself are often seen as a range, where aggressive verbal side and violence on the other.

4.1. Signs or symptoms of violent behavior after progressive relaxation therapy

Progressive relaxation therapy is carried out on 20 clients who have experienced violent behavior. After two days of therapy, 16 clients who previously showed signs or symptoms of violent behavior that often appeared to clients such as red / tense face, glaring eyes / sharp vision, pacing back and forth decreased to 43.7%, 25%, 12.5%. But there are also those who do not experience a decrease or reduction in signs or symptoms that were previously shown. Whereas in 4 clients who before the therapy showed no signs or symptoms we still gave therapeutic exercises to add ways to control their violent behavior. (Add supporting literature)

4.2. Effectiveness of progressive relaxation therapy on clients at risk of violent behavior

The results of the analysis p value <0.05 indicate that there are differences in signs or symptoms of violent behavior shown by the client before or after progressive relaxation therapy. so that this therapy can be said to be effectively done to clients with the risk of violent behavior with a decrease in signs or symptoms of violent behavior.

This supports the research conducted by Jewell and Elliff (2013) where progressive relaxation therapy can improve anger control ability, this therapy is included in one of the interventions of the violence prevention relaxation skills program. Although in the evaluation of management the therapy that has been carried out still has shortcomings so that the results obtained are less than optimal such as observation of the evaluation results carried out one time not for 24 hours, the presence of external factors by providing pharmacological therapy, and sampling that shows no signs or symptoms of violent behavior.

The ability to know or feel tension and stretching muscles can help clients realize when they feel angry and reduce anxiety and stress experienced by clients when they get problems that are adaptive coping for clients. The statement was supported by research conducted by Goergiev (2012) aimed at providing evidence about the efficacy of Progressive Muscle Relaxation (PMR) as a way to reduce anxiety and psychological distress as well as ways to improve subjective well-being in chronic patients with schizophrenia. Goergiev's research proves that this study provides scientific evidence for the usefulness of PMR in chronic psychiatric settings for patients with schizophrenia.

5. Conclusion

Progressive muscle relaxation therapy on the client with the risk of violent behavior is one of management strategies to control anger. It can also be used to preparing care client in home. It would be better if health workers and families in support of progressive relaxation therapy so that families have more alternative ways of caring on the client with the risk of violent.

Acknowledgement

The authors would like to thank their colleague for their contribution and support to the research. They are also thankful to all the reviewers who gave their valuable inputs to the manuscript and helped in completing the paper.

References

- [1] Yosep, Iyus. (2007). *Keperawatan Jiwa*. Cetakan I. Jakarta: Refika Aditama
- [2] Videbeck, S.L (2008). *Buku Ajar Keperawatan Jiwa*. Jakarta: EGC

- [3] Gemilang, J. (2013). *Buku Pintar Manajemen Stres dan Emosi*. Yogyakarta: Mantra Books