The Effect of Al-Qur'an Murottal Therapy on Anxiety in Third Trimester Pregnant Women: Study Literature Reviews

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Abstract. Background: Third trimester pregnant women usually experience anxiety because labor is approaching. Anxiety is a vague and pervasive worry related to feelings of uncertainty and helplessness. Anxiety for pregnant women is dangerous because it can cause complications and even death. One of the therapies that is often used to overcome the anxiety of pregnant women is Al-Qur'an murottal therapy. Purpose: To identify the effect of murottal Al-Qur'an therapy on anxiety in pregnant women. Methods: The research method uses a literature review design by taking secondary data from Google Scholar using the Boolean operator (AND, OR) and a search strategy with PICOS found 4 articles that match the inclusion criteria. Results: Based on the 4 reviewed articles, it was found that the average level of anxiety before the intervention was given was at a mild level of anxiety and after the intervention it became not anxious. Characteristics of domicile are age not at risk, secondary education, and primipara. The surahs used are surah Maryam and Ar-Rahman with times of 14 and 17 days. Conclusion: Recitation of Al-Qur'an can reduce anxiety in third trimester pregnant women.

Keywords: Third Trimester, Al-Qur'an Murottal Therapy, Anxiety

1 Introduction

Third-trimester pregnant women typically suffer worry since labour is on the horizon. Anxiety is a widespread and nebulous worry associated with emotions of powerlessness and uncertainty [1]. Anxiety is a psychological disorder in which a person has overwhelming sensations of fear and concern over an uncertain future [2]. Anxiety in pregnancy refers to a pregnant woman's response to changes in herself and her environment that cause feelings of discomfort or discomfort brought on by a suspicion of danger or annoyance that endangers an individual's or biosocial group's life [3].

Pregnant women in several developing countries in the world are at high risk of moderate anxiety, namely 15.6% and postpartum mothers, namely 19.8%, including Ethiopia, Nigeria, Senegal, South Africa, Uganda and Zimbabwe. Meanwhile, the incidence of anxiety in pregnant women in Indonesia reached 373,000. As many as 107,000 or 28.7% of them are experiencing anxiety in pregnant women before the birth process.
In a study conducted on primigravida mothers, 22.5% experienced moderate anxiety [4].

A low level of anxiety in pregnant women can reduce the complications that arise so that it can indirectly reduce maternal and infant mortality, while a high level of anxiety can exacerbate complications in maternal and infant mortality [5]. Research conducted by [6] states that the anxiety level of primigravida pregnant women in facing labor is at the level of panic anxiety and that of multigravida pregnant women is at a moderate level of anxiety. Every third trimester pregnant woman will usually experience anxiety. The cause of this anxiety is fear of facing childbirth, worry about the baby's life and himself. Anxiety in pregnant women can be dangerous because it can cause complications and even death. This can increase the number of maternal and infant mortality in Indonesia.

The impact of anxiety during pregnancy that cannot be overcome can affect the psychological condition of mothers who are prone to experiencing depression and symptoms of anxiety after giving birth. Mothers with severe anxiety have a tendency to give birth to premature babies, low birth weight babies, increase the risk of asthma, disrupt the process of growth and development, risk of behavioral disorders and adverse neurodevelopment. However, anxiety symptoms are not necessarily related to poor birth outcomes, the main influencing factor is biomedical factors. Although anxiety does not necessarily lead to poor birth outcomes, it is important for mothers to be able to overcome anxiety during pregnancy [5].

Al-Qur'an mural therapy is one of the treatments that may be utilized to treat anxiety in pregnant women. A qori' (reader of the Al-Qur'an) sings the Koran over a sound recording used in Al-Qur'an murottal therapy [7]. The human voice, which is both the most accessible and a magnificent healing instrument, is used in the Qur'anic recitation. The earlobe will pick up the sound of the Qur'an being recited, direct it to the ear canal, where it will strike the tympanic membrane and cause it to vibrate. These vibrations will be transmitted to the auditory bones which are linked to one another and flow to the cochlea. In the cochlea there are cells that vibrate due to sound and the vibrations produce electrical vibrations which are passed through N.VII (vestibulo cokhlearis) to the thalamus. Signals from the thalamus are sent to the amygdala and then to the hippocampus. The hippocampus raises motivations where there is a drive in the brain to remember pleasant experiences and thoughts. In addition to the hippocampus, from the amygdala it is also passed on to the hypothalamus, resulting in feedback from the adrenal glands that decrease stress hormones and increase relax hormones [8].

Research conducted by [9] entitled "The Effect of Murottal Al-Qur'an Surah Ar-Rahman Therapy on Reducing Anxiety Levels in Trimester III Pregnant Women in the Work Area of the Molawe Health Center" was conducted for 17 days by listening to the Al-Qur'an murottal an surah Ar-Rahman with the results of the study showing a p value <0.001 then Ho is rejected which means that there is an effect of Murottal Al Qur'an Surah Ar-Rahman therapy on reducing anxiety levels in third trimester pregnant women. Another study regarding murottal therapy for anxiety of pregnant women conducted by [10] which was conducted for 2 weeks with murottal Al-Qur'an surah Maryam using the listening method stated that murottal Al-Qur'an therapy can reduce the
anxiety level of third-trimester pregnant women. III with a p-value of 0.000. The anxiety level of third trimester pregnant women decreased from severe to moderate. The purpose of this literature review is to identify the effect of murottal Al-Qur'an therapy on anxiety in pregnant women.

2 Method

This study provides a thorough assessment of the studies on the impact of murottal Al-Qur'an therapy on anxiety in third-trimester pregnant women. Research focusing on pregnant women in their third trimester, Al-Qur'anic murottal treatment to lessen anxiety for third trimester pregnant women, research using a quasi-experimental methodology, and vulnerable years 2018–2022 were the inclusion criteria for the literature review. This research review's literature search makes use of Google Scholar, a database with high and medium quality standards. The Boolean operator (AND, OR) is used in article and journal searches to extend or narrow the search, making it simpler to choose which article or journal to utilize. A data search using the Google Scholar database based on the keywords "Anxiety for pregnant women AND murottal Al-Qur'an therapy" found 767 articles. Then identification was carried out based on the 2018-2022 range, 629 articles were obtained. To specify the article search, we added all the PICOS keywords (third trimester pregnant women OR gravida OR anxiety for pregnant women AND murottal Al-Qur'an therapy AND decreased anxiety AND quasi-experimental) to get 76 articles. From the full text selection there are 7 articles that cannot be opened, the remaining 69 articles. Then 48 articles were issued because they did not match the title, leaving 21 articles. From the criteria for third trimester pregnant women there were 10 articles that were not suitable, the remaining 11 articles. Then there are 5 articles that compare with other non-pharmacological therapies, the remaining 6 articles. Then 2 articles were issued because they did not mention the sura used, leaving 4 articles. The final results are based on feasibility and can be analyzed according to the literature review of 4 articles.

3 Result and Discussion

The Google Scholar database is used for the publications in this literature review that cover the years 2019 through 2022. Four papers matched the requirements for inclusion, and this led to a sub-discussion in the literature review subject on the impact of murottal Al-Qur'an therapy on third-trimester pregnant women's anxiety.

Based on the review of the articles, it was found that the level of anxiety before the intervention was carried out on average was in the category of severe anxiety and after the intervention was not anxious. The surah used is Surah Maryam and Surah Ar-Rahman. The time used by 2 articles did not mention and 2 articles mentioned 14 days and 17 days, and the research design used was quasi-experimental.
Table 1. Literature Review Results

<table>
<thead>
<tr>
<th>No</th>
<th>Title</th>
<th>Writer</th>
<th>Anxiety Level Before:</th>
<th>Surah</th>
<th>Time (Days)</th>
<th>Research Design</th>
<th>Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>The Effect of Surah Maryam Al-Qur'an Murottal Therapy on the Level of Anxiety in Third Trimester Pregnant Women</td>
<td>[10]</td>
<td>Moderate anxiety (6 respondents) and severe anxiety (14 respondents)</td>
<td>Surah Maryam</td>
<td>14 days</td>
<td>Quasi Experimental Design</td>
<td>Al-Qur'an murottal therapy affects the anxiety level of third trimester pregnant women with a value of 0.000.</td>
</tr>
<tr>
<td>2</td>
<td>The Effect of Murottal Al-Qur'an Surah Maryam Therapy on Reducing Anxiety Levels in Third Trimester Pregnant Women in the Work Area of the Meninting Health Center</td>
<td>[11]</td>
<td>Mild anxiety (7 respondents), moderate anxiety (5 respondents), and severe anxiety (4 respondents).</td>
<td>Surah Maryam</td>
<td>-</td>
<td>Quasi Experimental Design</td>
<td>The value of p-value = 0.0005 so that there is a difference in the anxiety score before and after the intervention so that H1 is accepted which means &quot;Murottal Al-Qur'an Surah Maryam Has an Effect on Reducing the Anxiety Score of Trimester III Pregnant Women in the Work Area of the Meninting Health Center&quot;.</td>
</tr>
<tr>
<td>3</td>
<td>The Effect of Murottal Al-Qur'an Surah Ar-Rahman Therapy on Reducing Anxiety Levels in Third Trimester Pregnant Women in the Work Area of the Molawe</td>
<td>[9]</td>
<td>The mean before the intervention was 33.17 and the mean after the intervention was 16.47.</td>
<td>Surah Ar-Rahman</td>
<td>17 days</td>
<td>Quasi Experimental Design</td>
<td>There is a p-value &lt;0.001 so that there is an effect of Murottal Al-Qur'an Surah Ar-Rahman therapy on the level of anxiety in third trimester pregnant women in the Working Area of the Molawe.</td>
</tr>
</tbody>
</table>
Table 2. Characteristics of respondents

<table>
<thead>
<tr>
<th>No</th>
<th>Writer</th>
<th>Age</th>
<th>Parity</th>
<th>Education</th>
<th>Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>[10]</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>2.</td>
<td>[11]</td>
<td>Age at risk as many as 2 respondents and age not at risk as many as 14 respondents</td>
<td>Primigravida as many as 7 respondents and multigravida as many as 9 respondents</td>
<td>Elementary school (3 respondents), junior high school (4 respondents), senior high school (14 respondents), undergraduate (12 respondents), and masters (2 respondents)</td>
<td>Farmers (6 respondents), IRT (16 respondents), civil servants (8 respondents), and self-employed (5 respondents)</td>
</tr>
<tr>
<td>3.</td>
<td>[9]</td>
<td>The average age is 30.4 years with 35 respondents</td>
<td>-</td>
<td>Elementary education as many as 10 respondents and multigravida as many as 8 respondents</td>
<td>Working (5 respondents) and not working (13 respondents)</td>
</tr>
<tr>
<td>4.</td>
<td>[12]</td>
<td>The age at risk is 1 respondent and the age is not at risk is 17 respondents</td>
<td>Primigravida as many as 10 respondents and multigravida as many as 8 respondents</td>
<td>Elementary education (4 respondents), secondary (7 respondents), and tertiary education (7 respondents)</td>
<td>-</td>
</tr>
</tbody>
</table>

Description: (-) not mentioned

Respondent characteristics contained 1 article which did not mention the characteristics of the respondents and 3 articles mentioned characteristics dominated by age not
at risk, multigravida and primigravida parity, secondary education, and employment not working.

3.1 Anxiety Level

Anxiety before intervention was more dominated by severe anxiety level by 23 respondents or 42.6% compared to moderate anxiety level by 15 respondents or 27.8%, mild anxiety level by 13 respondents or 24.1%, and not anxious by 3 respondents or 5.5%. Towards the last days before giving birth, pregnant women usually experience anxiety during childbirth, this is experienced by pregnant women who are about to give birth to their first baby or who have experienced trauma during previous births. When you are anxious, your mind will generate many images that will exacerbate your anxiety [11].

After the intervention was carried out, the respondents who were not anxious were dominated by 25 respondents or 46.2% more than those with mild anxiety level of 14 respondents or 26%, moderate anxiety level of 13 respondents or 24%, and severe anxiety level of 2 respondents or 3.8%. There were variations between the anxiety levels of third trimester pregnant women before and after receiving Al-Qur'an murottal therapy. Their anxiety decreased from a level of severe anxiety to none after receiving this intervention. This is in line with the results of [12] which found a decrease in anxiety levels in pregnant women who were given Murottal Al-Qur'an therapy. By listening to the recitation of the verses of the Qur'an can make changes in the soul of pregnant women. Murottal Al-Qur'an contains elements of relaxation which will have a calming effect on the body. This feeling will then provide a positive emotional response which is very influential in bringing about positive perceptions.

3.2 Characteristics of Respondents

Characteristics of the respondents' ages with respect to the results' findings show that 31 respondents, or 91.1%, were not at danger of harm, as opposed to 3 respondents, or 8.9%. A person's psychological state might change with age. A person's level of emotional maturity and capacity to handle and resolve a variety of difficulties improves with age. Women between the ages of 21 and 35 have reached the point in their development where their reproductive organs are fully developed and capable of carrying a pregnancy. Psychologically, during this stage of growth, they are better able to adjust to changes that take place, the structure of life becomes more secure, they are able to solve issues with mature thinking, and they are able to accept new roles [13].

Up to 17 respondents, or 50%, identified as primigravida, and up to 17 respondents, or 50%, identified as multigravida. The psychological well-being of expectant mothers can be impacted by a woman's parity, particularly in the third trimester when labor and delivery are imminent. Pregnant women with primigravida parity frequently experience fear because they frequently hear stories about what will happen as the gestational age approaches the time of delivery and see images of the grueling labor process, in contrast to pregnant women with parity. The majority of multigravidas have knowledge of pregnancy and childbirth gained from prior pregnancies, yet occasionally women still face
anxiety due to negative birth experiences or trauma. However, multigravida parity pregnant women are often seasoned, therefore they tend to be better intellectually and psychologically prepared throughout pregnancy [14].

The educational characteristics of respondents who are domiciled by secondary education are 25 respondents or 47.1% compared to basic education which is 7 respondents or 13.2% and tertiary education which is 21 respondents or 39.7%. The quality of knowledge and intellectual maturity of a person increase with education level. They frequently give their own and their family's health greater thought. An individual's degree of education will have an impact on their capacity to think critically and assimilate new information [15]. This is in line with what was conveyed by [16] that the higher a person's education, the easier it is for him to receive information so that he has more knowledge. On the other hand, if there is a low level of education, it will be difficult to digest the message or information conveyed.

Characteristics of the work of respondents who were dominated by respondents who did not work as many as 29 respondents or 54.7% compared to respondents who worked as many as 24 respondents or 45.3%. Someone who has work activities outside the home makes it possible to get a lot of influence from friends and various information from other people's experiences can influence a person's perspective in accepting stressors and overcoming them [16]. Meanwhile, pregnant women who do not work will experience anxiety because during pregnancy they are only at home so that they will focus more on the discomforts of their pregnancy, this makes pregnant women anxious [10].

3.3 Time used

Of the 4 articles analyzed, there were 2 articles which mentioned the time used in murottal Al-Qur'an therapy to reduce anxiety in third trimester pregnant women, namely 14 days and 17 days. Depending on the qori' (Qur'an reader), murottal Al-Qur'an surah Maryam takes around 25 minutes, while surah Ar-Rahman takes about 15 minutes. Because the Al-Qur'an stimulant may produce delta waves of 63.11%, it can be employed as a novel therapeutic option for relaxation treatment that is even more effective than conventional audio therapies. Additionally cheap and without side effects, audio therapy is a useful form of treatment. Low sound intensity is defined as comforting and painless sound that is less than 60 dB in volume. Murottal has a good effect on listeners and has an intensity of 50 dB. The advantages are more significant since murotal treatment is administered for 15 to 25 minutes [17].

3.4 Surahs used

Two articles utilized murottal Al-Qur'an surah Maryam, and two articles used murottal Al-Qur'an sura Ar-Rahman, according to the review's findings. Murottal Al-Qur'an surah Maryam treatment has been used in 2 studies with a p value of 0.00, indicating that it is effective in lowering anxiety in third-trimester pregnant women. The 19th and last Surah of the Qur'an, Maryam, has 98 verses. In verses 16-21, it is told that Maryam was a woman who always guarded her honor, so she always tried to distance herself from
men and from the crowd of the Children of Israel, because of her noble personality, Allah SWT sent the angel Jibril to say to her that she was chosen to be the mother of Prophet Isa as even though she was never touched by men. In verses 22-30 it is narrated that Maryam was pregnant, until when she was about to give birth, she went to one place, then after giving birth, she returned and showed Noya's baby to her people, but her people insulted her and accused Maryam of having done something bad. On bad things. With the permission of Allah SWT, the baby can speak and show that Maryam did not do anything bad as they accuse Maryam's story which is one of the reasons why Surah Maryam was chosen as one of the surahs to be read during pregnancy. Reading this surah, the baby's parents hope that later their daughter can become like Maryam who can maintain her honor and have strong faith [18].

There is a relationship between murottal Al-Qur'an surah Ar-Rahman treatment and anxiety in third trimester pregnant women, as evidenced by the two studies utilising this therapy that had p values of 0.00 and 0.001. The 55th surah consisting of 78 verses. The name Ar-Rahman is taken in the first verse of this surah, and Ar-Rahman is one of the names of Allah SWT. which means Allah is Most Gracious. In Surah Ar-Rahman, it explains a lot about the grace that Allah gives to each of His servants. Also in this sura conveys about the blessings that Allah always gives to every creature and in every event both in this world and in the hereafter [19]. Rasulullah saw. He said, " Indeed, I have read this letter (Surat Ar-Rahman) to the jinn when they gathered to me, so their response was better than yours. When I read up to the verse, 'Then which of God's favors do you deny?' Glory be to Allah for You” (HR. Tirmidhi).

4 Conclusion

Based on research that has been reviewed as many as 4 articles, it can be concluded that murottal Al-Qur'an therapy has an effect on the anxiety of pregnant women in the third trimester, which is dominated by the level of severe anxiety by 23 respondents or 42.6%, decreasing to no anxiety by 25 respondents or 46.2%. The characteristics of the respondents were nominated by age not at risk, parity equally, namely primigravida and multigravida, secondary education, and pregnant women not working. The time used is more effective, namely with a duration of 15-25 minutes. The surahs used for murottal Al-Qur'an therapy are surah Maryam and Surah Ar-Rahman.

References

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