

Original Research

Yoga To Improve Women's Sexual Function

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ABSTRACT

Background: Sexual function in women is closely related to women's reproductive health, if an individual experiences a disturbance in his sexual function, his reproductive function must also have problems. This sexual problem can be overcome by exercising, one of the recommended sports is yoga, Yoga is a sport that can improve sexual function and treat sexual disorders so that it can overcome sexual function problems. Aim of study is to analyze effect yoga to improving women's sexual function.

Methods: A Descriptive cross-sectional, with population were women who have been married, aged 20-45 years, yoga regularly. Amount of sample is 60 respondent, chosen using total sampling technique. The instrument used is the FSFI (Female Sexual Function Index) questionnaire, which is a questionnaire to measure sexual desire, sexual arousal, vaginal lubrication, orgasm, sexual satisfaction and pain. Data were analyzed using Chi-Square Test.

Results: Analysis Chi Square test with p-value 0.000, its mean p value <0.05. Yoga 25 times can improve the women's sexual function.

Conclusion: Yoga is associated with women's sexual function. Women who are married or have a partner can do yoga regularly because yoga has benefits for health and improves the sexual quality of women.

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INTRODUCTION

Sexual function in women is closely related to women's reproductive health. Individual has a disruption in his sexual function, his reproductive function must also have problems. Sexual function is one of the factors that have an important role in married life. Sexual relations can be optimal or not in married can affect function that affects the quality of life of the couple. Women who have a decreased function or even a disruption in sexual function is also known as sexual dysfunction, it will cause their sexual activity with their partner to be disrupted (Arini, 2018).

Sexual health problems are not given much attention, whereas sexual health affects general health and sexual problems negatively affect the quality of life (Nurmayani, Mulianingsih, et al., 2020). Sexual dysfunction is a combination of several

heterogeneous disorders characterized by clinically significant impairment in a person's ability to respond sexually or to experience sexual pleasure. Sexual dysfunction is a problem that results in the individual or his partner not being able to enjoy sexual intercourse and orgasm.

This occurs as a result of physiological disorders, cultural conflicts, interpersonal problems, or a combination of the three (Widjayanti, 2018). Thus, female sexual dysfunction is a term for four different disorders recognized in the DSM-5 namely disorders of female orgasm, female sexual interest or arousal, pain during genito-pelvic penetration and substance/ drug-induced sexual dysfunction (Arini, 2018).

Sexual dysfunction in women can be caused by various things. The sexual dysfunction includes significant psychological distress (anxiety, depression, lack of sexual confidence, poor self-esteem, impaired quality of life and interpersonal difficulties). The cause of an increase in sexual dysfunction is related to communication between partners. Factors that also contribute are biological factors (menopause status, namely length of menopause and age) and environmental factors, namely parity, age of partner (husband), education level, income, woman/wife occupation, length of marital relationship (Sofiatin et al., 2020).

According to research (Prastiwi et al., 2017), that complaints in menopausal women related to genital atrophy are dyspareunia (40%), genital itching (40.8%) and loss of libido (51%). In the journal International menopause society by Sturdee and Panay (2010), entitled Recommendations for the treatment of vaginal atrophy in postmenopausal women, 7243 women aged 40–59 years found a high prevalence of sexual dysfunction (56.8%) (Arini, 2020). If you look at the data, most women experience sexual dysfunction.

With such a high prevalence, it is natural that female sexual dysfunction cannot be underestimated, because it involves the quality of life of more than half of the female population. One of the causes of sexual dysfunction is the lack of prime physical condition caused by lazy to move such as sports. Only from a healthy physique comes healthy sex and a healthy physique is highly dependent on physical, mental and social health.

In addition to maintaining a healthy body, gymnastics can increase sexual ability naturally. Regular, regular and continuous physical exercise will get a person's sexual ability back after previously experiencing a decrease in sex drive (Nurmayani, Purqoti, Dewi, et al., 2020). Exercise also makes blood circulation to sensitive points which can increase sexual arousal. Regular exercise can reduce the degree of perimenopausal estrogen deficiency, which causes non-ovarian estrogen production (Razzak et al., 2019).

Health experts recommend that to overcome sexual problems in the family is to exercise regularly. Gymnastics that can be done by women is yoga, where yoga is a form of complementary and alternative therapy that is popular and widely practiced in developed countries. Pharmacotherapy to treat female sexual dysfunction is available but suffers from drawbacks such as poor adherence, poor efficacy, and side effects.

Many patients and yoga experts claim that yoga is useful in improving sexual function and treating sexual disorders, especially in tantric yoga, where hormones and balance are achieved through sexual union between a man and a woman. Yoga makes a feeling of calm, can train the flexibility needed in making love to increase sexual arousal. This is of course supported by the exercises in yoga (Agustin, 2018).

In understanding yoga for sex is a practice, yoga provides two disciplines of practice, namely movement and stillness. For married couples who feel less enjoying their sexual activity, then do yoga. Aim of study is to analyze effect of yoga to improve women's sexual function.

MATERIALS AND METHOD

A descriptive analytic with cross-sectional study in Lombok Yoga Center studio, Kota Mataram, held in August 2021. The population of women of childbearing age is 60 people they were taken using total sampling technique. Inclusion criteria: aged 20-45 years old and married, yoga at least 1 month before, actively do the yoga, Notin pregnant condition, Respondents stay in Mataram, and the exclusion criteria: Women under 20 years old, already menopause, in pregnant condition, reject to be a respondent, had physical health conditions.

The the FSFI (Female Sexual Function Index) questionnaire instrument is used for this research, which is to measure sexual desire, sexual arousal, vaginal lubrication, orgasm, sexual satisfaction and pain during sexual intercourse which was assessed in the last four weeks. The score range for sexual desire that is 1-5, a score of 1 indicates the respondent did not have a sexual desire. The score ranges from 0-5, a score of 0 indicates the respondent did not have a orgasmic arousal, satisfaction.

A score of FSFI ≥ 26.55 indicates no sexual dysfunction or normal, and a score of FSFI ≤ 26.55 is indicates as sexual dysfunction. This research use a Bivariate analysis by Chi Square test. This research has received an ethical clearance from STIKES Yarsi Mataram, No :19/Kep/STIKES/VII/2021, and has received a research permit from Lombok Yoga Center.

RESULTS

The following data is displayed Frequency Distribution of Age, Education, Occupation and Length of Respondents Doing Yoga at Lombok Yoga Center in Kota Mataram in 2021.

Table 1. Frequency Distribution of Age, Education, Occupation and Length of Respondents Doing Yoga at Lombok Yoga Center in Kota Mataram in 2021

Characteristics of Respondents	N	%
Age		
20-35 year	42	70,0
>35 year	18	30,0
Education		
College	35	58,3
Senior High School	25	41,7
Teacher	4	6,7
Housewife	22	36,7
Trader	3	5,0
Businessman	2	3,3
Government employees	3	5,0
Private	26	43,3
1 month	4	6,7
2 months	18	30,0
Frequency of doing yoga		

Characteristics of Respondents	N	%
4 times	53	88,3
3 times	3	5,0
1-2 times	4	6,7
SexualFunction		
NormalSexualFunction	56	93,3
Dysfunction	4	6,7
Total	60	100

Based on table 5.1, it can be seen that the highest age distribution is in respondents 20-35 as many as 42 people (70.0%). For education with the highest number of tertiary institutions as many as 35 people (58.3%), the highest type of work was private as many as 26 people (43.3%) and housewives as many as 22 people (36.7%).

Based on the duration of doing yoga, the highest number was in the category > 2 months as many as 38 people (63.3%), based on the frequency of doing yoga exercise the most 4 times as many as 53 (88.3%) and based on sexual function the most normal amounting to 56 (93.3%).

Bivariate Analysis

Table 2. Analysis of the Frequency of Respondents Doing Yoga Gymnastics (a week) at Lombok Yoga Center in Kota Mataram 2021

Yoga frequency	Sexual Function				<i>p-value</i>	<i>OR</i>
	Normal		Dysfunction			
	N	%	N	%		
Very good	53	88,3	0	0,0	0,000	25.712
Good	3	5,0	0	0,0		
Less	0	0,0	4	6,7		
Total	56	93,3	4	6,7		

Based on table 5.2, it was found that the highest respondent's sexual quality data was very good 53 people (88.3%).Based on the analysis Chi Square test with (*p-value* 0.000) <0.05 with OR 25,712, it means that there is a associated between yoga exercise to improve women's sexual function in Kota Mataram. Yoga have a 25 times to improve the women's sexual function.

DISCUSSION

Frequency of Respondents by Doing Yoga Exercise

The results of research conducted at Lombok Yoga Center in Kota Mataram on women of childbearing age who did yoga exercise very well as many as 53 people (88.3%) good as many as 3 people (5.0%) less as many as 4 people (6.7%). Yoga is an ancient practice that involves physical postures (asanas) and breathing techniques (pranaya-mas). There is also a cognitive component that focuses on meditation and concentration, which helps in achieving the goal of unity between the self and the spiritual.

Yoga is a technique that focuses on muscle structure, breathing mechanism, posture and mental health through exercise, proper breathing and maintaining posture. This is of course supported by the exercises in yoga, which in addition to creating a

feeling of calm, yoga can also train the flexibility needed in making love to increase sexual arousal (Agustin, 2018). According to research by Stanton et al., (2018) exercise can have a positive influence on women's sexual function.

Exercise increases sympathetic nervous activity on the nervous system and endocrine factors, where movement and flexibility throughout the body benefit healthy cardiovascular function and improve mood, especially in middle-aged women. From the results of this study, it can be seen that the respondents who do a lot of yoga are women with private jobs (43.3%) and housewives (36.7%) where women who work have a lot of work demands that are done every day, without any time limit.

When to start and when to stop, the lack of opportunity to take time to rest makes these activities a heavy burden and demands energy that sometimes exceeds the limits of mothers' abilities. This results in boredom and physical and mental fatigue, which ultimately due to the inability to manage these demands results in stress. Overcoming all of this requires activities such as sports and applying positive thoughts in every moment or event, one form of activity that makes a healthy and balanced life is yoga, besides that yoga also helps prevent and cure diseases, such as preventing rheumatic diseases, protecting the spine, prevent osteoporosis, improve blood circulation, protect the heart, lower blood pressure, lose weight, lower blood sugar (Agustin, 2018).

Judging from the education of the respondents who did the most yoga exercises, namely college education as many as 35 people (58.3%). Where the higher a person's education is, the information they have is wider and easier to accept, including information about reproductive health, whereas if a person's education level is low, the information obtained will be cut off (Monika et al., 2021). Higher education is considered necessary for women, because higher education can improve their standard of living, make decisions regarding their own health problems.

A woman who graduated from college will find it easier to get a job and be able to behave in a healthy life when compared to a woman who has low education. With higher education, a woman is increasingly able to be independent with something that concerns themselves. Especially in their sexual activity, educated women are able to find and know and can deal with problems that occur about their sexual activity related to sexual arousal or drive (Agustin, 2018).

Women's Sexual Function

Based on the results of the study, 56 respondents (93.3%) had normal sexual function and 4 (6.7%). Sexual function in women is the result of the integration of biological structures, life experiences, knowledge, behavior, and attitudes that are influenced by physical, psychological, interpersonal, and cultural factors (Gultom et al., 2018).

Based on the results of (Arini, 2020), sexual function will increase when women do light exercise such as gymnastics, where sexual function will be good by doing Orhiba exercises combined with Kegels. This situation indicates that the sexual function of women who routinely do orhiba combined Kegel exercises are very good and tend to have no problems even though they have entered menopause compared to those who do not do gymnastics or the control group.

In accordance with research results (Nurmayani, Purqoti, Dewi, et al., 2020), the sexual quality of women who are active in sports in Kota Mataram, with the number of respondents who actively do sports as many as 54 people and have good sexual quality 52 people (96.3%) and 2 people (3.7%). Factors that cause sexual quality disorders in

women of childbearing age, namely age, physical conditions such as cancer, kidney failure, heart disease and bladder problems, can cause sexual dysfunction, certain drugs including antidepressants, blood pressure drugs, antihistamines and chemotherapy drugs. Psychological, namely anxiety or depression that is not treated can cause or contribute to sexual and hormonal disorders such as contraception which can cause hormonal imbalances, contraceptive use suppresses the production of the hormone estrogen.

Judging from the highest age of respondents who did yoga exercise 20-35 years as many as 42 (70.0%) and >35 years as many as 18 (30.0%). At the age of 20, women have high self-confidence in their sexual life, this is because women are finding out about sexual desire, how to communicate it with their partner, how to channel sexual desire to the point of orgasm. At the age of 30, women are more open and accepting about sexual relations with their partners.

This also applies to stamina that begins to decline, sexual activity is only carried out to maintain household harmony and physical health. At the age of 40, women's desires at this age begin to decline, this is split with the obligations and responsibilities of women as a mother. Daily activities such as working with children make women less or less interested in having sexual relations.

Women of childbearing age (WUS) are women of reproductive age, namely 15-49 years old, whether they are married, widowed or unmarried whose organs are in good condition. Reproductive function properly between the ages of 20-45 years. After passing the age of 50 years, problems can occur in sexual relations because of getting older, working more and more, and even starting to arise various diseases such as high blood pressure, diabetes, reduced libido, or impotence (Emilia & Prabandari, 2019). Similar research to (Valani et al., 2019), which shows that the age of more than 35 years affects the occurrence of female sexual dysfunction.

Sexual function is part of the way in which a person participates in the desired sexual relationship. Sexual function is an important factor because in addition to mental issues, sexual function also includes a person's physical condition in achieving a good sexual relationship. In other words, the individual's inability to realize these conditions is called sexual dysfunction.

Sexual dysfunction is a reproductive health problem that can occur in individuals and is defined as a disorder of sexual function that often occurs. These disorders mean that the individual is late to feel sexual desire or urge, feels sexual arousal, has difficulty orgasming, and even experiences pain during intercourse.

The Association of Yoga to women's sexual Function

In accordance with the results of the study, the number of respondents doing yoga exercises in a week was very good as many as 53 people (88.3%), good as many as 3 people (5.0%) and less as many as 4 people (6.7%). Chi-Square that has been done, the results of the correction (fisher's Exact Test) with (p-value 0.000) <0.05 which means there is a relationship between yoga exercise and the sexual function of respondents to women of childbearing age in Kota Mataram.

Based on research (Agustin, 2018), where yoga is a popular form of complementary and alternative therapy. Pharmacotherapy to treat female sexual dysfunction is available but suffers from drawbacks such as poor adherence, low efficacy, and side effects. Many patients and yoga protagonists claim that it is useful in improving sexual function and treating sexual disorders.

Especially in tantric yoga, hormones and balance are achieved through sexual union between a man and a woman. This is of course supported by the exercises in yoga, where in addition to creating a feeling of calm, yoga can also train flexibility in lovemaking to increase sexual arousal. In conclusion, yoga can increase sexual arousal, in addition, an OR value of 44,231 is obtained, which means that there is a 44 times greater chance for PUS women who do not do yoga compared to women who do yoga.

According to research (Arini, 2020) there is an increase in sexual function in a positive direction, in menopause women by doing simple exercises such as Orhiba with a combination of Kegels or Orhiba alone. In line with the research of (Sobhgol et al., 2019) there is a good effect of pelvic floor muscle exercises (Kegels) on mothers during pregnancy and postpartum which serves to restore the pelvic organs to return to their previous state. This also applies to postmenopausal women where Kegels can reduce the incidence of urinary incontinence due to weak pelvic floor muscle contractions, so that sexual relations and quality of life can be better.

According to research (Rosida et al., 2017), where the results obtained with a t-test $p < 0.001$ which means that there is a significant effect between yoga and health-related quality of life scores, and there is also a significant difference between quality scores. Menopausal women who do yoga and don't do it concluded that yoga can affect the quality of life related to health in Menopause. Exercise is an active behavior to increase immunity by increasing metabolism and influencing the function of the glands inside so that it can protect the body from microorganisms that cause disease, including defending the body from stress.

Exercise is an activity that is very important to be done regularly to maintain physical fitness, regular exercise will make a person more enthusiastic and look younger than his age, and exercising can also relieve tension, stress and excessive fear that may interfere with pleasure in coitus. Exercise makes the blood cycle smoother, including blood flow to sensitive points that can increase sexual arousal. Physical and psychological health is the main capital to be able to perform sexual activity optimally, so that it will strengthen the husband and wife relationship (Nurmayani, Purqoti, Dewi, et al., 2020).

Married couples who have good sexual exercise will have better sexual quality compared to couples who have bad sexual exercise under the same conditions. A healthy sexual life is usually found in a healthy partner, both physically and psychologically. If one feels unfit or fit, sluggish and his stamina decreases and even feels sick, then his sexual activity will not run optimally, as well as his psychological state, if there are problems and many thoughts then his sexual activity will not run optimally.

Sex will increase regular sports activities, because exercise has been shown to increase testosterone levels for men and estrogen for women, both of which have a direct influence on sexual ability and satisfaction (Nurmayani, Purqoti, Dewi, et al., 2020).

CONCLUSION

According to the results of this research that held on Lombok Yoga Centre in Kota Mataram that there is an association between Yoga exercise on women's sexual function based on the result of Fisher's exact test with $(p\text{-value } 0,000) < 0,05$. The results of this research is expected for women who are married or have a couple can do yoga regularly because it will improve the sexual functions of women.

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