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The Effect Of Islamic Religious Music Therapy On The Decrease In Childbirth Pain In Pregnant Women At The Sawit Seberang Health Center, Sawit Seberang District, Langkat Regency In 2019

THE EFFECT OF ISLAMIC RELIGIOUS MUSIC THERAPY ON THE DECREASE IN CHILDBIRTH PAIN IN PREGNANT WOMEN AT THE SAWIT SEBERANG HEALTH CENTER, SAWIT SEBERANG DISTRICT, LANGKAT REGENCY IN 2019

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ABSTRACT

Pain is a psychological thing that occurs during childbirth, but many women feel the pain is worse than it should be because it is much influenced by environment, age, gender, fatigue, culture, and past experiences, where fear creates tension and panic. causes the muscles to become stiff and ultimately causes pain. Perceptions of pain that a person feels are different and depending on their adaptation during the labor process get a labor pain index based on the McGillPain Index (MPI) with an index scale of 0-50 for primiparous (38), multiparous (30), amputation (25), and cancer (28).

This study is a literature review that provides information on efforts to reduce labor pain in childbirth mothers. Sources in conducting this literature review include systematic search studies of computerized databases in the form of research journals totaling 8 journals. The writing of this scientific article uses the Vancouver bibliography.

The results showed the average (mean) + standard deviation (SD) of the score before doing Islamic religious music was (3.30) and after doing Islamic religious music music therapy the average dropped to (1.90) these results indicated a difference in the mean value. average after doing Islamic religious music music therapy. Based on the results of the data, it can be concluded that there are changes that occur after performing Islamic religious music such as feeling comfortable, relaxed, relaxed and reducing labor pains.

Key words: Inpartu Mother, Islamic Religious Music Therapy, Decreased Labor Pain

PRELIMINARY

Childbirth is a process of releasing the products of conception (fetus and uri), which can live into the outside world, from the uterus through the birth canal or by other means. During labor, the uterus contracts and pushes the baby down to the cervix. This urge opens the cervix. After the cervix reaches complete opening, the contraction and push of the mother will move the baby down and out for a few days. The weight off the baby's head as it moves down the birth canal also causes pressure. (Danuatmaja, 2012)

The process of expelling the viable products of conception from the uterus through the vagina to the outside world is also known as childbirth. This process is divided into four stages, namely stage I, during the opening of the cervix or birth

canal, in which the cervix opens until there is an opening of 10 cm. Stage II is called when the fetus is released. Stage III is called the discharge and expulsion of the placenta. Stage IV early observation of post partum hemorrhage (Mochtar Rustam, 2011).

Labor begins when he develops mucus and blood mixed with blood. This blood-mixed mucus occurs because the cervix starts to open or flattens out, while the blood comes from the capillaries around the cervical canal due to a shift when the cervix is horizontal and open (Mochtar Rustam, 2011)

Labor pain is a physiological condition. Physiologically, labor pain begins to appear in the first stage of labor in the latent phase and the active phase, in the latent phase there is an opening up to 3

cm. In primigravida, the 1st stage of labor can last \pm 20 hours, in multigravida \pm 14 hours. Pain caused by uterine contractions and cervical dilation. The longer the pain you feel will get stronger, the peak of pain occurs in the active phase, where the complete opening is up to 10 cm. The intensity of pain during labor affects the psychological condition of the mother, the delivery process, and the well-being of the fetus

If the pain is not resolved quickly, it can cause death to the mother and baby, because pain causes the mother's breathing and heart rate to increase which causes blood flow and oxygen to the placenta to be disrupted. Handling and monitoring of labor pain, especially during the first stage of the active phase, is very important, because this is a determining point whether a mother in labor can undergo normal labor or end with an action due to complications caused by very severe pain.

Pain is a psychological thing that occurs during childbirth, but many women feel the pain is worse than it should be because it is much influenced environment, age, gender, fatigue, culture, and past experiences, where fear creates tension and panic. causes the muscles to become stiff and ultimately causes pain. Perceptions of pain that a person feels are different and depending on their adaptation during the labor process get a labor pain index based on the McGillPain Index (MPI) with an index scale of 0-50 for primiparous (38),multiparous (30), amputation (25), and cancer (28).

Islamic religious music therapy is a method for relaxation techniques that is rarely applied in maternity nursing practice, even though Islamic religious music therapy is an effective distraction technique that can reduce physiological pain, stress and labor pains by diverting one's attention from pain. Islam also functions as a controller and is a technique to create a comfortable environment when women give birth in the delivery room.

Music Therapy can improve, restore and maintain physical, mental, emotional, social and spiritual health. This is because Islamic religious music has several advantages, namely because Islamic religious music is comfortable, calming, relaxing, structured and universal.

Based on data obtained from a preliminary study conducted at the Puskesmas Sawit Seberang, none of them used Islamic religious music therapy and therapy while breathing techniques were often used to reduce labor pain. Based on the researcher's observations of several health centers, the researcher chose the Sawit Seberang health center which has the potential to conduct research on the effectiveness of relaxation techniques.

METHOD

In this study, researchers used a quantitative type or type of design with a quasi-quantitative experimental study with a pretest and posttest nonequivalent control group design, namely a study conducted by providing a treatment to determine the symptoms or effects that arise as a result of the treatment given to compare the results of Islamic Religious Music Therapy. with a control group similar in affecting labor pain. In this study, a pre-test and post-test will be carried out using the measurement of labor pain to compare the treated and untreated ones.

DISCUSSION Labor Pain

The pain experienced during childbirth is unique to each mother, it can be influenced by several factors. Labor pain is a manifestation of the uterine muscle contractions. This contraction causes pain in the waist, stomach area and radiates to the thighs. These contractions cause the opening of the cervix. With this cervical opening, labor will occur.

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Islamic Religious Music Therapy

Jean Houston, as quoted by Eric Jensen, stated that music can increase molecular structure in the body. The body resonates at a stable molecular wavelength, whereas music has its own frequency that can resonate with or against our body's rhythm. When both of them resonate at the same frequency, they are in tune, can learn better, become more aware and alert.

Benefits of Religious Music: Increase devotion, Calm hearts and minds, Religious music, not only has an impact on the relationship between humans and God, but also has an impact on relationships among humans, namely strengthening the ties of friendship. If lived well, religious music can change one's behavior.

Univarite Analysis

This study describes the results of research on the effect of Islamic religious music therapy on reducing labor pain in mothers giving birth at the Sawit Seberang Public Health Center in 20019. Based on data obtained from May to July, there were 40 mothers giving birth, and divided into two groups, namely as many as 20 people for the treatment or experimental group, namely the group that received Islamic religious music therapy and 20 people for the control group, namely the group that did not get music therapy.

No	Mother's age	Amount		Amount	
		f	%		
1	< 25 years old	6	30		
2	25-35 years old	13	65		
3	> 35 years old	1	5		
	Total	20	100		

No	Education	Amount	
		f	%
1	SD	1	5
2	SMP	6	30
3	SMA	11	55
4	Diploma/Sarjana	2	10
	Total	20	100

No	Profession	Amount	
		f	%
1	PNS	1	5
2	Swasta	6	30
3	Wiraswasta	9	45
4	Petani	2	10
5	Tidak Bekerja	2	10
	Total	20	100

Bivariate Analysis

Subjects in this study were 40 women giving birth at the Puskesmas Sawit Seberang which were divided into two groups, namely the experimental group who received Islamic religious music therapy as many as 20 labor mothers and the control group who were not given music treatment of mothers giving birth as many as 20 mothers giving birth. This study was conducted to compare the effect of before and after music therapy treatment in reducing labor pain. To prove this, it is necessary to have pretest data on the level of the labor pain scale in women before giving treatment and post-test data on labor pain and after being given treatment and those who are not given treatment.

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No	Variabel	Treat	ment	Coı	ntrol	Amo	ount
·	J - 71/11 -	Group		Group			
lusa	da Me	e.D.£	n-				
		N	-%	N	%	N	%
1	Maternity Pain						
	Level Scale	0	0	0			0
	0 (Painless)	0	0	0	0	0	0
	1-3 (mild	8	40	0	0	8	20
	pain)		40		20	10	20
	4-6 (moderate pain)	8	40	4	20	12	30
	7-9 (Great	2	10	12	60	14	35
	Pain)	2	10	4	20	6	1.5
	10 (Pain Was Excruciating)	2	10	4	20	6	15
Total	Exclucianing)	20	20	100	20	40	100

Category	N	Mean	P
Before music	20	26.9500	0.352
therapy After music	20	18.4500	0.115
therapy			

The results of the data normality test before Islamic religious music used the Shapiro-Wilk test $p=0.352\ (p>0.05)$, it was concluded that the data were normally distributed. The results of the data normality test after doing Islamic religious music therapy using the Shapiro-Wilk test $p=0.115\ (p>0.05)$, it is concluded that the data is normally distributed. The results of data normality test calculations can be seen in the attachment.

After the normality test is carried out and the results are normally distributed, a paired t-test can be done. The results of the t-test, namely the results of the paired test-test showed p=0.000 (p <0.05) and t count = 11,768> from t table = 9,200 which proved that there was an effect of giving Islamic religious music on the level of labor pain in mothers who gave birth for reduce labor pain.

CONCLUSION

The results showed that the pain scale before being given Islamic religious music therapy to 20 patients in the pretest treatment group experienced moderate pain scale, severe pain scale and very severe pain scale. From 20 respondents, there were 2 (10%) moderate pain, 10 (50%) severe pain and 8 (40%) very severe pain. The results showed that the pain scale after being given treatment, namely Islamic religious music therapy during posttest in the treatment group, on average decreased with mild pain 8 (40%), moderate pain 8 (40%), severe pain 2 (10%) and very severe pain 2 (10%). The results of statistical tests with paired t-test for samples in one group (paired sample test) showed the value of p = 0.000 (p <0.05) and t count = 11.768> t table 9.200 which proved that there was a significant effect between before and after giving Islamic religious music on the level of

anxiety in mothers with childbirth pain at the Sawit Seberang Public Health Center, Palm Seberang District, Langkat Regency. Based on the results of the data, it can be concluded that there are changes that occur after performing Islamic religious music such as feeling comfortable, relaxed, relaxed and reducing labor pains.

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