



The Effect of Murothal Al-Qur'an Therapy on Reducing Anxiety and Quality of Life on Pregnant Women

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Received: June 7th, 2022; Revised: October 24th, 2022; Accepted: Desember 15st, 2022

ABSTRACT

Pregnancy is a critical psychological social transition period that requires family, social and health support. Pregnancy causes psychological changes that will have an impact on the baby. These changes will affects the quality of life of pregnant women. This study was to determine the effect of murothal Al-Qur'an therapy in reducing anxiety in improving the quality of life of pregnant women in Medan Sunggal District. The type of research is pre-experimental using one intervention group. This research was conducted in Medan Sunggal District with sample of 30 respondents with several research criteria. The measuring instrument used the Hamilton Rating Scale for Anxiety (HRS-A) and the WHOQOL-BREF Questionnaire for quality of life which was administered after the intervention. Wilcoxon test was carried out to determine the effect of Murothal Al-Qur'an (Surah Al-Fatihah) therapy in reducing anxiety and in improving the quality of life of pregnant women. The result showed that there was an effect of Murothal Al-Qur'an (Surah Al-Fatihah) therapy on reducing anxiety and quality of life of pregnant women. The significant value obtained was 0.000 ($p < 0.05$), which means that there was a significant difference between after the intervention in reducing anxiety and the quality of life of pregnant women. Murothal Al-Qur'an (Surah Al-Fatihah) is very beneficial for pregnant women in reducing anxiety and improving the quality of life in dealing with pregnancy. Murothal al-qur'an is recommended for anyone, not only for pregnant women, especially those who are Muslim to cope with anxiety.

Keywords: female; pregnancy; quality of life; pregnant women

Introduction

Muslim women who experience pregnancy have spiritual beliefs in dealing with emotions and changes in their behavior. One of the factors that influence the decision of pregnant women is the process before birth [1]. Pregnancy consists of three stages, namely the first, second, and third trimesters of pregnancy. The third trimester can end in the 40th week. A baby is considered full term if the pregnancy reaches 37 to 42 weeks [2].

Anxiety in pregnancy is a reaction that often occurs in pregnant women when facing the process of childbirth and becoming a mother. One of the factors that affect the mother's pregnancy is the husband's support in improving the quality of life [3]. The impact of anxiety on pregnant women and fetuses is low birth

weight and psychological disorders of the mother after giving birth, so that it will affect the quality of life of pregnant women themselves. [4]. A study conducted on 209 pregnant women in Brazil found that 26.8 percent of pregnant women experienced anxiety in the third trimester [5]. Anxiety during pregnancy is very common. Factors that will increase anxiety during pregnancy are mothers with a history of depression, history of history, risk, and stress caused by family or financial problems [6].

Factors that affect the quality of life of pregnant women are individual perceptions related to their role in life. The quality of life of pregnant women is poor if pregnant women have psychological disorders in the form of depression which will put their pregnancy at risk [7]. Pregnancy is a critical period in a woman's life that undergoes physical, psychological

and social changes that become desirable experiences or vice versa. About 3 to 17 percent of women experience anxiety disorders during pregnancy [8]. The incidence of anxiety in pregnant women in Indonesia reaches 373 million people and about 28.7 percent of pregnant women experience anxiety which has a bad impact that stimulates uterine contractions. This results in miscarriage and increased blood pressure, thereby triggering preeclampsia. The birth of low birth weight (LBW) babies and premature babies is one of the effects of anxiety [9].

A research study from A Fatmawati, .et al. (2022) stated that out of 25 respondents with an average age of 15-21 years in the 3rd trimester of pregnancy who were able to read the Quran routinely carried out murottal therapy every day for 30 minutes within 2 weeks from 5 am to 8 pm. This study was conducted on pregnant women who experienced mental disorders and proved effective this was seen from the Median pretest and posttest which were 24.77 and 21.88, respectively [10]. According to Irmawati et al. (2020) stated that listening to the recitation of the Qur'an, especially the Surah Ar-Rahman can reduce the burden of anxiety of pregnant women in the face of the labor process and provide benefits to cortisol in the face of stress stress [11]. When stressed, the body produces cortisol and stress can be dangerous if the mother continues to experience it and can trigger high blood pressure during pregnancy. This is especially risky for pregnant women and is a serious problem in pregnancy [12].

One therapy that can reduce anxiety in pregnant women is spiritual therapy, namely murothal Al-Qur'an therapy (Surah Al-Fatihah). Research studies found that anxiety that occurs in pregnant women depends on the gestational age. Murothal Al-Qur'an therapy is done to reduce anxiety by listening to the Qur'an. This research study was conducted on 10 people in the intervention group and 10 in the control group in third trimester pregnant women [13]. A research study conducted by Dini., et al (2015) found that Tadabbur Al-Qur'an Therapy experienced a decrease in anxiety after pre and post intervention [14]. This study is in line with research conducted by Widuri Khoiriyah (2020) who found that this therapeutic analysis was able to reduce the level of anxiety in mothers who were facing the labor process [15]. A research study from Wiulin S (2020) stated that the effect of giving murothal therapy of the Qur'an surah Maryam on the anxiety level of third trimester pregnant women in 20 third trimester pregnant women with the

Wilcoxon test obtained a p value of < 0.05 (0.000) which means it has a significant influence [16]. The study of Rahmadhani et al. (2021) states that the influence of Qur'anic murothal therapy on anxiety in pregnancy can apply the process of relaxation techniques without consuming pharmacological drugs [17]. The transformation of the tradition of reading the Qur'an to pregnant women into digital form, in terms of You Tube media cannot replace tradition with online media [18].

Some previous research studies have discussed more about the surah used in conducting therapy, but not on the duration and content in interpreting murothal therapy with the Qur'an. This is what makes researchers interested in researching murothal therapy with the Qur'an.

Materials and Methods

This is a pre-experimental in which the observed subject is given a treatment, to test whether the treatment has a change [19]. A pre-experimental design with one group was used in this study. The inclusion criteria in this study were Muslim pregnant women, 3rd trimester pregnant women and able to work well with researchers. This research was conducted in the sub-district of Medan Sunggal by way of house to house and with an approach for approximately 3 months. The Murothal of the Qur'an is heard every day at the time after dawn prayers, magrib prayers, isya prayers. Meanwhile, zhuhur prayers are rarely done because of the mother's busy life in taking care of her needs. Monitoring was carried out by forming a whatsapp group specifically for mothers who participated in this study. The research was conducted in June 2021.

The material used in this study was a Surah Al Fatihah recorder which was played to pregnant women using a headset for 15 minutes. The sample in this study is total sampling. Amounted to 30 pregnant women with the appropriate inclusion criteria.

The Hamilton Rating Scale for Anxiety Questionnaire (HRS-A) and the Quality of Life Questionnaire (WHOQOL-BREF) which have been tested for validity and reliability were applied to measure anxiety level.

The data analysis of this study used the Wilcoxon test. This study has been approved by the ethics commission from Poltekkes Kemenkes Medan.

Results and Discussion

Table 1.
Respondent Characteristics Data

Characteristics	f	%
Age		
22-25 years old	14	46.7
26-39 years old	16	53.3
Education		
junior high school	3	10
senior High School	9	30
Bachelor	18	60
Work		
IRT	21	70
Private sector employee	9	30
Ethnic group		
Java	12	40
Aceh	11	36.7
Batak	7	23.3

Table 2.
Effectiveness of Al-Qur'an Murothal Therapy on reducing anxiety and quality of life of pregnant women in Medan Sunggal sub-district

Z	QOL	Anxiety	Anxiety-QOL in Pregnancy
Asymp. Sig. (2-tailed)	-5.035 ^b	-4.834 ^b	-4.837 ^b
	.000	.000	.000

a. Wilcoxon Signed Ranks Test

b. Based on negative ranks

Table 1 shows that the dominant age is 26-39 years old where some pregnant women have a risk in their pregnancy. Pregnant women aged over 35 years experience changes in the uterine tissue, aging uterine organs, and an inflexible birth canal which may be the cause of birth defects, obstructed labor, bleeding, high blood pressure, and premature rupture of membranes [20]. The most dominant level of education was education at a university by 18 respondents (60 percent). The level of education of pregnant women greatly affects the readiness of the spouse and the health of the child, which is one form of support for MCH (Maternal and Child Health)[21]. Respondents are mostly housewives who only take care of household needs such as cooking, taking children, and meeting other household needs. The most dominant ethnic group is the Javanese with 12 respondents (40 percent) so that more respondents are cooperative, where the Javanese are famous for their hospitality when conducting research surveys.

This study does not show the category of anxiety, because the average respondent has mild anxiety and are able to overcome it by getting support from family. About 70 percent of respondents have mild anxiety, so they are able to control themselves in dealing with psychological problems.

Based on table 2 there is a significant difference between murothal Al-Qur'an therapy in reducing anxiety and quality of life of pregnant women. This can be seen in the Wilcoxon test value of .000 ($p < 0.05$), which means that Murothal Al-Qur'an therapy can be used for pregnant women.

Studies related to murothal Al-Qur'an therapy conducted on pregnant women will reduce anxiety levels. This is applied to pregnant women by listening to the letter Ar-Rahman by regulating breathing. This therapy can reduce stress and anxiety [22]. The mechanism of action of murothal al-Qur'an therapy where fetal hearing development during the 3rd trimester of pregnancy (about 36 weeks) has increased by listening to sounds that will change the mood and the mother [23]. This study suggests that based on the spiritual experience of Muslim women during pregnancy is to approach Allah SWT and do more things that increase success and confidence [24]. This study shows that murothal al-qur'an therapy has a major effect on reducing anxiety scores, cortisol levels and working time after being given an intervention by listening to the Surah Ar-Rahman [25].

Quality of life during pregnancy will be poor if experiencing experiences with life partners, physical changes that cause limitations and emotional control. Assessing the quality of life of pregnant women is very important in order to be able to take preventive actions

that lead to improving the care and health of pregnant women [26]. Factors that affect the quality of life of pregnant women are the age of pregnant women, primiparity, early gestational age, the absence of social and economic problems, having family and friends, doing sports, feeling happy during pregnancy, while the factors that worsen the quality of life of pregnant women are assisted reproduction. medical conditions, complications before or during pregnancy, obesity, nausea and vomiting. epigastralgia, back pain, smoking habit, history of alcohol dependence, trouble sleeping, stress, anxiety, depression. during pregnancy and sexual or domestic violence [27]. This was stated by Cinthia GPC., et.al (2018) that in 206 respondents who had a 100 percent response to work, parity, partner support, marital status, and people living with the mother were predictors that positively affected the quality of life of pregnant women. . On the other hand,

gestational age, living environment, occupation, use of illegal drugs, no support from a partner and maternal age are predictors that negatively affect quality of life [28].

Conclusion and Recommendation

The weakness of this study is the understanding in understanding the meaning of surah therapy that will be listened to and pondered in the heart. Not all pregnant women can interpret it meaningfully. For this reason, it is recommended that this therapy be used as an additional spiritual energy in building the mother's strength in facing the pregnancy process. Murothal Al-Qur'an is recommended for anyone, not only for pregnant women, especially those who are Muslim to cope with anxiety.

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