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THE EFFECT OF MUROTTAL THERAPY ON THE LEVEL OF ANXIETY IN MATERNITY AT BENGKALIS REGIONAL GENERAL HOSPITAL

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ABSTRACT

Labor will be difficult if women are anxious about the labor process and the birth of the baby. Relaxation and traction treatment, one of which is murottal Al-Qur'an, can help to reduce anxiety. Because the duration and severity of contractions in the active phase gradually increased, murottal therapy was given during the first stage of the active phase. This experiment was done in July 2021 at Bengkalis Hospital to analyze the influence of murottal therapy on the level of anxiety in maternity mothers. A pre-experimental design with a One Group Pretest Posttest design technique is used in this kind of experiment. Purposive sampling was used to determine the sample size, which totaled 33 participants. This research instrument using the Hamilton Anxiety Rating Scale (Hars). Data analysis using Paired Sample T-Test showed that the majority of respondents had severe anxiety levels before murottal therapy (57.6%), and the majority of respondents after murottal therapy had moderate anxiety (54.5%), indicating that there was an effect of murottal therapy on the level of anxiety. With an average difference in score changes of 6.030 between before and after murottal therapy anxiety about delivery $p = 0.000$ (p value 0.05). As a result, it can be concluded that giving murottal therapy can make pregnant mothers feel calmer. It is hoped that it would be used as a non-pharmacological midwives care intervention as a therapeutic agent.

Keywords: Al-qur'an, Anxiety, Labor, Murottal

INTRODUCTION

Childbirth and birth are physiological events, the birth of a baby is a social event that is awaited by mothers and families. When labor begins, the mother's role is to give birth to the baby, the role of health workers monitors labor to detect complications early while the family provides assistance and support to the mother. Childbirth that is not handled properly can cause the labor process to run smoothly so that the delivery time becomes longer than usual[1].

The maternal mortality rate in Riau Province in 2013 was 195.4/1000 live births, in 2014 it decreased to 109.9/1000 live births and increased in 2015 to 122.1/1000 live births[2].

The risk of death during childbirth increasingly affects the emotional stability of the mother. If this unstable emotional

condition is carried on until the delivery process, it can cause labor to become uneventful (Primasnia et al, 2013). One of the causes of poor labor is feelings of anxiety due to concerns about the delivery process and the birth of the baby. So that in the view of the childbirth community it is still considered a risk of life between life and death[3].

This anxiety arises because of the idea of a frightening thing during labor, even though what is imagined is not necessarily the case. Anxiety can be reduced by using relaxation and traction therapy, including Qur 'an therapy, yoga, music, hypnotherapy, and the application of pregnancy exercise. Murottal is one of the music that has positive connotations for its listeners. The administration of murottal therapy is carried out during the active phase I, because the length and strength of

contraction in the active phase gradually increase[4].

The results of Handayani's (2014) study showed that there was a difference in the average decrease in anxiety levels before and after murottal therapy with a p value of α (0.000 0.05). Similarly, the results of Riyadhi's (2014) study showed that there was an effect of Qur 'anic murottal therapy on the anxiety level of preoperative patients. The influence of the Qur 'an can provide relaxation and peace of mind is also implied in the Qur 'an (QS) Az Zumar (39: 23) which reads " Allah has sent down the best word (i.e.) the Qur 'an which is similar (verse verse), then it calms their skin and hearts when remembering Allah, with it Allah guides whom He wills. And whomsoever Allah leaves astray, there is none to guide."

Based on interviews with maternity mothers at Bengkalis General Hospital from 10 mothers in labor, it was found that 7 out of 10 mothers in labor felt tension, fear, anxiety and worry during the delivery process. This is due to factors of age, physical condition, socio-culture, level of education and level of knowledge and past experience[5].

This situation has made many Muslim-majority families take alternative options to overcome tension, fear, anxiety and worry by playing Murottal on their mobile phones[6].

RESEARCH METHODS

This research is a quantitative study with Pre-experimental Design. The research design used One Group Pretest Posttest design. The sampling technique in the study used purposive sampling. The research was conducted at Bengkalis Regional Hospital in July August 2021. The research population was 37 people and the number of samples was 33 respondents using murottal Qur 'an surah Ar Rahman for approximately 15 minutes and Hamilton anxiety rating scale (HARS) questionnaire. Data analysis used Paired t test and Shapiro Wilk test normality test[7].

RESULTS AND DISCUSSIONS

Results

Table 1. Normality test of Maternity Anxiety Score at Bengkalis Regional General Hospital

	Shapiro-Wilk		
	Statistic	df	Sig
Pretest	0.965	33	0.357
Post test	0.958	33	0.232

The results of the normality test before being given murottal therapy obtained a significance value of 0.357 (p value > 0.05), meaning that the data were normally distributed because the significance value was > 0.05. The results of the normality test after being given murottal therapy obtained a significance value of 0.232 (p value > 0.05), meaning that the data were normally distributed because the significance value was > 0.05.

Table 2. Distribution of Maternity Anxiety Level Scores at Bengkalis pretest and post test Hospitals Given Murottal Therapy

Category	N	Mean	Change
Pretest	33	28.48	6.030
Post Test		22.45	

Table 2 Shows that the average change in the anxiety score in maternity mothers at Bengkalis General Hospital before murottal therapy was 28.48 which was at the level of severe anxiety, after murottal therapy was 22.45 which means that they were at the level of moderate anxiety and a decrease in anxiety score was obtained by 6,030.

Table 3. The effect of murottal therapy on maternity anxiety levels in Bengkalis Regional Hospital

Mean	SD	P value	91% CI	
			Lower	Upper
6.030	4.733	0.000	4.352	7.709

Based on the results of the Paired Sample T Test analysis, a p value of 0.000 (< p 0.05) was obtained, which means that there is a significant effect on changes in the scot level of anxiety in mothers before and after murottal therapy. The mean maternity anxiety score was 6,030. It can be

concluded that murottal therapy can effectively reduce the anxiety level of maternity mothers at Bengkalis Regional Hospital[8].

DISCUSSIONS

Maternal Anxiety Level Before and After Murottal Therapy

The results showed that the majority of respondents before being given murottal therapy experienced a level of severe anxiety as many as 19 respondents (57.6%) with an average value (mean) of 28.48. Then after being given murottal therapy, the majority of respondents experienced a moderate level of anxiety as many as 18 respondents (54.5%) with a mean value of 22.45.

The anxiety experienced by mothers before childbirth is common, although childbirth is a physiological one, but in the birthing process a series of physical and psychological changes occur (Prawirohardjo, 2015). Each individual has a different view in dealing with childbirth, resulting in a different response. However, in every birth event there is always fear. For this reason, it is necessary to have a species development involving biopsychosocial and spiritual aspects.

Anxiety will cause somatic symptoms that indicate a relationship between autonomic nerves (SSA). Anxiety is a common but non-specific thing that often disturbs emotions (Wahyuni and Komariah, 2020). Fear is usually experienced in things that are unknown to you, so you feel that you are not ready to give birth or that you are having a delivery that is not on schedule so that you experience psychological fatigue, then tense during contractions and extreme pain can make you experience anxiety [9].

The spiritual dimension of humans is one of the four dimensions of a holistic approach, and such aspects are biological, psychological, and social. Based on the evidence, attention to the spiritual dimension of treatment will produce significantly different results from attention

to its physical, psychological, and social dimensions. In addition, participation in religious and spiritual rituals is associated with better health outcomes, such as increased life expectancy, decreased cardiovascular disease and decreased risk of depression, anxiety, substance abuse, and suicide.

Based on research conducted by Nayef et al (2018), the Qur 'an facilitates the stabilization of heart rate, breathing, and emotions. Nayef revealed that listening to the Qur 'an can control the brain to reduce anxiety, fatigue, and boredom and produce spiritual relaxation. Listening to the Qur 'an is a therapeutic approach that can control heart rate, breathing, blood pressure, brain waves, temperature, and muscle pressure.

According to the assumption of the researcher, anxiety can attack the mother in labor regardless of the individual characteristics of the mother. Anxiety can increase, especially in primipara mothers who do not have experience giving birth. The information received by the mother of childbirth from others also triggers the mother to experience anxiety and fear. Murottal provides comfort, security and increases the mother's enthusiasm to give birth to her baby. However, this must also receive family support so that mothers can increase their confidence to give birth properly.

The Influence of Murottal Therapy on the Level of Anxiety Before and After Based on the test results, the mean analysis before murottal therapy was 28.48, then the mean after murottal therapy was 22.45. The change in the mean difference value was 6,030 between before and after the therapy was given. Thus, the average difference in the level of anxiety after murottal therapy was given was smaller than the average before the therapy was given. With a p value of 0.000 (p value < 0.05), which means that there is a murottal effect on the level of anxiety in mothers in childbirth.

This is in line with research conducted by Qonitun and Betalia (2018), study

conducted on 19 maternity attendees, it is known that based on the Wilcoxon test results, the Asymp value was obtained. Sig. (2 tailed) p value =0.001 (p value < 0.05) which means that there is an effect between murottal therapy on reducing anxiety levels in maternity.

Based on the results of the study, it can be seen that there is a shift in the level of maternal anxiety after being given murottal therapy. Before therapy, there were no mothers who had low anxiety levels (not anxious to mild) and more mothers who experienced severe anxiety as many as 19 respondents (57.6%). Then after being given therapy, the lowest level of maternal anxiety was at a mild level of 12 respondents (36.4%) and a moderate level of 18 respondents (54.5%). Research conducted by Irmawati (2020), showed that there was a significant change in anxiety level after listening to Surah Ar Rahman (p 0.001). Meanwhile, there was no change in anxiety level in the control group (p=0.50). The results also showed that anxiety scores, cortisol levels and delivery time were significantly lower in the intervention group compared to the control group (p 0.001, p = 0.001, and p 0.001).

Murottal Qur 'an recited by Qori' in the form of sound recordings has a positive impact on the listener. Murottal therapy is a religious therapy that is played to someone within minutes or hours that has a positive effect on the psyche of someone experiencing anxiety. Murottal who is heard raises awareness of the existence of Almighty God who is the greatest supporting force. The perceived awareness makes a person give totality which in this stage the brain is in alpha waves at a frequency of 7 14 Hz. In this condition, it is an optimal part and can reduce stress and reduce a person's anxiety level (Handayani et al, 2014).

The stimulation of the Quran as a relaxation therapy can be used as an alternative therapy that is even better than other audio therapies because the Quran can produce delta waves of 63.11%. Low sound

intensity is a noise intensity of less than 60 dB, which provides comfort and does not cause pain. Murottal has a 50 dB intensity that gives a positive effect on the listener. This audio therapy is also an inexpensive treatment with no side effects..

According to the researchers' assumptions, murottal therapy enhances the spiritual side of the mother in associating herself with God. So I'm more calm in the delivery. The natural tension, anxiety and fear will experience a rather significant decrease. A more relaxed condition will make the childbirth process more stable. Mother's psychology is becoming more concerned about achieving a safe delivery process.

CONCLUSION

The mother's anxiety score before giving murottal therapy has a severe anxieties level and after giving Murottal treatment has a moderate anxieties level.

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