



APPLICATION OF Q-REST (QUR'AN RECITATION FOR EMOTIONAL STRESS THERAPY) FOR MOTHERS IN LABOR: A CASE REPORT

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ABSTRACT

Childbirth is an experience that has physical, social, and psychological impacts. One of the psychological changes that occur in pregnant women is the emergence of anxiety. The purpose of this case study is to explain the effect of Al-Qur'an murottal therapy in reducing anxiety levels in mothers giving birth. This study used a quasi-experimental method. The research instrument used the Perinatal Anxiety Screening Scale (PASS) questionnaire to evaluate the pre-test and post-test given intervention. The PASS questionnaire has been proven to be valid (validity value 0,4–0,7) and has very good reliability with Cronbach's Alpha 0,98. The data was analyzed descriptively by comparing anxiety scores before and after therapy and then calculating the percentage reduction in anxiety. The results of the PASS scale before the Al-Qur'an murottal therapy at the first meeting with a score of 35 (severe anxiety), while after the Al-Qur'an murottal therapy at the first meeting for 30 minutes obtained a PASS score of 29 (moderate anxiety). At the second meeting the results of the PASS before the Al-Qur'an murottal therapy with a score of 28 (moderate anxiety), while after the Al-Qur'an murottal therapy with a PASS score of 18 (moderate anxiety). This study provides information on how to reduce non-pharmacological anxiety levels with Al-Quran murottal therapy with Surah Ar-Rahman.

Keywords: anxiety; maternity mothers; murottal al-qur'an

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INTRODUCTION

Pregnancy is a physical process characterized by highly complex interactions and significantly increased sensitivity. When a woman becomes pregnant, the line between health and illness becomes thinner (Karnina & Ismah, 2021). Pregnancy is a naturally occurring physiological event. Pregnancy occurs when a woman reaches reproductive age, has healthy reproductive organs, and has had sexual intercourse (Firmansyah & Sulastris, 2025). Pregnancy is a physiological condition accompanied by significant physical and psychological changes. One psychological aspect frequently experienced is anxiety (Khodijah et al., 2025).

Childbirth is a significant and hopeful moment, but it can also be one of the most challenging experiences for a mother. Labor pain, while a natural part of the birthing process, is often a source of significant fear and anxiety (Suba & A'naabawati, 2025). Giving birth is one of the most frightening events in a woman's life, so it is crucial to receive proper care to reduce negative views about childbirth, especially for women who have never given birth before. Childbirth is an experience that has physical, social, and psychological impacts. One of the psychological changes that occurs in pregnant women is anxiety, as one of the potential events during childbirth is death (G. I. Safitri et al., 2025).

Anxiety is an unpleasant condition caused by the body's stress response, influenced by the autonomic nervous system. Anxiety can be described as a nonspecific form of fear characterized by feelings of restlessness and worry about an unexpected threat (A. D. Safitri et al., 2025). Anxiety is

a form of negative emotion that arises when a mother feels worried about various things. This can include changes experienced during pregnancy, the development of the baby in the womb, and the upcoming birth process (Halil & Puspitasari, 2023). Factors that can influence anxiety in pregnant women are divided into two categories: internal and external. Internal factors include beliefs about the birth process and emotional state before giving birth. External factors include information received and support from medical personnel and the husband (Asmariyah et al., 2021).

Unmanaged anxiety can cause both physical and mental changes, ultimately increasing sympathetic nervous system activity. This can result in increased heart rate, respiratory rate, blood pressure, cold sweats, nausea, urinary problems, and overall reduced energy levels in pregnant women (Rahmat & Puluhalawa, 2025). Anxiety can be addressed through pharmacological and non-pharmacological therapies. One non-pharmacological therapy that can help reduce anxiety levels is listening to Qur'anic recitations (Nur Islamyah et al., 2024). Qur'an recitation is a type of music that has a positive effect on listeners (Wibowo et al., 2025).

Qur'an recitation therapy is a healing method and a way for Muslims to overcome physical, spiritual, and social problems. By listening to and reciting the Qur'an scientifically, one can experience calm, increase relaxation, and reduce negative disturbances in the body and soul. It can also trigger the release of endorphins in the brain, which have a positive impact on mood and memory. Focusing on positive thoughts and experiences can distract from negative thoughts and help reduce stress, anxiety, and depression. Thus, this therapy can be a non-pharmacological alternative (Hirza Nur, 2024).

Numerous verses in the Qur'an explain Allah's compassion for His servants. One example is Surah Ar-Rahman, which bestows immeasurable blessings, both in this world and the hereafter. Listening to audio recitations of the Qur'an from Surah Ar-Rahman can reduce tension in the reflex nerves, help calm the mind, and increase feelings of comfort. This can help reduce and manage anxiety. Non-pharmacological therapy, such as listening to audio recitations of Surah Ar-Rahman, has become a method for managing anxiety during prenatal care and offers many benefits, such as being easy and self-administered (Ayu Puspitasari et al., 2024). The purpose of this case study is to explain the effect of Qur'an recitation therapy on reducing anxiety levels in women during labor.

METHOD

This study employed a quasi-experimental method. The study consisted of a case study of Mrs. E. This study began with a comprehensive assessment to identify nursing problems, followed by intervention. This design aimed to determine the effect of Qur'an recitation therapy on maternal anxiety levels during labor. Subjects were women in labor who met the inclusion criteria: those in the active phase of the first stage of labor, willing to participate, and not experiencing hearing loss or severe psychological disorders. The research instrument used the Perinatal Anxiety Screening Scale (PASS) questionnaire to evaluate the pre-test and post-test interventions. The Perinatal Anxiety Screening Scale (PASS) questionnaire is a specific instrument used to assess maternal anxiety during the perinatal period, including labor. The PASS scale is categorized as: 0-9 (no anxiety), 10-16 (mild anxiety), 17-29 (moderate anxiety), and 30-63 (severe anxiety). The PASS questionnaire has been tested for validity and reliability, with validity results in the range of 0.4-0.7 and reliability with a Cronbach's Alpha value of 0.98, indicating very good reliability.

The variables in this study consisted of the independent variable, Qur'an recitation therapy, and the dependent variable, anxiety level. Before administering the Al-Qur'an murottal therapy intervention, informed consent was first provided to the patient who would receive the intervention. After the patient agreed, a pre-test was conducted to measure the level of anxiety using PASS. Next, the subject was given an intervention in the form of Al-Qur'an murottal therapy by listening to the recitation of Surah Ar-Rahman for 30 minutes. After the intervention was completed, the level of

anxiety was measured again using PASS as a post-test. The Al-Qur'an murottal therapy was administered in 2 sessions. The measurement data were then analyzed descriptively by comparing anxiety scores before and after therapy, and calculating the percentage reduction in anxiety that occurred. This study has taken into account the approval of the patient. The entire research process was carried out with privacy, comfort, and safety in mind without causing any risks or side effects.

RESULT

This case study was conducted on patient Mrs. E is 26 years old G1P0A0 39 + 1 weeks and is Muslim, the patient came to with complaints of more frequent and strong cramps. During the assessment, Mrs. E said that she was anxious about her condition and her baby because this was the first time Mrs. E gave birth and felt tightness. For vital signs examination, the results obtained were compos mentis consciousness, blood pressure 125/80 mmHg, pulse 84 x / minute, respiratory rate 20 x / minute, temperature 36.6 C, SPO2 97%, fetal heart measurement 143 x / minute, uterine fundus height 3 fingers below the navel, VT examination 1 cm loose. The results of the Leopold examination obtained data Leopold 1: the uterine fundus felt hard and round, Leopold 2: the fetal back was felt on the left side of the abdomen, Leopold 3: the fetal head was felt above the pubic symphysis, Leopold 4: the fetal head was felt to have entered the pelvis. Laboratory results on June 24, 2025:

Table 1.
Laboratory Examination

Inspection Name	Inspection Result	Unit
Hemoglobin	11.9	gr/dL
Erythrocytes	4.40	10 ⁶ /uL
Hematocrit	36.7	%
Leukocytes	7.1	10 ³
Platelets	180	10 ³

The Standar Diagnosa Keperawatan Indonesia (SDKI) establishes a diagnosis of anxiety (D.0080) related to a situational crisis, characterized by feelings of worry about the consequences of the situation, and the patient appears restless and tense (SDKI Working Group Team, DPP PPNI, 2017). The intervention to manage anxiety is Qur'anic recitation therapy with Surah Ar-Rahman, conducted twice a day for 30 minutes.

Table 2.

Perinatal Anxiety Screening Scale (PASS) results before and after Al-Qur'an recitation therapy with Surah Ar-Rahman

Inspection Meeting	PASS Before	PASS After	Duration (minutes)
Meeting 1	35	29	30
Meeting 2	28	18	30

Based on table 2, the results of the PASS scale before the Al-Qur'an murottal therapy at meeting 1 were 35 (severe anxiety), while after the Al-Qur'an murottal therapy at meeting 1 for 30 minutes, the PASS score was 29 (moderate anxiety). At meeting 2, the PASS results before the Al-Qur'an murottal therapy were 28 (moderate anxiety), while after the Al-Qur'an murottal therapy were 18 (moderate anxiety).

DISCUSSION

This is consistent with research conducted by (Lastaro et al., 2023) which found a difference in anxiety levels before and after Qur'an recitation therapy. The p-value was significant ($p < 0.000$), proving that Qur'anic recitation therapy was effective in reducing anxiety levels in precesarean section patients. Furthermore, research by (Hudiyawati et al., 2022), with a p-value < 0.05 , showed a significant difference between anxiety levels before and after Qur'anic recitation therapy. Statistical test results showed a significant difference in average anxiety scores before and after the intervention. This study demonstrated that Qur'an recitation therapy was effective in reducing anxiety levels. The study (Idiana et al., 2025) presented statistical test results showing a significant

difference in average anxiety scores before and after the intervention. This study indicates that Qur'an recitation therapy is effective in reducing anxiety levels.

This research also aligns with (Ayu Rahmadhani et al., 2021), with the Wilcoxon test showing a p-value of 0.000 ($p < \alpha$), indicating that Qur'an recitation therapy had an effect on anxiety levels in pregnant women in the third trimester. This is in line with research conducted by (Priyatama et al., n.d.), which found that before the Surah Ar-Rahman recitation therapy, most patients experienced moderate anxiety. After the intervention, there was an increase in the number of patients with mild anxiety, indicating a significant decrease in anxiety.

In a study (Rachman, 2025) Qur'an recitation therapy was proven effective in reducing anxiety, improving sleep quality, and increasing patient calm and comfort in hemodialysis patients. This also aligns with research conducted by (Siagian & Ratih, 2025), which found that listening to Qur'an recitation therapy significantly affected pregnant women in their third trimester approaching labor in the Payung Sekaki Community Health Center in Pekanbaru City, with a p-value of 0.001 ($p < 0.05$).

Listening to Qur'an recitation engages the autonomic nervous system, which regulates the parasympathetic response, promoting calmness, relaxation, and a calm heart rate, breathing, and pulse (Megasari et al., 2023). One surah in the Qur'an that has a therapeutic effect is Surah Ar-Rahman, which consists of 78 verses, including a verse repeated 31 times. Repetition of this verse can also serve as a form of meditation, focusing the mind on a single object with full awareness. One can feel how this process affects the body, leading to relaxation and healing (Amalia, 2020). In the study (Hamka et al., 2025) the results showed that the majority of patients were initially at a moderate level of anxiety (23 patients, 76.67%), which then became a mild level of anxiety (19 patients, 63.33%) after being given therapy.

CONCLUSION

Providing Qur'an recitation therapy with Surah Ar-Rahman can reduce anxiety levels in women during labor, from severe to moderate. This study provides information on how to reduce anxiety levels non-pharmacologically through Qur'an recitation therapy with Surah Ar-Rahman for healthcare workers, families, and patients.

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