

THE INFLUENCE OF LETTER AR-RAHMAN MUROTAL THERAPY ON THE ANXIETY LEVEL OF PREGNANT WOMEN IN THE 3rd TRIMESTER AT UPTD CIRINTEN HEALTH CENTER, LEBAK DISTRICT

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Abstract

Background Anxiety is a mood *or* experience characterized by worry, unpleasant feelings and physical tension. Anxiety and worry in pregnant women, if not treated seriously, will have physical and psychological impacts, both on the mother and the fetus. Of course, non-pharmacological treatment is also needed, one of which is murotal therapy. The therapeutic effect of reading the Qur'an as a medicine for physical and spiritual illnesses, stimulating the holy verses of the Qur'an for mothers can reduce anxiety. Research purposes . The aim of this research was to determine the effect of Ar-rahman letter murotal therapy on the anxiety level of pregnant women in the third trimester in the UPTD working area of the Cirinten Health Center, Lebak Regency. Research method This research was carried out using a quantitative approach with an experimental design, namely *a quasi experimental design* . The research design used was *one group pre and post test without control group design* , The sample for this research was 23 people. Research result Research result through shows that the average value of anxiety for pregnant women in the third trimester before being given Murotal Surah Ar-Rahman therapy is 47.435, the minimum value is 33.0, the maximum value is 64.0 and the standard deviation is 9.370 , while the average value of anxiety for pregnant women in the third trimester after being given therapy Murotal Surah Ar-Rahman is 44,000 minimum value 30.0, maximum value 59.0 and standard deviation 8.586. Through the *Wilcoxon test* , the effect of providing surah Ar-Rahman murotal therapy on the anxiety level of pregnant women in the third trimester at the UPTD of the Cirinten Health Center, Lebak Regency in 2023 (*P value* = 0.000). Conclusions and recommendations . It is hoped that the results of this research can motivate health workers to use or combine pharmacological and non-pharmacological therapies and can be used as a form of intervention in providing comprehensive midwifery services.

Keywords: Anxiety, Murotal, Pregnant Women

Introduction

Pregnancy is a time of transition, namely a period between life before having a child who is currently in the womb and life after the child is born. This change in status is considered a crisis accompanied by a certain period to undergo a psychological preparation process which normally occurs during pregnancy and peaks when the baby is born (Sukarni, 2013).

Physiological and psychological changes will occur when a pregnant woman enters the labor stage, especially in the third trimester. Changes that occur in pregnant women require adaptation, which is called maternal adaptation. Maternal adaptation is divided into two, namely physiological adaptation and psychological adaptation. Physiological changes in the third trimester of pregnant women will experience physical discomfort and increasingly active fetal movements, disrupting the mother's rest.

Changes from a psychological perspective, pregnant women will feel afraid, worried, anxious and unable to control themselves when facing childbirth (Indriyani, 2013)

For mothers who have never been pregnant and given birth (primigravida), childbirth is something foreign to them. Moreover, if they have heard about trauma or failure in dealing with childbirth, it can also cause anxiety (Kurniawati and Alfaina 2014: 101)

According to WHO (2020), around 10% of pregnant women experience depression and this condition is higher in developing countries, reaching 15.6% during pregnancy and 19.8% after giving birth. According to the results of a survey at PMB Erni Dayati, S.Tr. South Lampung District, out of 10 pregnant women in the third trimester who had ANC, 3 primigravida pregnant women experienced anxiety when facing childbirth. Pregnant women who experience anxiety say it's because it's the first time they're pregnant and there are lots of statements saying that labor is very painful and the process takes a very long time.

Anxiety is a mood *or* experience characterized by worry, unpleasant feelings and physical tension. Anxiety and worry in pregnant women, if not treated seriously, will have physical and psychological impacts, both on the mother and the fetus. Pregnant women's feelings of anxiety when thinking about the birthing process and the condition of the baby to be born do not only occur in their first pregnancy, but also in subsequent pregnancies. Even though they have experience in dealing with childbirth, anxiety will always be there (Sari, 2017).

Anxiety during pregnancy that is not treated seriously will have physical and psychological impacts on the mother or baby. The impact of this anxiety can disrupt the mother's uterine muscle contractions during childbirth, continue the mother's psychological problems until after delivery, and the baby's psychological condition can also experience disturbances, as well as the interaction between mother and child not being well established. Pregnant women who experience high anxiety will result in LBW (low birth weight), preterm birth and spontaneous abortion (Hasim, 2016).

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Of course, non-pharmacological treatment is also needed, for example yoga therapy, meditation therapy, Thai chi therapy, progressive muscle relaxation and autogenic relaxation (Neuman, 2010 in Murni et al., 2014). Apart from that, there are several things that mothers can do to overcome the anxiety problems they are experiencing. namely: Good breathing control, relaxation, cognitive intervention, family support, exercise, and religious approaches (Agustinus, 2011 in Shodiqoh et al., 2014).

Murottal therapy can speed up healing, this has been proven by the research results of Yusup, et al (2016) that people who read the Koran or listen to it will experience changes in electrical currents in the muscles, changes in blood circulation, changes in heart rate and changes in blood levels in the skin. . The therapeutic effect of reading the Koran as a medicine for physical and spiritual illnesses. Stimulation of the holy verses of the Koran for mothers who undergo curettage can reduce anxiety (Nurliana 2011 in Yusup, 2016).

Surah Ar-Rahman is one of the suras of the Qur'an which has a language style that is unique, unique and different from other surahs. There is one verse that is repeated in its entirety 31 times. This must have a special meaning that God wants to convey to humans. Regarding this repetition, according to Ar-Razi, it is Allah's decree (taufiqiyat) which cannot be reached by reason.

The results of a preliminary study in June 2023 at the Cirinten Community Health Center, Lebak Regency, showed that the number of birth patients in the semester of 2022 was 102 people. Based on

the results of interviews with 5 pregnant women in the third trimester, it was found that 4 out of 5 looked tense, afraid, anxious and worried about the birth process.

Based on the problems above, researchers are interested in researching " The effect of Ar-rahman letter murotal therapy on the anxiety level of third trimester pregnant women in the UPTD working area of the Cirinten Health Center, Lebak Regency".

Research Methods

This research was carried out using a quantitative approach with an experimental design, namely *a quasi experimental design* . The research design used is *a one group pre and post test without control group design* , where before being given *treatment* , a *pretest* will be carried out , with the aim of finding out the condition of the respondents before *treatment* . Then after being given *treatment* , a *posttest* was carried out to determine the condition of the respondents after *treatment* (Sugiono, 2019).

The population is the entire research object or objects studied (Notoadmojo, 2018). The population of this study was all third trimester pregnant women in June 2023 in the UPTD work area of the Cirinten District Health Center. Lebak. The total population in this study was 23 people

The sampling technique used is *total sampling* / saturated sampling. Saturated sampling is a sample determination technique when all members of the population are used as samples (Sugiyono, 2019). The sample for this study was all third trimester pregnant women in the UPTD work area of the Cirinten Health Center in June 2023, totaling 23 people.

Anxiety was measured using a *checklist sheet* containing questions regarding the psychological condition of pregnant women using the *Zung-Self Anxiety Rate Scale (ZSAS)* which was assessed before and after being given Surah Ar-Rahman murotal therapy. The data used is primary data, to measure the level of anxiety of pregnant women using a *checklist sheet* which is carried out before and after playing *murottal audio* for up to 7 days accompanied by researchers .

Data processing was carried out with the help of a computerized system through the stages of Editing, Coding, Entry and cleaning. Data analysis used univariate and bivariate analysis with the *Wilcoxon test*.

Research Result

1. Characteristics of Pregnant Women in the Third Trimester

Table 5. 1. Frequency Distribution of Characteristics of Pregnant Women in the Third Trimester at the UPTD of Cirinten Health Center, Lebak Regency

Characteristics of Pregnant Women	Amount	Percentage
Age		
< 20 years	2	8.7
20-35 years	17	73.9
> 35 years	4	17.4
Education		
Elementary School	3	13.0
Junior High School	7	30.4
Senior High School	9	39.1
PT	4	17.4
Parity		

Primipara	7	30.4
Multiparous	16	69.6
Amount	23	100.0

Based on table 5.1, it can be seen that the characteristics of most pregnant women are 20-35 years old, namely 17 people (73.9%), 9 people have a high school education (39.1%), and 16 people are multipara (69.6%).

- Anxiety of Pregnant Women in the Third Trimester Before Surah Ar-Rahman Murotal Therapy at UPTD Puskesmas Cirinten Kab. Lebak

Table 5. 2. Frequency Distribution of Maternal Anxiety in the First Stage of Active Phase Before Surah Ar-Rahman Murotal Therapy at BPM Rika Rohaeni, S.ST, Muncang District, Kab. Lebak 2023

	Variable	N	Min	Max	Mean	elementary school
<i>Pre-Test</i>	Anxiety of Pregnant Women in Third Trimester	23	33.0	64.0	47,435	9,370

Based on table 5.2 above , the average anxiety value for pregnant women in the third trimester before being given Murotal Surah Ar-Rahman therapy was 47.435, minimum value 33.0, maximum value 64.0 and standard deviation 9.370

- Anxiety of Pregnant Women in the Third Trimester After Surah Ar-Rahman Murotal Therapy at UPTD Puskesmas Cibadak Kab. Lebak

**Table 5.3
Frequency Distribution of Anxiety for Pregnant Women in the Third Trimester After Surah Ar-Rahman Murotal Therapy at UPTD Puskesmas Cirinten Kab. swamp**

	Variable	N	Min	Max	Mean	elementary school
<i>Post-Test</i>	Anxiety of Pregnant Women in Third Trimester	23	30.0	59.0	44,000	8,586

Based on table 5.3 above , the average anxiety value for third trimester pregnant women after being given Murotal Surah Ar-Rahman therapy is 44,000, minimum value 30.0, maximum value 59.0 and standard deviation 8,586

4. The Effect of Murotal Surah Ar-Rahman Therapy on the Anxiety Level of Pregnant Women in the Third Trimester at the UPTD of the Cirinten District Health Center. Lebak

Table 5.4. The Effect of Murotal Surah Ar-Rahman Therapy on the Anxiety Level of Pregnant Women in the Third Trimester at the UPTD of the Cirinten District Health Center. Lebak

Anxiety of Pregnant Women	Mean	elementary school	<i>P value</i>
Before Murotal Therapy	47,435	9,370	0,000
After Murotal Therapy	44,000	8,586	

The results of the Wilcoxon statistical test in table 5.4 above show that the *p value* is 0.000, which is smaller than the alpha value of 0.05, so it can be concluded that there is an influence of surah Ar-Rahman murotal therapy on the anxiety level of pregnant women in the third trimester at the UPTD of the Cirinten Health Center, Lebak Regency.

Discussion

Description of Anxiety of Pregnant Women Before and After Murotal Therapy

Based on the research results above, it was found that the average anxiety value for pregnant women in the third trimester before being given Murotal Surah Ar-Rahman therapy was 47.435, with a minimum value of 33.0, a maximum value of 64.0 and a standard deviation of 9.370 . Meanwhile, after being given murotal therapy, it was found that the average anxiety value for pregnant women in the third trimester was 44,000, with a minimum value of 30.0, a maximum value of 59.0 and a standard deviation of 8.586 .

This research is in line with research by Hariyanti (2021), which states that there is a significant difference in anxiety levels, where there is a decrease in anxiety levels after murottal therapy, with an average value before the intervention of 33.17 and after the intervention of 16.49. This is because pregnant women who listen to murottal experience calm and comfort while listening to murottal which results in continued calm after listening to murottal.

Anxiety in pregnant women is caused by several things, such as the lack of complete information regarding childbirth, the experience of first childbirth, the issue of failed childbirth in the community, as well as the fear of sudden labor while the distance from home to health facilities is very far, as well as the fear of not having money during the pregnancy. birthing process. A number of fears that arise in the third trimester of pregnancy are feelings of excessive worry about the survival of the baby, such as babies being born abnormally, severe pain that may be felt, loss of control during labor, inability to give birth normally, injury to the vagina during labor and so on. (Anik, 2017).

The psychological stressor of anxiety is normal when a mother is about to face the birthing process, but the extent to which this anxiety will affect depends on the mother's own personality in dealing with the anxiety that arises. Anxiety or anxiety is a feeling of worry, fear for which there is no clear reason. The anxiety experienced by mothers in labor varies and depends on the extent to which the mother prepares for pregnancy and her birth. Thus, the anxiety experienced by pregnant women in the third trimester, if not addressed immediately, can have physical and psychological effects on both the mother and fetus.

From the results of observations, data was obtained that pregnant women who had undergone murottal therapy of Al-Qur'an Surah Ar-Rahman by researchers once has shown improvements in terms of anxiety where respondents feel more relaxed, calm, and enjoy the therapy provided. Providing Al-Quran surah Ar-Rahman murrotal therapy has been proven to have an effect on reducing anxiety scores

due to the effects from the Al-Quran murrotal therapy Surah Ar-Rahman has calm and relaxation so that anyone who listens to it can give a positive response and the pain felt can be slightly reduced)

The Effect of Surah Ar-Rahman Therapy on the Anxiety Levels of Pregnant Women in the Third Trimester

The results of the statistical test used in this research, namely the *Wilcoxon test* , showed that *the p value = 0.000* , which is smaller than the alpha value (0.05), so it can be concluded that there is a significant effect of providing Surah Ar-Rahman murotal therapy on the anxiety level of pregnant women . III trimester at the UPTD of the Cirinten Health Center, Lebak Regency .

Surah Ar-Rahman consists of 78 verses, all of the verses have the character of short verses so they are comfortable to listen to and can have a relaxing effect on even lay listeners. The form of language style is that there are 31 verses that are repeated. The repetition of this verse is to emphasize a very strong belief (Wirakhmi, H 2016).

The results of this research are also strengthened by Hariyanti's (2021) research on the effect of Al-Quran Surah Ar Rahman murotal therapy on reducing anxiety levels in third trimester pregnant women in the Molawe Community Health Center working area (*p value 0.000*) . Theoretically, after listening to the reading of the Koran, *the tympanic membrane* will vibrate and the vibrations are converted through the Nervus VIII nerve into an electrical current which is then continued in the temporal lobe of the brain. After processing in *Wernicke's area* , the signals are sent to the prefrontal association area (meaning of events) and produce a calm interpretation that causes relaxation in humans (Zoyat , 2016).

This research is also in line with what Azzahroh *et al* (2020) explained that the level of anxiety in third trimester pregnant women can be reduced effectively through implementing the *Murotal Al-Quran* Surah Arrahman intervention. This was also confirmed by previous research which stated that *Murotal Surah Arrahman therapy* could reduce anxiety levels in third trimester pregnant women (Komaruddin, 2019).

According to research conducted by Dr. Ahmad Al Qadhi, the main director of *the Islamic Medicine Institute for Education and Research* , in Florida, United States, is about the benefits and influence of listening to the holy verses of the Koran on humans from a physiological and psychological perspective. The results of this research show that there are changes in organs, tissues and cells at a large level, the scope of the changes that occur is a decrease in the level of depression, sadness, and being able to obtain calm and cure diseases. Apart from that, the success rate in the research results reached 97%, that with Listening to the holy verses of the Koran has the effect of bringing happiness, calm, reducing tension in the reflective nerves and curing disease (Aqil and Charis, 2016).

The researcher's assumption is that pregnant women who are given murottal therapy can feel inner calm which has an impact on reducing the patient's anxiety level due to pregnancy giving birth . The anxiety experienced by pregnant women when facing childbirth is that they are afraid that the birth will not be successful and whether after giving birth they will be able to return to normal or not see their baby.

Conclusions

The average anxiety value for pregnant women in the third trimester before being given Murotal Surah Ar-Rahman therapy was 47.435, minimum value 33.0, maximum value 64.0 and standard deviation 9.370.

The average anxiety value for pregnant women in the third trimester after being given Murotal Surah Ar-Rahman therapy was 44,000, minimum value 30.0, maximum value 59.0 and standard deviation 8.586.

There is an effect of providing surah Ar-Rahman murottal therapy on the anxiety level of pregnant women in the third trimester at the UPTD of the Cirinten Health Center, Lebak Regency in 2023 (P value = 0.000) .

Suggestion

It is hoped that it can motivate health workers to use or combine pharmacological and non-pharmacological therapy and can be used as a form of intervention in providing comprehensive midwifery services , namely by providing health promotion, counseling, education regarding the importance of murottal therapy for pregnant women so that they will feel comfortable and not feeling excessive anxiety

References

- [1] Anik, PR (2017). *Maternity Nursing Textbook* . Salemba Medika.
- [2] Azzahroh, P., Hanifah, A., & Nurmawati, N. (2020). *The Effect of Murottal Al-Qur'an Therapy on Anxiety Levels in Pre-Operation Sectio Caesarea Patients at Ridhoka Salma Hospital, Cikarang, 2019* . Journal for Quality in Women's Health.
- [3] Dorland. (2017) *Dorland's Pocket Dictionary of Medicine* . Edition 29, Jakarta: EGC
- [4] Fatimah and Nuryaningsih. (2017). *Pregnancy Midwifery Care* . Jakarta: Faculty of Medicine and Health, Muhamadiyah University Jakarta.
- [5] Hasim, RP 2016. *An Overview of Pregnant Women's Anxiety* . Thesis
- [6] Haryanti (2021). *The Effect of Murottal Al-Quran Surah Arrahman Therapy on Reducing Anxiety Levels in Third Trimester Pregnant Women in the Molawe Community Health Center Working Area*. Health Work Scientific Journal. Health Work STIKes
- [7] Kurniawati and Alfaina (2014). *Comparison of Anxiety Levels for Primigravidas and Multigravidas in Facing Childbirth in the Wirobrajan Health Center Working Area*. Research Articles. Mutiara Medika
- [8] Kamaruddin, M. (2019). *The Effect of Murottal Al-Qur'an Therapy on Mothers' Anxiety Levels Facing Childbirth at Siti Khadijah III Hospital, Makassar* . Medika Alkhairaat: Journal of Medical and Health Research.
- [9] Maulidia , Z. , & Muladiatin, I. (2018) . *Murottal Al-Quran Therapy for Reducing Anxiety Levels in Post-Caesarean Section Surgery Patients*. Health Journal
- [10] Manuaba Ida BG (2010). *Introduction to Obstetrics Lectures* . Jakarta : EGC.
- [11] Nurliana (2011). *The Effectiveness of Auditory Stimulation from the Holy Quran on the Anxiety of Mothers Who Are Undergoing Curettage at RSUD Dr. Pirngadi Medan*. Univ. North Sumatra
- [12] Nursalam. (2017). *Nursing Science Research Methodology* . Jakarta: Salemba Medika.
- [13] Notoatmodjo, S. (2018). *Health Research Methodology* . Jakarta : Rineka Cipta
- [14] Nugrawati, Dan Amriani. (2020). *Textbook of Midwifery Care in Pregnancy* . West Java : CV. Adanu Abimata
- [15] Prawirohardjo, S (2014). *Midwifery Science* . Jakarta: PT. Bina Pustaka Sarwono Prawirohardjo
- [16] Risnawati. (2017). *Effectiveness of Murottal Al-Qur'an Therapy and Music Therapy on the anxiety level of eighth semester nursing students at UIN Alauddin Makassar*. Alauddin State Islamic University Makassar
- [17] Rachman, W., & Ernawati, R. (2018). *The Effect of Listening to Murottal Al-Quran on Stress in Preparing a Thesis in Nursing Undergraduate Students Semester VII at Muhammadiyah University, East Kalimantan, 2018*
- [18] Sukarni, I, & P, Wahyu. (2013). *Maternity Nursing Textbook* . Yogyakarta: Nuha Medika

- [19] Shodiqoh Eka R (2014). *Differences in Anxiety Levels in Facing Childbirth Between Primigravidas and Multigravidas*. Research Articles. FKM Airlangga University Surabaya
- [20] Sari, F., & Novriani, W. (2017). *Family Support with Anxiety Before Third Trimester Childbirth* . Health Journal
- [21] Sugiyono, PD (2019). *Quantitative, qualitative and R & D research methods*, Alfabeta, cv
- [22] Videbeck, S. (2018). *Mental nursing textbook*. Jakarta: EGC.
- [23] Walyani Elisabeth (2015). *Midwifery Care in Pregnancy* . Yogyakarta: Pustaka Baru Press
- [24] Wirakhmi, Hikmanti (2016). *The Effect of Arrahman Murotal Therapy on Post-operative Patients at Dr. Goeteng Tarunadibrata Purbaligga*. Prakernas aipkema
- [25] WHO. *World Health Statistics 2020*
- [26] Zoyat. (2016). *Al-Quran murotal therapy to suppress anxiety, stress & depression* i. Medika