

Decrease of Anxiety and Pain Delivery of Mother Inpartu Primipara on First Phase Active by Giving of Murottal Al Quran Arrahman

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Decrease of Anxiety and Pain Delivery of Mother Inpartu Primipara on First Phase Active by Giving of Murottal Al Quran Arrahman in Midwifery Private Clinic Endang Sumaningdyah City of Kediri

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ABSTRACT

Anxiety is a major factor affecting the course of labor and cervical dilatation, especially in the first maternal mother or primigravida. Murottal Theses Al-Qur'an Surah Ar-Rahman is one of the non-pharmalogical management of decreasing anxiety and labor pain. This study was aimed to determine the decrease in anxiety and labor pain of deliv of mother inpartu primipara when active phase by giving murottal Al-Qur'an sura Ar-Rahman. This study used pre-experimental with one group pre-test post-test design with 12 accidental sampling samples. The study was conducted on 26 January - 28 February 2018 using questionnaire. Data analysis used paired sample t-test with $\alpha = 0,05$. The result of statistical test showed decrease of mean value on anxiety 5,50 and pain 1,33 with anxiety significance value 0.000 and pain 0,002 which could be concluded H0 rejected means there was decrease of anxiety and labor of delivery of mother inpartu primipara when one phase active by giving murottal Al-Qur'an sura of Ar-Rahman. Murottal Al-Qur'an is one good distraction as a diversion, because it can trigger the release of endorphins naturally and balance the brain waves so that the listener can get a positive response of comfort that helps in the face of anxiety and pain of delivery of mother inpartu primipara when one phase active.

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I. INTRODUCTION

For couples, the presence of children is a gift, especially for newly married couples. Preparation and planning done married couples tend to be done in the presence of the first child. Preparation is done because the previous wife has not had experience of pregnancy and childbirth. Women who first became pregnant were called primigravida mothers (Ratnawati, 2014).

Labor is a natural process that occurs in every conception, the normal length of pregnancy is 280 days or 9 months 7 days calculated from the first day of the last menstrual period. Medically pregnancy starts from the process of fertilization of female eggs by spermatozoa from the male (Ratnawati, 2014). Often pregnancy primigravida mothers tend to experience feelings of fear, worry, or anxiety. These feelings can increase the pain, the muscles become tense, and the mother becomes tired quickly in the end hamper the labor (Yanti, 2010). The feeling of natural felt primigravida mother is anxiety. One of the factors that trigger mother's anxiety is often hear stories from people around him about the process of childbirth so that mothers become very anxious to face the process of childbirth that triggered fear of pain and the risk of danger gave birth to her baby (Revelation, 2011).

Studies of depression and anxiety by the World Health Organization suggest that there are about 82% of the total pregnant women in the world experience anxiety during pregnancy (WHO, 2013). In Indonesia, there are 373,000 pregnant women, who experience anxiety in the presence of childbirth there are as many as 107,000 (28.7%) people. The entire population in Java is 67,976 pregnant women, whereas those experiencing anxiety in facing child birth 35,587 (52,3%) people (Health Ministry, 2014).

Based on preliminary study conducted at (Midwifery Private Clinic) MPC Endang Sumaningdyah Kediri on August 27, 2017 - September 9, 2017, data obtained primigravida maternity mother from June to August was as many as 38 people and from the results of interviews in 5 primigravida maternal women showed as many as 3 mothers said feeling anxious about childbirth because it was the first experience and anxiety increases by hearing stories about childbirth from the people around him and imagining the pain of labor. While the other 2 mothers said not so anxious to face labor on the grounds though it was the first experience. Labor is always marked by pain that supports the progress of labor. Labor pain is a stimulation response of the nerves due to uterine contractions and tissue damage during labor and vaginal birth. The perception and intensity of pain during labor affects the psychological condition of the mother (Kumalasari, 2012). The process of labor tends to trigger anxiety, especially in first-time mothers, psychological responses such as anxiety about irrational things to make mothers do not relax and trigger stress that causes excessive release of hormones such as catecholamine and steroids resulting in tension of smooth muscle and vasoconstriction of blood vessels to decreased uterine contractions, decreased blood flow and oxygen to the uterus and the onset of uterine ischemia which makes the pain impulse multiply, so that the labor process will grow longer (Sumarah et al, 2010).

Anxiety becomes one of the main factors affecting the course of labor. Given this it is necessary to help to change the psychological condition of pregnant women that affect the process of delivery. Some non-pharmacological techniques can improve patient comfort when facing childbirth and have a significant effect on the experience of childbirth (Robson, 2013). One of the distraction techniques used to overcome anxiety is music therapy such as murottal (listening to recited verses of the Holy Qur'an) (Widayarti, 2010).

Listening to murottal Al-Qur'an is one form of utilization of Qur'an in the healing process. Murottal is defined as a recording of the Qur'anic voice that was cast by a Qori '(reader of the Qur'an). Reciting Qur'anic verses that are in doubt can create calm and have an effect on the healing process (Kartika, 2015). Murottal is one of the music that has a positive effect on the listener and works on the brain, which when stimulated by external stimuli, then the brain will produce a chemical called neuropeptide. This molecule will enter into the receptor in the body and provide feedback in the form of pleasure or comfort (Hofiah, 2015).

The delta wave is a wave indicating that the condition of the respondent is in very relaxed condition. One of the suras in the Qur'an that has a therapeutic effect is the Surah Ar-Rahman which consists of 78 verses has meaning about the mercy and the compassion of God to His servant and there is a verse that is repeated to 31 times that is "Then the blessings of God what is the one you deny?" which means to teach the gratitude we have to do every time to God (Qadhi, 2009). Surah Ar-Rahman with the regularity of rhythm, slow tempo, gentle full of appreciation and correct reading can create tranquility, minimize anxiety and can lead to a relaxation response (Hofiah, 2015). Based on the above description, the researchers are interested to conduct research with the title "Anxiety and Pain Relief Birth Mother Inpartu Primipara Kala One Active Phase By Murottal Al - Qur'an Surah Ar - Rahman In PMB Endang Sumaningdyah Kediri".

II. MATERIALS AND METHODS

The research design used in this research was Pre-Experimental with One Group Pre-test Post-Test Design approach which was to reveal causal relationship by involving a subject group. Subject group in observation before intervention, then observation again after intervention (Suhita, 2017). The study was conducted on 26 January - 28 February 2018. The population in this study was all mothers normal inpartu primipara when one active phase in PMB Endang Sumaningdyah Kediri City as many as 38 people. The sample used was partial mother inpartu primipara normal when one phase active in PMB Endang Sumaningdyah Kediri City as many as 12

2 people. The sampling technique used was Accidental Sampling where the sample determination by chance was anyone who happens to meet the researcher and could be used as the research sample (Suhita, 2017).

Independent variable in this research was giving murottal Al-Qur'an Surah Ar-Rahman while the dependent variable was decrease of anxiety and pain. The research instrument used to measure anxiety level in this research was Depression, Anxiety and Stress Scale (DASS 42) which had been modified and tested its validity and reliability. In the questionnaire there were 12 questions that had a scale of 1-36. Meanwhile, to measure the level of pain using Numeric Rating Scale (NRS) with a scale of 1-10.

In this research the data was collected and analyzed quantitatively by using Paired Sample T-test test was the significance of difference in interval scale data. The definition of significance using the significance level $\alpha = 0.05$ where it says there is a relationship if $\rho \leq \alpha (0.05)$ using SPSS (Statistical Product and Service Solutions) program.

7 This research has passed the ethical test by Medical Research Ethics Commission (KEPK) College of Health Sciences Surya Mitra Husada Kediri with certificate number 192 / KEPK / XII / 2017.

III. RESEARCH RESULT

Table 1 Respondent Characteristics

Variables	N	%
Ages		
< 20 ages	2	16,7%
20 – 30 ages	10	83,3%
Last education		
Elementary School	1	8,3%
Secondary School	3	25%
Senior High School	6	50%
Unuversity	2	16,7%
Work		
Private	3	25%
entrepreneur	2	16,7%
Civil servants	1	8,3%
House wife/ Jobless	6	50%
Decrease Activity		
Never	5	41,7%
< 1 week	0	0%
< 2 week	2	16,7%
< 3 weeks	3	25%
< 4 weeks	2	16,7%
Pregnancy test		
once	0	0%
twice	0	0%
3 times	7	58,3%
4 times	5	41,7%
Counseling husband during delivery		
Yes	9	75%
No	3	25%
Total	12	100%

2 Based on table 1 it is found that of the total number of respondents which is 12 respondents, the majority of respondents are 20-30 years old (83,3%), have high school education (50%), house wife / jobless (50%) job, activity (41,7%), pregnancy examination 3 times (58,3%), and with husband's assistance (75%).

Table 2 Characteristics of Variables

Variables	Mean	
	Pre	Post
Anxiety	16,75	11,25
Pain	7,33	6,00

Based on table 2 found the difference in average value on anxiety variables as many as 5.50 and pain as many as 1.33.

Table 3 Statistical Test Results

Variables	t arithmetic	t table	Sig.
Anxiety	6.226	1.782	0.000
Pain	4.000	1.782	0.002

Based on table 3 data obtained from the analysis using statistical tested sample t-test with the value of anxiety variable significance is 0,000 with $\alpha = 0.05$ which means <0.05 then **H0 rejected and H1 accepted** and it can be concluded that there is decreased anxiety birth mother inpartu primipara when one phase active with giving murottal Al-Qur'an sura Ar-Rahman. While the value of the significance of the pain variable is 0.002 with $\alpha = 0.05$ which means <0.05 then **H0 is rejected and H2 is accepted** and it can be concluded that there is a decrease in delivery of mother inpartu primipara when one phase active by giving murottal Al-Qur'an surah Ar-Rahman.

IV. DISCUSSION

Anxiety of mother inpartu primipara when one phase active before given murottal Al-Qur'an surah Ar-Rahman

The results of this study were found in anxiety of mother inpartu primipara when one phase active before being given treatment that is there is mean value of 16,75 with max value 28,00 and minimum 8,00. Anxiety is an anxiety that depict something bad will happen and feel uncomfortable because they feel there is a threat. Anxiety anxiety often occurs in a pregnant woman and will reach its peak during labor (Robson, 2013).

Cross-tabulation results between age and anxiety was found in almost all respondents aged 20-35 years (83.3%). According to Pasaribu (2014) that a person's age can affect anxiety during labor that can have an impact on fear and anxiety under <20 years of age because the physical condition is not fully prepared and over 35 years are at increased risk of obstetric complications and perinatal morbidity and mortality.

The result of cross-tabulation between work and anxiety was found that half of the respondents did not work or housewives (50%). According Hawari (2011) that work is generally a time-consuming activity so that pregnant women who work experience anxiety is lighter than mothers who do not work because of work can divert feelings of mother's anxiety.

The result of cross-tabulation between pregnancy examination and anxiety was found that most of the respondents did the pregnancy checking 3 times (58,3%). According to Bobak (2010) that prenatal visits are planned to follow the growth and development of the fetus and to identify abnormalities that may interfere with normal labor. Antenatal preparation should dispel fear or anxiety and indifference, and in most cases, such things happen.

The result of cross tabulation between husband's assistance with anxiety was found that most of the respondents got husband assistance during childbirth (75%) .According to Asrinah (2010) that the supportive husband's presence is the most important part for the wife during the delivery process,

involving themselves will bring positive impact for himself, his wife and his son's development. A husband's support can be both physical and emotional. The support includes rubbing the mother's back, holding her hand, maintaining eye contact, the mother is accompanied by a friendly person and not letting the mother go through labor alone.

Based on the above descriptions, researchers argue that various anxiety factors make some therapy performed as another boost can help reduce maternal labor anxiety in the face of labor that is his first experience. Unresolved anxiety can affect labor due to unstable mother's stress and emotions, which can lead to increased catecholamine hormones which, if excessive, may trigger maternal psychological discomfort. Therefore it is necessary to encourage other than the family and husband to help modify or manage the anxiety coping perceived mother to the process of childbirth can run well, one of them by using murottal distraction Al - Qur'an.

Anxiety of mother inpartu primipara when one phase active after given murottal Al-Qur'an Surah Ar-Rahman

The Result of data collecting got anxiety of mother inpartu primipara when one active phase after given treatment that there is mean value of post 11,25 with difference of pre and post mean value as much as 5,50. Cross tabulation result between age with anxiety got difference of highest mean value at age of 20-35 years of 5.7. This is in line with research conducted by Handayani (2015) showed the age of primigravida mother less than 20 years have anxiety higher than primigravida mother with age between 20-34 years. Maternal age determines the physiological and psychological status of the mother during labor. Ideally, mothers aged 20-35 years have matured physically and easily deal with stressors because they are able to use natural potential (effective coping) to overcome anxiety.

The result of cross-tabulation between work and anxiety was found the highest mean value difference in self employed job 9.0. This is in line with research conducted Windi (2008) showed that there is no significant relationship between the work with the level of anxiety in the face of childbirth. The result of cross-tabulation between pregnancy examination with anxiety was found the highest mean value difference at pregnancy examination 4 times as much as 7.0. This is not in line with research conducted by Uman et al. (2016) showed that there was no difference in maternal anxiety levels in antenatal care compliance (ANC).

The result of cross tabulation between husband's accompaniment with anxiety got the highest mean value difference on the respondent who got the mentoring husband that is 5.7. This is in line with research conducted by Primasnia et al. (2013) that the husband as the person who most often accompanies the mother during labor, has a dominant influence on the success of safe delivery, reduce complications in the baby to be born, and will facilitate labor. The presence of a husband who accompanied the mother during childbirth has a positive impact for mothers, especially in reducing anxiety that supports the smooth process of labor.

Primiparas or primgravids are women who give birth to term infants once a month. For primiparous moms who will face the birth process tends to experience anxiety because it is the first experience. Anxiety becomes one of the factors that affect the course of labor, excessive anxiety can make the process of labor becomes difficult because the cervical opening becomes less smooth. Menurut Mottaghi et al. (2011) that now has developed many nursing therapies to deal with anxiety, one of which is murottal therapy Al-Qur'an which can reduce the level of anxiety. Murottal Al-Qur'an is a recording of the Qur'an that dilagukan by a Qor'i (The reader of the Qur'an) or can be recorded as well as in listen with a slow and harmonious tempo. Salah one in the Qur'an that has a therapeutic effect is surah Ar-Rahman. Lantunan Surah Ar-Rahman can lower stress hormones and activate natural hormone endorphins that divert attention away from anxiety and increase feelings of relaxation or affect the maternal psychological processes in maternity conditions.

Decreased anxiety of mother birth inpartu primipara when one phase active with giving murottal Al-Qur'an surah Ar-Rahman

According Faradisi (2012) with murottal therapy then the quality of one's awareness of God will increase, whether the person knows the meaning of the Qur'an or not. Awareness causes the

4 tality of resignation to Allah SWT, in this state the brain is on the alpha wave which is a brain wave at a frequency of 7-14 Hz. This is the state of optimal brain energy and can get rid of stress. In a state of calm the brain can think clearly and do the contemplation to form coping or positive expectations. Sound therapy listening to recitation of the Qur'an has an influence that is in 6 form of changes - changes that indicate the relaxation or decrease in nerve muscle tension. This therapy works on the brain, which stimulates the brain to produce a chemical called neuropeptide, which provides feedback in the form of pleasure or comfort (Al kaheel, 2012). One of the sura with therapeutic effect is Ar-Rahman where in that sura explains the mercy of Allah SWT to His servants by giving infinite favors both in the world and in the hereafter. Ar-Rahman has a short verse character so that this verse is comfortably heard and can have a relaxing effect for even lay listeners. In this letter there is a reference to the doctors of Moslem doctors to deal with health concerns expressed as "State of Equilibrium" and the best source of healthy principles according to Islam (Ernawati, 2013).

During the research the researchers also observed the positive response that emerged from the provision of murottal therapy when the respondents in partu primipara mother looks calm while closing the eyes to enjoy the chant of Ar-Rahman and mention the name of Allah SWT on the sidelines of contraction or his missing and arise in a one-phase phase active that indicates the respondent is in a comfortable condition and listened well and the level of anxiety that was previously very heavy can decrease. Proving that murottal Al-Qur'an can affect the psychological condition of mothers in maternity conditions by triggering hormone endorphins and suppress the hormone catecholamine or stress hormones that are at increased risk so that the mother arrived in a comfortable psychological condition.

8 Pain in the mother in partu primipara when one active phase before given murottal Al-Qur'an surah Ar-Rahman

The result of this study was found in primipara mother in partu when one phase active before being given treatment that is pre mean value 7,33 with maximum value 9,00 and minimum 6,00. Pain is an unpleasant sensory and emotional experience, one of which is labor pain which is a natural process that the mother will give birth (Winkjosastro, 2011).

3 The results of cross-tabulation between age and pain were found to be almost all respondents aged 20-35 years (83.3%). According to Astuti (2008) that the age variables were grouped into two, namely High Risk, ie <20 years and > 35 years, Low Risk at the age of 20-35 years. Where at age <20 years and > 35 years is a high risk age for complications of labor and discomfort due to pain arising. The result of cross-tabulation between work and pain was found in half of the respondents not working or housewives (50%). According to Andarmoyo (2013) that the status of work affects work time so that mothers, who work longer hours have fewer rest time than those who do not work. Heavy work results in fatigue that can affect the perception of pain and decrease the ability of individual coping in pain control.

The result of cross tabulation between husband and the patient's care was found that most of the respondents got husband assistance during delivery (75%). According to Afritayeni (2017) that the presence of husband as the closest person who provides psychologically good mentoring will be able to divert mother's attention to the pain he felt and lowered the level of stressors into a painful stimulus during labor.

Based on the description above, the researcher believes that the various factors of theoretical pain are not always and can be appropriate with the condition of the respondents, because the pain felt by each individual varies especially for primigravida mothers who face labor as the first experience tends to make the mother shocked at the new labor pain times perceived. The shock to the pain relative to the mother's feelings can affect the psychological condition during labor to the delivery process. Poor psychological condition can improve labor pain. For that, some therapies can be done as other help that is expected to help mothers face pain during labor, one of them using murottal distraction Al - Qur'an.

Pain in the mother inpartu primipara when one phase active after given murottal Al-Qur'an Surah Ar-Rahman

Result of data collecting got primipara mother inpartu mother when one phase active after given treatment that there is value mean post 6,00 with difference of pre and post mean value 1,33. Cross-tabulation results between age and pain were found to be the highest mean difference at age <20 years at 2.0. This is not in line with research conducted by Magfuroh (2014) indicating there is a significant relationship between maternal age with labor pain during an active phase.

The result of cross-tabulation between the work and the pain was found to be the highest difference in the average value on the self-employed work of 2.5. This is in line with research conducted by Karlina et al. (2014) showed no significant relationship between work with pain intensity before and after intervention because the characteristics of the respondents based on the work did not have a much different difference before delivery, working mothers get work leave so that fatigue that can increase the pain sensation due to excessive work is not occur before or during labor.

The result of cross tabulation between husband's accompaniment with pain was obtained by difference of highest mean value in that did not get husband support as many as 2.0. This is not in line with the research conducted by Yulianti & Nurhidayati (2013) shows there is a significant relationship between the husband's assistance with the intensity of labor pain when one active phase. According to Bobak (2010) earlier childbirth experiences can affect the mother's response to pain. Most primigravids will respond to pain with fear that can increase the activity of the sympathetic nervous system, thereby increasing the secretion of catecholamines (epinephrine and norepinephrine), which causes increased pain and affect the comfort of the mother physically as well as psychologically.

Unstable psychological situations and conditions play an important role in the emergence of more severe labor pain. Efforts to avoid fear, anxiety and stress during the birth process, one of which is to calm the soul of the maternal mother to be more relaxed in the face of pain during labor takes place through recitation of the Qur'an which is played murottal because the Qur'an reading murottally has a rhythm which is constant, regular and there is no sudden change of rhythm. The Qur'an murottal tempo is also between 60-70 per minute, and low-pitched so it has a relaxing effect and can decrease psychological anxiety that affects physical comfort (Widayarti, 2010).

Based on the above description, the researcher argues that it is very important to help primigravida mother to face pain in her first delivery which can affect mother's psychological condition, physiologically anxious can cause more painful contraction of the uterus and stress until the body stimulates stress hormones expenditure and uterus becomes increasingly tense so that the flow blood and oxygen into the uterine muscles is reduced because the arteries narrow and narrow the consequences of pain become increasingly and inevitable. One aid that can be given to the mother is by giving distraction therapy using murottal Al-Qur'an sura Ar-Rahman. The chant of Ar-Rahman surah which is part of the Qur'an can provide a calm effect and help manage the pain response felt by the mother by providing psychological comfort and continuing in physical comfort.

Decrease in labor pain of mother inpartu primipara when one phase active with giving murottal Al-Qur'an surah Ar-Rahman

According to Mirza (2014) murottal Al-Qur'an serves as a system of repair (service system) both physical and psychic, known as syifa 'which means medicine, healers, and bidders. The provision of Al-Qur'an therapy provides an adjuvant non-pharmacological effect in treating pain. Al Quran reading therapy is in line with the pain theory: a balance between analgesia and side effect which states that analgesic administration will give side effects so that it needs complementary therapy. The recitation of the Quran that is played through a tape recorder will give effect to the sound waves and then the vibration of this voice will be able to give changes of body cells, skin cells and heart. This vibration will enter the body and change the resonant changes, both particles, body fluids. Resonant vibration will stimulate brain waves and activate pain pressure pathways. This pathway will provide blockade of pain neurotransmitters will provide a calming effect and reduce acute pain and relaxation (Hidayah et al., 2013).

Thus, the authors argue that the murottal Al-Qur'an Surah Ar-Rahman is an effective to reduce the pain of primipara inpartu mother when one active phase. This is because murottal Al-Qur'an sura Ar-Rahman can be useful for the healing process such as pain that stimulation can increase the release of endorphins naturally and balance the brain waves so that listening can get a positive response in the form of relaxation or tranquility and psychic comfort that can affect the comfort physical pain as well as assisting the mother in the face of labor pain to affect the decrease in the pain felt.

V. CONCLUSION

1. The mean pre-anxiety value of mother inpartu primipara when one active phase 16,75 and mean post 11,25 with difference of mean of decrease between pre and post mean value that is 5,50.
2. The mean pre-natal pretreatment of the primiparous mother in an active phase of 7.33 and the mean post 6,00 with the difference in average decrease between the pre and post mean of 1.33.
3. There is a decrease in maternal anxiety inpartu primipara when an active phase with the provision of murottal Al-Qur'an sura Ar-Rahman
4. There is a decrease in labor pain inpartu primipara mother when one phase active with giving murottal Al-Qur'an surah Ar-Rahman

VI. SUGGESTION

For further research it may be possible to develop this research by considering increasing the number of research samples by not only using one place to reach the number of samples representing the population and developing this research using other surah in the Qur'an and incorporating other distractions for comparison more effectiveness.

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