

Perbandingan Murottal Al-Qur'an dan Terapi Musik Klasik terhadap Tingkat Kecemasan Wanita Selama Persalinan Awal di Rumah Sakit Muhammadiyah Palembang

A Comparison of Murottal Al-Qur'an and Classical Music Therapy on Women's Anxiety Levels During Early Labor at Muhammadiyah Palembang Hospital

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Abstrak

Gangguan kecemasan klinis selama periode awal persalinan memiliki prevalensi yang cukup tinggi secara global. Studi ini bertujuan untuk mengevaluasi efek menenangkan dari mendengarkan Murottal Al-Qur'an dan musik klasik pada ibu hamil. Penelitian ini menggunakan desain kuasi-eksperimental dengan pendekatan pretest dan posttest dua kelompok pada pasien di Rumah Sakit Muhammadiyah. Sebanyak 36 responden yang memenuhi kriteria inklusi dan eksklusi diwawancara untuk menilai tingkat kecemasan mereka, yang dikategorikan sebagai tidak cemas, ringan, sedang, atau berat. Analisis statistik dilakukan menggunakan perangkat lunak khusus dengan uji Wilcoxon dan uji Mann-Whitney untuk menilai efektivitas terapi Murottal Al-Qur'an dan musik klasik. Hasil penelitian menunjukkan bahwa tingkat kecemasan awal pada kelompok Murottal adalah 3,39 dan pada kelompok musik adalah 2,83. Setelah intervensi, tingkat kecemasan pada kelompok Murottal menurun menjadi 1,83, sedangkan kelompok musik mengalami penurunan yang lebih kecil menjadi 2,28. Hasil ini mengindikasikan bahwa terapi Murottal Al-Qur'an lebih efektif dibandingkan dengan terapi musik klasik dalam menurunkan kecemasan ibu selama tahap awal persalinan.

Kata Kunci:
Fase Persalinan Pertama
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Keywords:
Distracting Therapy
First Phase Labor
Moslem Hospital
Mother Mental Health

Abstract

The prevalence of clinical anxiety disorders during the first periods of delivery was notable, with 15.2% of women experiencing any anxiety disorder antenatally worldwide. This study investigated the soothing effect of listening to Murottal Qur'an and classical music on pregnant women. A quasi-experimental design was applied, specifically a two-group pretest and posttest design, involving patients at Muhammadiyah hospital. The sample consisted of 36 respondents who met the specified inclusion and exclusion criteria and were interviewed to determine their mental health levels, categorized as not anxious, mild, moderate, or serious anxiety. Statistical software was used to analyze the effectiveness of Al-Qur'an murottal therapy and classical music through the Wilcoxon test and Mann-Whitney test. The anxiety levels for the Murottal group were initially 3.39 and decreased to 1.83, while the music group started at 2.83 and remained at 2.28. These findings indicate that Al-Qur'an murottal therapy is more effective than classical music in reducing anxiety levels in mothers during the initial stage of childbirth



INTRODUCTION

Maternal anxiety is a significant global health concern, with varying prevalence and profound implications for both mothers and their children. Anxiety symptoms are highly prevalent during the perinatal period, with 18.2%, 19.1%, and 24.6% of women in the first-second-third trimester, respectively (Dennis, Falah-Hassani, & Shiri, 2017). The prevalence of clinical anxiety disorders during these periods is also notable, with 15.2% of women experiencing any anxiety disorder antenatally and 9.9% postnatally (Dennis et al., 2017). Specific populations, such as those in Wuhan during the COVID-19 pandemic, exhibited a prenatal anxiety prevalence of 20.8%, influenced by factors like media trust and concerns about infection (Ding et al., 2021). Anxiety in pregnant and postpartum women is linked to adverse outcomes, including preterm birth, postpartum depression, and emotional and behavioral issues in children (Zelkowitz & Papageorgiou, 2005). Moreover, maternal anxiety during pregnancy has been associated with poorer physical growth in children, particularly when anxiety occurs in the second and third trimesters, leading to lower BMI and body fat in early childhood (Zhou et al., 2023). The impact of maternal anxiety extends to attachment and behavioral inhibition in children, with high maternal anxiety correlating with ambivalent attachment patterns and increased behavioral inhibition (Stevenson-Hinde, Shouldice, & Chicot, 2011). Panic disorders during pregnancy, a common manifestation of anxiety, have been linked to congenital abnormalities such as cleft lip and multiple congenital defects, particularly in untreated cases (Ács, Bánhid, Horváth-Puhó, & Czeizel, 2006). The perinatal period is often marked by pregnancy-related anxiety, which is uniquely associated with negative maternal and child health outcomes and is frequently assessed using various measures (Fischbein et al., 2019). The global prevalence and impact of maternal anxiety underscore the need for evidence-based interventions to support

maternal mental health and improve outcomes for mothers and their children.

Expectant mothers often experience significant anxiety during childbirth, which can lead to complications such as low birth weight, preterm labor, and hypertension (Rasdiani & Tahun, 2023). Early screening and intervention programs for concerned women are crucial as they might mitigate the adverse effects on both maternal and child health (Zelkowitz & Papageorgiou, 2005). Both murotal treatment and music therapy have undergone extensive investigation to determine their efficacy in reducing anxiety levels in pregnant women. Several studies have demonstrated the promising effects of Murotal treatment, which involves the act of listening to Quran recitations. The administration of Murotal therapy significantly reduced maternal anxiety levels during the process of birthing (Herlina, Ulya, & Yunika, 2024). The use of Quranic murotal therapy significantly decreased anxiety levels in maternity women (Widiyastuti, 2023). Sessions of Murotal therapy, when combined with support from the husband, effectively reduced anxiety levels in pregnant women (Wahyuni & Suharti, 2024). Additionally, the practice of reciting Al-Mulk murotal has demonstrated its effectiveness in reducing anxiety among mothers during childbirth (Nabila & Sulastri, 2023). A study on religious music therapy also discovered a significant reduction in anxiety levels among pregnant women (Tanjung & Apripan, 2024). Additionally, music therapy has demonstrated efficacy in alleviating anxiety during the process of childbirth. A study investigating the effects of Mozart's classical music therapy revealed a significant decrease in anxiety levels among expectant moms (Rasdiani & Tahun, 2023). Further investigation has substantiated the effectiveness of classical music therapy and lavender aromatherapy in alleviating anxiety during birth (Sitiyaroh, 2022). Research has demonstrated that classical music therapy has the ability to redirect the attention of pregnant women and reduce their levels of worry (Damanik &

Tridiyawati, 2023). Both murottal and music therapy offer non-pharmacological alternatives for controlling anxiety in pregnant women.

Music distracting therapy, regardless of whether it is classical or religious, has a soothing effect on pregnant women, diverting their attention and inducing relaxation, so reducing the trauma associated with childbirth (Damanik & Tridiyawati, 2023; Widiyastuti, 2023). Therefore, healthcare providers should contemplate integrating both murottal and music therapies into prenatal care and labor management in order to alleviate anxiety and enhance the overall delivery experience for expectant mothers. Muhammadiyah hospitals do not have sufficient evidence on the effectiveness of their treatments. There is a little amount of study available on Murottal-classical music. The generalizability of the research is limited due to a small sample size, specific contextual circumstances, and the chosen methodological technique. The purpose of the study is to provide the patients at Muhammadiyah hospital with the opportunity to listen to Murottal and classical music as relaxing therapies in terms of specific duration, intensity, and frequency.

METHODS

The study was carried out in December 2023 at Muhammadiyah Palembang Hospital. This research employs a quasi-experimental design, particularly a two-group pretest and posttest design. The sampling technique used is total sampling, with a sample size of 36 respondents who fulfill the specified inclusion and exclusion criteria. The research period refers to the duration of the study. The inclusion criteria for this study were mothers in the initial phase of labor, with cervical dilation ranging from 1 to 6 centimeters, and a full-term gestational age (37-42 weeks) who expressed their willingness to participate in written informed consent. Exclusion criteria include mothers who refuse to give birth during the initial stage, those who have

already completed the initial stage, mothers under the age of 20 or over the age of 40, and those experiencing labor difficulties such as preeclampsia, eclampsia, malpresentation, and malposition. The research employed the Hamilton Anxiety Rating Scale (HARS) questionnaire, with 14 questions. The research data was acquired through conducting face-to-face interviews with the participants, resulted in the level of mental health, such as not anxious-mild-moderate-serious anxiety. The data were analyzed using the statistical software SPSS Version 27. A univariate analysis was conducted to ascertain the distribution of respondent characteristics and anxiety levels both before and after therapy. A bivariate analysis was conducted to examine the effectiveness of Al-Qur'an murottal therapy and music in lowering anxiety levels in mothers during the initial stage of childbirth. This analysis utilized the Wilcoxon test and Mann-Whitney test. The research has been approved by the Bioethics, Humanities, and Islamic Medicine Committee (UBKHI) of the Faculty of Medicine, Universitas Muhammadiyah Palembang. The approval is documented in letter number No.204/EC/KBHKI/FK-UMP/XI/2023.

RESULTS AND DISCUSSIONS

The study sample consisted of 36 respondents who met the specified inclusion and exclusion criteria. Based on the provided data, the largest group of respondents falls within the age range of 26 to 35. Among the respondents, 17 individuals (47.2%) have completed their education at the Senior High level, 23 individuals (63.9%) are employed as housewives, 29 individuals (80.6%) have had several pregnancies, and 10 individuals (27.8%) have had their first pregnancy (table 1).

Based on the table 2, 10 respondents (55.5%) experienced significant anxiety before undergoing murottal therapy, while 4 respondents (22.2%) no longer experienced anxiety after getting the therapy. Meanwhile, 9 respondents (50%) experienced mild anxiety before undergoing music therapy. Additionally,

1 respondent (5.6%), reported no anxiety after getting the therapy. 18 participants experienced reduced anxiety following Al-Qur'an murottal therapy. Out of the 10 respondents that underwent music therapy, 8 of them reported a decrease in anxiety, while the remaining 2 did not experience any change.

Table I. Patient's Characteristics (n=36)

| Characteristics | Frequency | Percentage (%) |
|------------------------|-----------|----------------|
| Age (years old) | | |
| < 25 | 6 | 16.7 |
| 26 – 35 | 17 | 47.2 |
| > 36 | 13 | 36.1 |
| Education | | |
| Elementary School | 5 | 13.9 |
| Junior High School | 4 | 8.3 |
| Senior High School | 23 | 63.9 |
| College | 5 | 13.9 |
| Work | | |
| Housewife | 29 | 80.6 |
| Student | 1 | 2.8 |
| Nurse | 1 | 2.8 |
| Laborer | 3 | 8.3 |
| Employee | 2 | 5.6 |
| Parity | | |
| Primigravida | 10 | 27.8 |
| Multigravida | 26 | 72.2 |

Based on table 3, the normality test yielded p-values of 0.000 (<0.05) both before and after administering Al-Qur'an music or therapy. Due to the non-normal distribution of the data (p= 0.000 (<0.05)), a Wilcoxon test was performed. The Wilcoxon test revealed a statistically significant disparity in maternal anxiety levels during the initial phase of labor between the Al-Qur'an murottal therapy (p <.001) and classical music therapy (p < 0.05). The Mann-Whitney Test revealed a significant difference (p<0.05) between the effects of Al-Qur'an murottal therapy and music at Palembang Muhammadiyah Hospital in lowering maternal anxiety during early labor.

Anxiety during childbirth is a significant concern for maternity mothers, as it can lead to various complications such as low birth weight, preterm labor, and hypertension (Rasdiani & Tahun, 2023). Programs aimed at early detection and intervention for anxious mothers are crucial, as they can mitigate the adverse effects on both maternal and child health (Zelkowitz &

Papageorgiou, 2005). Both murottal therapy and music therapy have been studied extensively for their effectiveness in reducing anxiety levels in maternity mothers. Murottal therapy, which involves listening to recitations of the Quran, has shown promising results in multiple studies. For instance, research conducted by Siskha Maya Herlina et al. demonstrated that murottal therapy significantly reduced anxiety levels in mothers during labor (Zelkowitz & Papageorgiou, 2005). Similarly, Rika Widiyastuti's study found that Quranic murottal therapy effectively decreased anxiety levels in maternity women, with statistically significant results (p<0.05) (Widiyastuti, 2023). Another study by Sri Wahyuni and Nin Suharti highlighted that murottal therapy, combined with husband support, significantly reduced anxiety levels in expectant mothers, although the therapy did not moderate the effect of husband support (Wahyuni & Suharti, 2024). Additionally, Alifian Nabila and Sulastri's research on Al-Mulk murottal therapy confirmed its effectiveness in reducing anxiety in mothers giving birth, with a p-value of 0.000 (Nabila & Sulastri, 2023).

Table II. Anxiety Level Baseline Analysis (murottal =16, classical music=16)

| Variables | Interventi on | Non-pharmacology therapy | |
|------------------|----------------|--------------------------|-----------------|
| | | Murottal | Classical Music |
| Not Anxious | Pre treatment | 0 | 0 |
| | Post treatment | 4 | 1 |
| Mild Anxiety | Pre treatment | 3 | 9 |
| | Post treatment | 13 | 11 |
| Moderate Anxiety | Pre treatment | 5 | 3 |
| | Post treatment | 1 | 6 |
| Serious Anxiety | Pre treatment | 10 | 6 |
| | Post treatment | 0 | 0 |

Table III. Anxiety Level Improvement Analysis
(murottal =16, classical music=16)

| Variables | Interventi on | Non- pharmacology therapy | | p-value |
|--------------------|----------------|---------------------------|-------------|---------|
| | | Murott al | Classical M | |
| Normality Test | Pre treatment | 0.737 | 0.729 | 0.000 |
| | Post treatment | 0.688 | 0.741 | 0.000 |
| Wilcoxon Test | Pre treatment | 18 | 10 | <0.001 |
| | Post treatment | 0 | 8 | <0.002 |
| Mann Whitnney Test | Pre treatment | 272,50 | 393,50 | |
| | Post treatment | 15,14 | 21,86 | 0.022 |

On the other hand, music therapy has also been found to be effective in alleviating anxiety during childbirth. Study on Mozart's classical music therapy reported a significant reduction in anxiety levels among maternity mothers, with a p-value of 0.012 (Rasdiani & Tahun, 2023). Nur Sitiyaroh's research further supported the effectiveness of classical music therapy and lavender aromatherapy in reducing anxiety during childbirth, with a significant p-value of 0.000 (Sitiyaroh, 2022). Wiwi Wardani Tanjung and Rika Apripan's study on religious music therapy also showed a significant decrease in anxiety levels among pregnant women, with a p-value of 0.001 (Tanjung & Apripan, 2024). Imelda Damanik and Feva Tridiyawati's research indicated that classical music therapy could distract pregnant women and reduce their anxiety, with a significant p-value of 0.000 (Damanik & Tridiyawati, 2023). Both murotal and music therapies offer non-pharmacological means to manage anxiety in maternity mothers. Murottal therapy not only reduces anxiety but also helps individuals deepen their spiritual connection and develop feelings of gratitude, which can further alleviate symptoms of depression and dissatisfaction (Widiyastuti, 2023). Music therapy, whether classical or religious, provides a calming effect that can distract and relax pregnant women, making the childbirth process less stressful (Damanik & Tridiyawati, 2023; Widiyastuti, 2023). The

combination of these therapies with other supportive measures, such as husband support, can enhance their effectiveness in managing maternal anxiety (Wahyuni & Suharti, 2024). Therefore, healthcare providers should consider incorporating both murotal and music therapies into prenatal care and labor management to help reduce anxiety and improve the overall childbirth experience for maternity mothers.

To improve the validity and reliability of the results and to make a comparison between murottal and classical music therapy for labor anxiety, authors need to acknowledge and address any limitations and confounding factors. Utilizing random selection to allocate individuals into either murottal or classical music groups aids in mitigating the influence of irrelevant variables and ensures comparability between the groups. Nevertheless, a small sample size can restrict the ability to make generalizations. A larger sample size is required to guarantee statistical significance and the generalizability of the findings to the population (Coşar & Bekar, 2024). Respondents' Individuals with differing initial levels of anxiety may exhibit distinct responses to the therapies (Fatmawati, Ridayanti, & Nurlatifah, 2022). The cultural and religious roots of individuals can influence their opinions towards murottal and classical music (Dewi, Fatmawati, Aisyah, & Linawati, 2022). Murottal may be preferred by devout followers of the Quran, leading to a preference for it over classical music (Indrawati, Yufdel, & Elfira, 2022). Prior favorable encounters with murottal or classical music can alleviate anxiety (Mohmed, Mohamed, Ahmed, & Ali, 2022). Individual preferences for a specific music genre have the potential to skew or alter the outcomes or findings (Argaheni et al., 2021; Konsam et al., 2023). Counseling or family support can potentially alter anxiety levels (Rasidah & Rohmah, 2024).

CONCLUSION

The use of Al-Qur'an murottal therapy or music has been found to effectively relieve expectant anxiety during the first stage of labor at Muhammadiyah Palembang Hospital. Prior to therapy, the anxiety levels for murottal were 3.39, whereas for music they were 2.83, thus Murottal's anxiety level decreased to 1.83, but music's anxiety level remained at 2.28. Al-Qur'an murottal treatment is more successful than classical music therapy. The hospital intends to utilize the results of this study to alleviate maternal anxiety during the initial phase of childbirth in both the delivery room and the hospital rooms.

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