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The Effect of Al-Qur'an Murottal Therapy on Breastfeeding Anxiety in Primipara Postpartum Mothers

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Abstract: During the puerperium there are various problems, both physical and psychological. The psychological condition of breastfeeding mothers affects the amount of milk production. Postpartum mothers who have just given birth to their first child will experience high psychological problems (anxiety) such as anxiety about the smoothness of breastfeeding, not being able to provide exclusive breastfeeding or feeling unable to care for themselves and their babies. This is caused by the calm or comfort of the mother's own soul. This study aims to determine the effect of Al-Qur'an murottal therapy on breastfeeding anxiety primipara postpartum women at the Independent Student Midwife Practice, SKM, Kertomulyo, Pati in 2022. This research is a quantitative research with one group pretest posttest pre-experimental design. This research was conducted October - November 2022. Population 50 people and a sample of 33 respondents, the accidental sampling technique was taken according to the inclusion and exclusion criteria. Data analysis with Wilcoxon test obtained Asymp. Sig. (2-tailed) or p-value 0.000 <0.05. Z value of -5.025. In conclusion, there is an effect of murottal Al-Qur'an therapy on breastfeeding anxiety in primipara postpartum mothers Independent Student Midwife Practice, SKM, Kertomulyo, Pati in 2022.

Keywords: Postpartum; Breastfeeding Anxiety; Murottal Al-Qur'an

INTRODUCTION

The puerperium comes from the Latin "puer" meaning baby, and "paros" which means giving birth, can be interpreted as a period of recovery as before pregnancy. During the postpartum period, various problems can arise, both in the form of physical and psychological complications. This period is quite important for health workers, especially midwives, to carry out monitoring.¹ Postpartum mother psychology can have an impact on the production and smoothness of breast milk. After the birth process that a mother goes through, it can cause stress caused by discomfort with the situation that her baby is experiencing.² In the Pati region, the psychological problems experienced by breastfeeding mother occur due to discomfort when breastfeeding, caring for themselves and their babies. Data proves that 42.5% of breastfeeding mothers in the first month face stress; consisting of 25% light stress, 15% moderate stress and 2.5% severe stress. 75% of breastfeeding in the first month was carried out by mothers who did not experience stress or experienced mild and moderate stress. This situation will become more severe if the mother is unable to overcome the difficulties she is experiencing.³

Exclusive breastfeeding has many benefits according to the United National Children Fund (UNICEF) and the World Health Organization (WHO) recommends that babies born get breast milk from their mothers for 6 months without additional food and drink.⁴ Exclusive breastfeeding for infants can reduce infant mortality (IMR) due to infection by 88%. Children can also get sick if they don't get exclusive breastfeeding by 31.36% from 37.94%.⁵ WHO in 2020 described the facts in the form of data on exclusive breastfeeding globally, approximately 44% of infants aged 0-6 months were exclusively breastfed in the period 2015-2020 of the 50% target of exclusive breastfeeding. The low level of exclusive breastfeeding can affect the quality and vitality of the next generation.⁶

Central Java Province presented data on newborns who received Early Breastfeeding Initiation (IMD), which was 79.7%. Pati Regency is ranked 19th (86.6%) from the lowest data percentage with a total of 35 regencies in Central Java.⁷ Exclusive breastfeeding in developing countries is able to protect 1.5 million babies/year. From this, WHO recommends a government policy regarding exclusive breastfeeding in Indonesia which was established in 2004 through Kepmenkes RI Number 450/Menkes/SK/IV/2004 and is based on Government Regulation No. 33 of 2012.⁸

Efforts that can be made to overcome anxiety are by managing a diet with balanced nutrition, adequate rest, exercise, recreation with family, and increasing faith so as to gain strength and calm.⁹ The psychological condition of breastfeeding mothers can affect the amount of milk production and the smoothness of milk production caused by the coolness or comfort of the mother's own soul. Based on this problem, of course it can be done with spiritual activities, namely listening to murottal Al-Qur'an. Physical recitation of the Qur'an contains elements of the human voice, which is an amazing healing instrument, easy to reach and does not contain drugs. Sound is able to reduce stress hormones which will make you feel relaxed and change attention from fear, anxiety and tension, so that the milk comes out smoothly or easily and makes the mother more comfortable breastfeeding her baby.¹⁰

The results of observations made at the Mandiri Midwife Practicing Student, SKM, Kertomulyo, Pati found that data on primipara postpartum mothers in October - November 2022 were 33 people. Based on this phenomenon, a study was conducted to determine the effect of murottal Al-Qur'an therapy on breastfeeding anxiety for primipara postpartum mothers at the Mandiri Midwife Student Practice, SKM, Kertomulyo, Pati in 2022.

MATERIALS AND METHOD

This study used a quantitative research type, with a pre-experimental research design with a one group pre-posttest design. This research was carried out at the Student Midwife Independent Practice, SKM, Kertomulyo, Pati, in 2022 from October to November 2022. Variable measurements were carried out using an instrument in the form of the HARS questionnaire (Hamilton Anxiety Rating Scale) which was given to respondents to determine the perceived level of anxiety about breastfeeding. The study population was primiparous postpartum mothers at the Mandiri Midwives Practice, SKM who were determined using inclusion criteria, namely willing to be respondents, Muslim, physically and mentally healthy, primiparous postpartum mothers day 3-10 and communicative, as well as exclusion criteria such as pre-eclampsia, eclampsia, bleeding, etc.

Researchers determined that the variables measured were 2 categories, namely dependent and independent. The dependent variable is breastfeeding anxiety in primiparous postpartum mothers, while the independent variable is murottal Al-Qur'an. Data collection was carried out by providing murottal Al-Qur'an with surah Ar-Rahman through a tape recorder or sending recordings via the researcher's cell phone to primiparous postpartum mothers. Murottal Al-Qur'an is listened to at least 3 (three) times a day, namely when there are no activities, when breastfeeding and when going to sleep. Performed for 6 (six) days. Data collection in this study involved an enumerator who assisted researchers to record respondents and distribute research questionnaires.

The required number of samples is determined by using the slovin formula to calculate the minimum number of samples used as research respondents. This study takes an error tolerance of 10% (0.1), so that from the calculation of the slovin formula:¹¹

$$n = \frac{N}{1 + Ne^2} = \frac{50}{1 + 50 (0,1)^2} = 33,33$$

The minimum number of samples obtained is 33 respondents. So the number of samples required 33 respondents in this study. Filled questionnaires were returned to researchers there were 33 respondents who filled out. So that a total of 33 respondents were included in this study. The sampling technique used accidental sampling technique by giving questionnaires directly. Breastfeeding anxiety was detected using the HARS questionnaire with 14 questions with 5 answer criteria, namely 0: no symptoms, 1: mild symptoms, 2: moderate symptoms, 3: severe symptoms, and 4: panic symptoms.¹² The statistical test used was the Wilcoxon Signed Rank Test at a significant level of 95% ($\alpha < 0.05$).¹³ The measurement results of a score <14 indicated no anxiety, a score of 21-27 was defined as moderate anxiety, a score of 28-41 was defined as severe anxiety and a score of 42-56 is defined as panic.²⁰

Statistical analysis used statistical software with the Wilcoxon test to see the effect of the independent variables on the dependent variable. This research protocol has been submitted for ethical

clearance to the Research Ethics Commission of the Faculty of Health, Jenderal Achmad Yani University, Yogyakarta and approved with letter number: S.Kep/333/KEPK/IX/2022.

RESULT

The results of this study were presented in the form of univariate analysis which described the respondents in this study and the breastfeeding anxiety of primipara postpartum mothers before and after being given Al-Qur'an murottal therapy and bivariate analysis which aimed to determine whether there was an effect of Al-Qur'an murottal therapy on breastfeeding anxiety of primipara postpartum mothers at the Mandiri Midwife Student Practice, SKM, Kertomulyo, Pati in 2022.

Table 1. Distribution of Frequency and Percentage of Characteristics of Primipara Postpartum Mothers

Characteristics	Frequency (f)	Percentage (%)
Age	20 - 35 Years old	31
	> 35 Years old	2
Last education	SMP	7
	SMA	18
	Diploma	3
	Bachelor	5
Profession	IRT	15
	Private sector employee	10
	PNS	8
Parity	P1A0	30
	P1A1	3

Table 1 shows that the total number of respondents was 33 primiparous postpartum mothers. The majority of primiparous postpartum mothers were aged 20-35 years as many as 31 people (94%), mothers with the last high school education were 18 people (55%), 15 people (46%) became housewives and the number of primiparous postpartum mothers who either gave birth to their first child was 30 people (91%) or who had experienced an abortion before the birth of their first child, 3 people (9%).

Table 2. Postpartum Primipara Mothers' Breastfeeding Anxiety Score Before being given Murottal Al-Qur'an Therapy (N=33)

Pre Test						
Valid	N	Missing	Mean	Median	Std. Deviation	Minimum
33	33	0	31.7879	34.0000	7.44042	19.00
						Maximum
						41.00

Based on Table 2 above, it shows the results of the anxiety of primiparous postpartum mothers before being given treatment or intervention of murottal Al-Qur'an therapy with an average value of 31.79 which is included in the category of severe anxiety with a total minimum anxiety score of 19 which includes mild anxiety and anxiety value maximum 41 with severe anxiety category.

Table 3. Postpartum Primipara Mothers' Breastfeeding Anxiety Score After being given Murottal Al-Qur'an Therapy (N=33)

Post Test						
Valid	N	Missing	Mean	Median	Std. Deviation	Minimum
33	33	0	13.58	14.00	5.099	2
						Maximum
						21

Based on table 3, it shows the results of the anxiety of primiparous postpartum mothers after being given treatment or intervention by murottal Al-Qur'an therapy which shows that the average value of 13.58 is included in the mild anxiety category with a total minimum anxiety score of 2 which is categorized as no anxiety and the value maximum anxiety of 21 including moderate anxiety.

From the results of the pre-post distribution of the intervention, a statistical test resulted in a decrease in the total value or anxiety score before and after being given the Al-Qur'an murottal therapy intervention, which was about 18 points from the average value before being given the Al-Qur'an murottal therapy intervention 31, 79 to 13.58 after being given the intervention. Then a normality test was carried out to find

out the distribution of the data distribution using the Shapiro Wilk test because the number of respondents or samples used in this study was <50 people. With the following results:

Table 4. Data Normality Test Results

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Pre Test	.178	33	.009	.879	33	.002
Post Test	.230	33	.000	.927	33	.030

From the results of the table above it shows that both data are not normal, because the results of the pre-test value are 0.002 which is <0.05, it is said that the data distribution is not normal. While the results of the post-test value of 0.030 are also said to be abnormal data because <0.05.

The results of the Shapiro Wilk test which states that the distribution of the two data is not normal will continue to use the Wilcoxon test. With the following calculation results:

Table 5. Hypothesis Testing

	Post Test - Pre Test
Z	-5.025 ^b
Asymp. Sig. (2-tailed)	.000

The table above shows the results of the calculation of the Wilcoxon statistical test from primiparous postpartum mothers before and after being given an intervention in the form of Al-Qur'an murottal therapy, the Asymp value was obtained. Sig (2-tailed) or p-value 0.000 which states < 0.05, which can be interpreted that there are pre and post differences so that it can be concluded that there is an effect of giving murottal Al-Qur'an therapy on breastfeeding anxiety in primiparous postpartum mothers.

DISCUSSION

This research study explains that the postpartum period is a time when a woman's social and psychological conditions will have an effect, these conditions have a risk of experiencing psychological disorders such as anxiety. Anxiety or psychological disorders occur due to the transition process of a woman becoming a mother.^{14,16} Primipara postpartum mothers who experience anxiety will cause breast milk to not come out smoothly and will interfere with the process of exclusive breastfeeding which is influenced by formula feeding, lack of awareness and knowledge of mothers.¹⁹ This is because primiparous postpartum mothers do not have experience breastfeeding and caring for their babies.²¹

The results of the distribution of Table 2 show that the breastfeeding anxiety score of primipara postpartum mothers before being given murottal Al-Qur'an therapy obtained an average total score of 31.79 with a minimum total anxiety score of 19 and a maximum anxiety value of 41. The maximum anxiety value which is still high certainly illustrates the psychological state regarding breastfeeding anxiety in primiparous postpartum mothers in this study which affects feelings of discomfort with the situation that is being experienced either from the breastfeeding process or even herself and the care of her baby. This is in line with Ulfa and Setyaningsih's research which stated that in the Pati region the psychological problems experienced by breastfeeding mothers occur due to discomfort when breastfeeding, caring for themselves and their babies. Existing data proves that 42.5% of mothers who breastfeed in the first month face stress; consisting of 25% light stress, 15% moderate stress and 2.5% severe stress.³

Postpartum mothers who have just had their first child, of course, prepare themselves and their babies are not ready and alert, which causes psychological disturbances. Psychological disorders in the form of anxiety about the preparation for breastfeeding will be the mother's first enemy, where the mother is afraid that if the milk does not come out, the baby will not be full in breastfeeding and even afraid to take care of herself and her baby. Postpartum mothers who experience these symptoms will certainly find a way out to overcome the problem with either pharmacological or non-pharmacological therapy. Pharmacological therapy, for example taking anti-anxiety drugs (anxiolytics) such as Diazepam and non-pharmacological therapy that can be used to overcome anxiety about breastfeeding, namely by listening to murottal Al-Qur'an. By listening to murottal, the mother will feel calm and relaxed in breastfeeding, of course. This is supported by exclusive breastfeeding which will provide many benefits for both the baby and the mother

herself, therefore UNICEF and WHO recommend that breastfeeding from a mother be given to the baby for 6 months without additional food and drink.⁴ Given that exclusive breastfeeding in infants can reduce infant mortality due to infectious diseases by 88%. In addition, children are more susceptible to illness if they are not exclusively breastfed from 31.36% to 37.94%.¹⁵

Table 3 describes the nursing anxiety score of primiparous postpartum mothers after being given murottal al-Qur'an therapy intervention with calculated anxiety results showing an average value of 13.58 with a total minimum anxiety score of 2 and a maximum anxiety score of 21.

Based on the results of the study stated that Al-Qur'an murottal therapy can reduce breastfeeding anxiety in primiparous postpartum mothers. This is in accordance with or in line with Ameliasari's 2020 research entitled "Pengaruh Terapi Murottal Al-Qur'an Surah Ar-Rahman Terhadap Skor Kecemasan pada Ibu Nifas" who explained that by listening to the verses of the Koran, Muslims, whether they speak Arabic or not, will experience extraordinary physiological changes.⁹ This study states that there is an effect of murottal Al-Qur'an surah Ar-Rahman therapy on anxiety scores in postpartum mothers with a P-value of 0.001 < 0.05 and a Z value of -5.025 which means that there is a change in anxiety level by 5 times from before and after being given murottal Al-Qur'an therapy on breastfeeding anxiety in primiparous postpartum mothers.

Based on the results of observations made by this researcher, it was found that there was a decrease in breastfeeding anxiety scores in primiparous postpartum mothers after being given treatment in the form of Al-Qur'an murottal therapy which is in line with the research of Azzahroh, et al and Rifiana and Sari who concluded about the research they conducted that this Al-Qur'an murottal therapy has an effect on reducing anxiety levels, so that it is hoped that it can be considered to be applied as an action in overcoming anxious responses in patients.^{17,18}

In addition, the limitations of this study include communication between researchers and postpartum mothers as respondents, which is often hampered because not all respondents respond to the researcher's chat via WhatsApp quickly or respond quickly. Researchers cannot control the time of intervention because the time is not the same for each respondent.

CONCLUSION

The results of the bivariate test using the Wilcoxon test showed that there was an effect of murottal Al-Qur'an therapy on breastfeeding anxiety in primiparous postpartum mothers at the Mandiri Midwife Practicing Student, SKM, Kertomulyo, Pati in 2022 with Asymp. Sig. (2-tailed) of 0.000 with a Z value of -5.025 which indicates that there is a change in anxiety levels 5 times before and after being given Al-Qur'an murottal therapy.

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CONFLICT OF INTEREST

The researcher stated that there were no financial and non-financial problems, and there were no problems between the researchers and the campus, PMB midwives and respondents in the study.

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