


## ORIGINAL RESEARCH

### Description of the implementation of complementary therapy in midwifery services in Surabaya, Indonesia

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Article Info	ABSTRACT
<p>Received Dec 4, 2022 Revised Mar 15, 2023 Accepted Apr 14, 2023 Published Aug 1, 2023</p> <p><b>*Corresponding author:</b> Annisa' Wigati Rozifa annisa_wigati_rozifa@um-surabaya.ac.id</p> <p><b>Keywords:</b> Midwife Midwifery service Complementary therapies Maternal health</p> <p>This is an open access article under the CC BY-NC-SA license (<a href="https://creativecommons.org/licenses/by-nc-sa/4.0/">https://creativecommons.org/licenses/by-nc-sa/4.0/</a>)</p> 	<p><b>Objectives:</b> This study aimed to describe the implementation of complementary therapy among the independent midwifery practices in Surabaya, Indonesia.</p> <p><b>Materials and Methods:</b> Employing a quantitative approach with a survey methodology, this study involved data collection through surveys administered to independent midwives practicing in Surabaya and midwives affiliated with independent midwifery practices. The questionnaires were containing the characteristics of the participants, the implementation of complementary therapies, and the complementary therapies integrated into the practice settings.</p> <p><b>Results:</b> The findings revealed that 25 midwives (comprising 52%) provided complementary midwifery services, whereas 23 midwives (comprising 48%) abstained from incorporating complementary midwifery services into their independent midwifery practices. The types of complementary therapies implemented consisted of aromatherapy, hypnotherapy, herbal medicine, baby massage and spa, maternity massage, oxytocin massage, and yoga.</p> <p><b>Conclusion:</b> This study concluded that 52% of independent midwives in Surabaya applied complementary therapy into their practices.</p>

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#### Highlights:

1. Midwifery services are carried out by combining conventional and complementary midwifery services.
2. Types of complementary therapies applied by 52% of independent midwifery services in Surabaya consisted of aromatherapy, hypnotherapy, herbal medicine, baby massage and spa, maternity massage, oxytocin massage, and yoga.

#### INTRODUCTION

Midwifery services are an integral part of the health care system for pregnant women, maternity mothers, postpartum mothers, newborns, infants and children, women of reproductive age and the elderly. Currently, midwifery services combine conventional and

complementary, which have become an essential part of midwifery practice.<sup>1</sup>

By the Regulation of the Minister of Health of the Republic of Indonesia, No. 1109/Menkes/Per/IX/2007, what is meant by complementary and alternative medicine is non-conventional medicine aimed at improving public health status, including promotive,

preventive, curative and rehabilitative with quality, safety, and high effectiveness.

In Indonesia, no law specifically regulates the implementation of complementary midwifery services.<sup>2-7</sup> Still, the implementation of complementary medicine, in general, has been regulated by the Minister of Health of the Republic of Indonesia, No. 1109/Menkes/Per/IX/2007 concerning complementary alternative medicine. People are attracted to complementary midwifery services because they are considered to have minimal effects than conventional or medical services. The increasing community needs and the development of research on complementary therapies are opportunities for midwives to participate according to community needs.<sup>8</sup>

In Indonesia, under the national program for Traditional and Complementary Medicine, the Center of Traditional Medicine Development (*Sentra Penapisan dan Pengembangan Penyehatan Tradisional/SP3T*) has implemented traditional medicine (TM) practice at 13 provinces since 1995 and complementary medicine (CM) practices were introduced in 12 pilot hospitals in 2010. This shows how national program for Traditional and Complementary Medicine has been distributed among the WHO regions. However, there was no data showing the overall number of midwives who apply complementary therapies in Indonesia.

The development of midwifery services through complementary midwifery services can be carried out in various forms, including massage for pregnant women and postpartum mothers, baby massage, and acupressure. Complementary midwifery services are an effort to increase added value, market competitiveness, and innovative advantages for the independent practice of midwives according to the expectations of users of midwifery services.<sup>2</sup> This study aimed to describe the implementation of complementary therapy at the independent midwife practices in Surabaya, Indonesia.

## MATERIALS AND METHODS

This research was conducted using a survey method. Data collection was carried out by surveying midwives who had independent practice and midwives who were partners of midwife independent practice centers in Surabaya. The survey was conducted by distributing questionnaires containing the characteristics of the respondents, the implementation of complementary therapies and the types of complementary therapies applied to their practice.

The subjects in this study were midwives who had independent midwife practices and midwives who were partners of independent midwife practices. The research subjects consisted of population and sample. The population in this study were 177 midwives who had independent midwife practices and partners of independent midwife practices in the city of Surabaya, Indonesia. The samples were recruited using a purposive sampling technique and a total sample of 48 midwives was obtained. The inclusion criteria in this research included: Midwives registered and have permission to be able to carry out midwifery practices independently; active in professional organizations, and carry out midwifery practices in accordance with midwifery service standards; carrying out overall midwifery services (pregnancy, childbirth, infants and toddlers, and female reproductive health, and are willing to work with researchers to become respondents), while the exclusive criteria were respondents who did not fill out and did not follow a complete series of research.

The measuring instrument used in this study was the questionnaire that was compiled by the authors. The questionnaires were distributed to the respondents. The questions given were closed and open questions, which were answered directly by the respondents. The research data were displayed in the form of a frequency distribution, using SPSS 23 application. Chairman of the research ethics committee Universitas Muhammadiyah Surabaya, Indonesia, stated that this study was approved to be implemented, the approval was set on 19 October 2021 with the number: 021/KET/II.3/AU/F/2021.

## RESULTS AND DISCUSSION

There were 25 midwives (52%) who carried out complementary therapy at independent midwife practices and 23 midwives (48%) who did not (Table 1). Midwives who did not apply complementary therapy because there was no high demand from the community in their surroundings for complementary therapy treatment. Besides, the professional organizations also do not require every midwifery service practice to apply complementary therapy.

Table 1. Implementation of complementary therapy in midwifery services at midwife independent practices

No	Implementation of Complementary Therapy	Frequency	Percentage (%)
1	Implemented	25	52
2	Not Implemented	23	48
Total		48	100

Table 2 shows that the types of complementary therapy services applied by 25 midwives in their practice were 25 baby massage and spa by as many as nine midwives (36%), oxytocin massage by six midwives (24%), and followed by aromatherapy, hypnotherapy, herbal medicine, and yoga by two midwives (8%).

Table 2. Types of complementary therapies applied by midwifery services in midwives' independent practices

No	Types of complementary therapy	Frequency	Percentage (%)
1	Aromatherapy	2	8
2	Hypnotherapy	2	8
3	Herbal Medicine	2	8
4	Baby massage and spa	9	36
5	Maternity massage	2	8
6	Oxytocin massage	6	24
7	Yoga	2	8
Total		25	100

Complementary and Alternative Medicine (CAM) is a broad collection of healthcare practices that are not part of a country's traditions and are not integrated into the dominant healthcare system.<sup>10</sup> Regulation of the Minister of Health of the Republic of Indonesia Number 15 of 2018 defines Complementary Traditional Health Services as the application of traditional health that utilizes biomedical and biocultural science. Its benefits and safety are scientifically proven.<sup>11</sup> Based on the results of the National Socio-Economic Survey (SUSENAS) on the use of traditional medicine, including complementary and alternative medicine, the traditional medicine have been used by 40% of the Indonesian population, and it is also increasing from year to year.<sup>12</sup>

By 2018, more than 85% of the total member states in the WHO African Region and South-East Asia Region reported having a national policy for Traditional and Complementary Medicine. In the WHO Western Pacific Region and the Eastern Mediterranean Region, 63% and 43% of member states, respectively, had a national policy framework in place, while in the WHO Region of the Americas and the European Region the percentages were 31% and 21%, respectively.<sup>12</sup>

The purpose of complementary therapy is to improve the function of the body's systems, especially the immune and defense systems so that the body can heal itself when it is sick by listening and responding with good and complete nutritional intake and proper care.<sup>12</sup> The role that midwives can provide in complementary or alternative therapies can be adapted to the current care role according to the limits of their abilities. The increasing needs of the community and the development

of research on complementary therapies are opportunities for midwives to participate according to community needs. Midwives can act as consultants to clients in selecting appropriate alternatives or help provide direct therapy. Complementary midwifery services are an option to reduce medical interventions during pregnancy and childbirth as has been shown by experience.<sup>13-20</sup> However, this needs to be further developed through research so that it can be applied to provide better midwifery therapy.<sup>21</sup>

The results showed that some midwives still apply complementary therapies in their practice. This is in line with research by Holden, which states that the interest of the public who wants to use complementary therapy services is only one-third of the total number of people. The rest of the community still uses conventional therapy.<sup>22</sup>

In addition, there are still many midwives who have yet to apply complementary therapies in their practice. This can be due to the lack of a strong legal basis for complementary midwifery services, so they are doubtful in their application even though they get maximum results. Complementary therapy service providers or so-called alternative, complementary medicine still needs to be clarified, and licensing is not easy. Health professional organizations have various interpretations of the Regulation of the Ministry of Health No. 1109 of 2007. Alternative complementary health workers are health workers with more value than traditional healers, which can be done by anyone who is not a health worker.<sup>23</sup>

Based on the study results, it was shown that complementary therapies widely applied were baby massage as much as 36% and oxytocin massage of 24%. Baby massage is a touch or massage for babies that provides continuous body contact that provides many physical and psychological benefits for babies.<sup>24</sup> Stimulation or touch on the baby's body will stimulate the vagal nerve to increase the production of digestive enzymes and improve the baby's digestive system, which influences the baby's growth and development.<sup>25,26</sup> Many midwives apply this therapy in their practice is because it is easy to implement and does not require much equipment. In addition, the community is also starting to feel the benefits, so high interest encourages midwives to apply this therapy in practice.

There were, however, some limitations of this study. This study had not examined whether each complementary therapy had been carried out according to the procedure or not, had not explored how the patient responded, and there had been no regular quality assessment. Further research should include



examination whether the complementary therapy has been carried out according to the procedure, in-depth explanation related to the patient's response to complementary therapy services applied by midwives, as well as considering the use of analytical research designs to obtain more optimal research results.

## CONCLUSION

There were 52% of midwives who applied complementary therapy in independent practice midwives in Surabaya, Indonesia. There were seven types of complementary therapies from 25 midwives who carry out the complementary therapies in midwifery independent practice centers in Surabaya, i.e., aromatherapy, hypnotherapy, herbal medicine, baby massage and spa, massage for pregnant women, oxytocin massage, and yoga. In providing midwifery services, midwives can apply complementary therapies in their services to minimize the use of medical drugs. This also needs to be supported by professional organizations in providing policies related to complementary midwifery services.

## DISCLOSURES

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### Conflict of interest

The authors declare there is no conflict of interest.

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### Author Contribution

All authors have contributed to all processes in this research, including preparation, data gathering and analysis, drafting and approval for publication of this manuscript.

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