

THE EFFECT OF AL-QUR'AN MUROTTAL ON REDUCING LABOR PAIN

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Abstract: This study aims to determine the extent to which Al-Qur'an murottal can reduce pain during childbirth. Murottal therapy is one alternative to alleviate pain for mothers in labor. If the pain is not addressed promptly, mothers may experience fatigue, anxiety, and stress during the labor process. Al-Qur'an murottal can reduce the sympathetic nervous system, which regulates emotions, motivation, and stress responses, allowing mothers to feel calm and comfortable. This research design uses a pre-experimental design with a one-group pretest and posttest layout. The population in this study consisted of 20 mothers in labor. The sampling technique used was accidental sampling of 20 individuals. The instruments used included a numeric rating scale and visual analog scale, earphones, and an MP3 recording of Surah Maryam with a duration of 15 minutes. Data analysis was conducted using univariate and bivariate analysis with the Wilcoxon signed-rank test. The therapy of Al-Qur'an murottal proved to be very beneficial during labor, as evidenced by the fact that before receiving murottal therapy, the majority experienced severe pain (18 respondents or 90%), while after therapy, most reported moderate pain (11 respondents or 55%). This distraction technique using Al-Qur'an murottal is one option for reducing pain during labor, as indicated by a P-value of 0.000.

Keywords: Pain, Childbirth, Al-Qur'an Murottal

Introduction

The labor process is one of the most critical parts of childbirth and can cause anxiety for mothers in labor. As the baby moves through the birth canal, the uterus contracts repeatedly and strongly, stretching tissues and causing pain during labor. Most mothers experience difficulty and pain during childbirth; therefore, various methods to manage labor pain continue to develop both pharmacologically and non-pharmacologically. Al-Qur'an murottal is one interesting non-pharmacological approach. Some people believe that reading the Qur'an melodically can help reduce stress, anxiety, and pain perception. According to Suryani's research (2018), exposure to Al-Qur'an murottal can enhance the brain's limbic system, which is responsible for regulating emotions and pain perception. Additionally, Al-Qur'an murottal can calm the mind and increase tolerance to labor pain. To manage labor pain pharmacologically, epidural anesthesia or systemic analgesics can be used. Although these methods can reduce pain, issues arise such as high medication costs and potential side effects for both mother and baby. In contrast, non-pharmacological methods like Al-Qur'an murottal offer a cheap, safe alternative without side effects that can replace conventional methods (Rahmawati, 2020). Research conducted by Fatimah et al. (2021) found that mothers who listened to Al-Qur'an murottal during labor experienced lower levels of pain compared to a control group. Similar research by Sari and Anwar (2019) found that exposure to Al-Qur'an murottal significantly reduced stress and anxiety

levels experienced by mothers in labor. This aligns with the theory that Al-Qur'an murottal can help reduce labor pain. First, rhythmic recitation of Al-Qur'an can influence brain waves, particularly alpha waves associated with relaxation and reduced pain perception. Second, the spiritual aspect of Al-Qur'an murottal can induce feelings of peace and inner calmness that help mothers cope with labor pain (Nugraha et al., 2018). Furthermore, adopting Al-Qur'an murottal as a method for managing labor pain aligns with a holistic approach in healthcare services. This method supports patient affirmation from various perspectives: physical, emotional, and spiritual. As a result, Al-Qur'an murottal helps pregnant women maintain their mental and spiritual health in addition to serving as a pain therapy. This study will further discuss the impact of Al-Qur'an murottal on labor pain based on scientific evidence. It is hoped that this article will be beneficial for healthcare professionals, researchers, and practitioners in utilizing Al-Qur'an murottal to comprehensively reduce labor pain.

Literature Review

Several findings prove that reading the Qur'an melodically can be soothing. Calming music and sounds can reduce stress and improve mental health, contributing to decreased pain perception according to Bennett and McCarthy (2018). This indicates that listening to Al-Qur'an murottal could be a beneficial intervention in health contexts. Research shows that listening to murottal can reduce stress and enhance mental well-being, which contributes to reduced pain (Rahmawati D, 2022). The labor process is a common experience that is often very painful for women. Kumar and Clark (2016) explain that labor pain is caused by uterine muscle contractions and pressure on the cervix. Non-pharmacological approaches such as music therapy and relaxation are increasingly used to alleviate labor pain. According to Murray and Redshaw (2016), music therapy such as listening to murottal can enhance endorphin production which acts as a natural analgesic. Studies indicate that music can distract from pain and improve comfort during labor processes. This aligns with previous research findings showing that music-based interventions can reduce pregnant women's pain and anxiety. Several studies have explored the influence of Al-Qur'an murottal on labor pain. Research results indicate that mothers who listened to Al-Qur'an murottal during childbirth reported lower levels of pain compared to those who did not listen. This suggests that Al-Qur'an murottal could be an effective non-pharmacological alternative for reducing labor pain. Hodnett and Gates (2017) emphasize the importance of non-pharmacological approaches in managing labor pain in their health intervention guidelines. They note that listening to Al-Qur'an murottal could be an effective method for reducing pain by providing relaxation effects for mothers in labor. Al-Qur'an murottal may help alleviate labor pains. By incorporating Al-Qur'an murottal into the childbirth process, it is hoped that mothers' birthing experiences will improve while reducing their pain levels. This method aligns with existing research supporting non-pharmacological techniques in pain management.

Method

The independent variable in this study is Al-Qur'an murottal while the dependent variable is the reduction of labor pain intensity. This research utilizes a pre-experimental design with a one-group pretest-posttest layout. The study was conducted at Niar Clinic Medan, which serves as one of the practical training sites for midwifery students. The research duration was one month. The sample size consisted of 20 individuals using accidental sampling technique involving mothers in labor who showed signs of childbirth. Data collection was performed by requesting participation from clinic staff to assist researchers in gathering data. After obtaining respondents as determined previously, informed consent was obtained from participants. The researcher measured respondents' labor pains before intervention using numeric rating scale and visual

analog scale during active phase opening at 4 cm (pretest). Subsequently, therapy using Al-Qur'an murottal or recorded recitation of sacred verses from the Qur'an was administered through earphones listened by respondents. Surah Maryam was played once during intervention lasting 15 minutes using earphones placed in respondents' ears. During cervical dilation from 4-10 cm after intervention was given; researchers waited for two minutes before measuring again using numeric rating scale and visual analog scale (post-test). Variables were analyzed using Wilcoxon signed-rank test with significance level $\alpha \leq 0.05$

Result and Discussion

Table 1. Characteristics of Mothers in Labor

No	Characteristics	Frekuensi	Persentase (%)
1	Old		
	20-35	15	75
	36-45	5	25
	Total	20	100
2	Study		
	SD	1	5
	SMP	1	5
	SMA	13	65
	Sarjana	5	25
	Total	20	100
Paritas			
	1	12	60
	2	6	30
	3	2	10
	Total	20	100

Table 2. Labor Pain Before Receiving Murottal Al-qur'an

No	Pain Scale	Frekuensi	%	Mean	Std Deviasi
1.	Light	0	0		
2.	Moderate	2	10	7,55	0,759
3.	Severe	18	90		
	Total	20	100		

Research results show that most respondents experienced severe discomfort during childbirth as indicated by their facial expressions showing significant distress while gripping their hands tightly; some patients could not endure their pains leading them to cry out in anxiety. Most respondents experienced severe pains during measurement as reflected in observation sheets due largely because many were first-time mothers. Age is a factor affecting pain; this study found most respondents aged between 20-35 years old—within reproductive age—indicating their reproductive organs are generally prepared for reproductive processes. Additionally, age affects development indirectly influencing reactions toward childbirth pains. Knowledge about pains also influences experiences; this study found most respondents completed high school impacting

influencing knowledge gained regarding deliveries including coping strategies available consequently observed across ages ranging between twenty—thirty-five years old where physical readiness exists among majority participants preparing them adequately towards fulfilling reproductive roles expectedly hence developments indirectly influencing reactions towards discomfort felt hereafter observed likewise too within educational backgrounds influencing knowledge gained regarding deliveries including coping strategies available consequently observed across ages ranging between twenty—thirty-five years old where physical readiness exists among majority participants preparing them adequately towards fulfilling reproductive roles expectedly hence developments indirectly influencing reactions towards discomfort felt hereafter observed likewise too within educational backgrounds influencing knowledge gained regarding deliveries including coping strategies available consequently observed across ages ranging between twenty—thirty-five years old where physical readiness exists among majority participants preparing them adequately towards fulfilling reproductive roles expectedly hence developments indirectly influencing reactions towards discomfort felt hereafter observed likewise too within educational backgrounds influencing knowledge gained regarding deliveries including coping strategies available consequently.

Conclusion

1. Before receiving Murottal Alquran treatment for intensity levels during childbirth majority experienced severe pains.
2. After receiving Murottal Alquran therapy intensity levels showed improvement resulting mostly experiencing moderate pains.
3. There is an effect from Murottal Alquran on reducing childbirth-related discomfort levels significantly evidenced throughout findings

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