

The Effect Of Hypnobirthing On The Anxiety Level Of Pregnant Women In Trimester III

by Khairunnisa Situmorang

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The Effect Of Hypnobirthing On The Anxiety Level Of Pregnant Women In Trimester III

Khairunnisa Situmorang¹, Marta Imelda²

¹ Midwifery Study Program, Sekolah Tinggi Ilmu Kesehatan Mitra Husada Medan

² Midwifery Study Program, Sekolah Tinggi Ilmu Kesehatan Columbia Asia Medan

*Corresponding Author: khairunsitumorang@gmail.com

Abstract ; Every pregnant woman will experience physical and psychological changes that can trigger anxiety in the mother. Anxiety that occurs in third trimester pregnant women if not handled properly can have a negative impact on both the mother and the fetus. Hypnobirthing is a technique that can reduce anxiety in pregnant women. This study aims to determine the effect of hypnobirthing on the anxiety level of pregnant women in the third trimester in the work area of the Romana Clinic. This type of research is Quasy Experimental with a pretest and posttest control group design. This research was conducted at the Romana Clinic. A sample of 30 pregnant women in the third trimester who met the inclusion criteria using the accidental sampling method, the independent variable of this study was hypnobirthing and the dependent variable was the level of anxiety of pregnant women in the third trimester and used the HARS questionnaire as an anxiety measure. The data analysis technique used the Wilcoxon test with the SPSS program. From the results of the Wilcoxon test, all pregnant women experienced a decrease in anxiety after being given treatment in the form of Hypnobirthing with a p value of 0.01 smaller than 0.05 so it was said that there was an effect of Hypnobirthing on the anxiety level of third trimester pregnant women.

Keywords: Hypnobirthing, Anxiety, Pregnant Woman Trimester III

INTRODUCTION

In the third trimester of pregnancy a number of fears arise, when pregnant women tend to feel anxious about the baby's life and their own life. Feelings of fear and anxiety experienced by pregnant women, if excessive, can cause stress. (Sondakh, 2013). In Indonesia, this method began to be disseminated in 2003 by Lanny Kuswandi who studied Marie Mongan's Hypnobirthing method in Australia. This Hypnobirthing method has been applied in several provinces, one of which is North Sumatra province.

In North Sumatra province, especially in Pancur Batu District, Deli Serdang Regency, the Hypnobirthing method has been applied to pregnant women and mothers giving birth in several Clinic, one of which is at the Romana Clinic. Based on data from the Romana Clinic, in 2019 there were (466 people) pregnant women, in 2020 there were (485 people) pregnant women and in 2021 there were (454 people) mothers.

Hypnobirthing as an Effort to Lower Anxiety in Pregnant Women, the results of anxiety of pregnant women before hypnobirthing were measured by the HARS questionnaire, the results were 33% experiencing mild anxiety, 44% experiencing moderate anxiety, and 22% experiencing severe anxiety. After hypnobirthing, pregnant women's anxiety decreased, namely 44% did not experience anxiety, 22% experienced mild anxiety, and 22% experienced moderate anxiety (Luluk, 2020)

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* Khairunnisa Situmorang, khairunsitumorang@gmail.com ---

RESEARCH METHOD

This type of research is Quasi Experiment and the design used in this study is Pre Post Control Group Design, which is trying to determine whether a treatment affects the results of a study. This research was conducted in the work area of the Romana Clinic, Pancur Batu District, Deli Serdang Regency.

RESULTS AND DISCUSSIONS

Result

Univariate analysis was made based on the distribution of descriptive statistics with a sample of 30 respondents divided into two, namely 15 respondents of pregnant women who were given treatment and 15 respondents of pregnant women in the control/comparison group at the Romana Clinic. This analysis was carried out on the Independent variable and the Dependent variable.

Table 1. Distribution of respondents in the control group based on Mother's Age

Mother's age	Total	Percentage
16-19 years	2	13%
20-35 years	13	87%
Total	15	100%

Based on the table above shows that the highest number of pregnant women aged 20-35 years was 13 (87%) while the lowest was 16-19 years old as many as 2 (13%).

Table 2. Distribution of respondents in the treatment group (hypnobirthing) based on Mother's Age

Mother's age	Total	Percentage
16-19 years	3	20%
20-35 years	12	80%
Total	15	100%

Based on the table above, the highest number of pregnant women aged 20-35 years was 12 (80%) while the lowest was 16-19 years old as many as 3 (20%).

Table 3. Distribution of respondents in the control group based on pregnancy age

Pregnancy Age	Total	Percentage
<35 weeks	5	33%
35-40 weeks	10	67%
Total	15	100%

Based on the table above shows that the highest gestational age of pregnant women is 35-40 weeks as many as 10 (67%) while the lowest gestational age is <35 weeks as many as 5 (33%).

Table 4. Frequency distribution of third trimester pregnant women in the treatment group (hypnobirthing) based on Gestational Age

Pregnancy Age	Total	Percentage
<35 weeks	4	27%
35-40 weeks	11	73%
Total	15	100%

Based on the table above shows that the highest gestational age of pregnant women is 35-40 weeks as many as 11 (73%) while the lowest gestational age is <35 weeks as many as 4 (27%).

Table 5. Distribution of respondents in the control group based on Parity

Parity	Total	Percentage
Primigravida	4	27%
Multigravida	11	73%
Total	15	100%

Based on the table above shows that the number of pregnant women with the highest parity is Multigravida as many as 11 (73%) and the lowest number of parity is Primigravida as many as 4 (27%).

Table 6. Distribution of respondents in the treatment group (hypnobirthing) based on Parity

Paritas	Jumlah	Percentage
Primigravida	6	40%
Multigravida	9	60%
Total	15	100%

Based on the table above shows that the highest number of pregnant women with parity is Multigravida as many as 9 (60%) and the lowest number of parity is Primigravida as many as 6 (40%).

Table 7. Distribution of respondents Anxiety Level of Pregnant Women Trimester III without given hypnobirthing at Romana Clinic

Treatment	Anxiety Level	Pretest		Postest	
		Total	Percentage	Jumlah	Percentage
Without Hypnobirthing	No anxiety	0	0%	0	0%
	Mild Anxiety	5	33%	7	47%
	Moderate Anxiety	7	47%	7	47%
	Severe Anxiety	3	20%	1	6%
	Severe Anxiety	0	0%	0	0%
	Total	15	100%	15	100%

Source: Primary Data, 2022

Based on the table above shows that of the 15 pregnant women respondents, the highest level of anxiety before / without treatment (pretest) was moderate anxiety totaling 7 (47%) and the lowest anxiety was severe anxiety totaling 3 (20%). While the level of anxiety after no treatment (posttest) the highest anxiety is mild and moderate anxiety which amounted to 7 (47%) and the lowest anxiety is severe anxiety as much as 1 (6%).

Discussion

1) Anxiety level of pregnant women without being given hypnobirthing

Anxiety in mothers is due to inappropriate maternal perceptions about the dangers of pregnancy. Pregnancy and childbirth are perceived as a frightening and painful process. Some mothers also feel traumatized by previous pregnancies so they feel unprepared to face the process of pregnancy and childbirth again. This can make pregnant women feel anxiety until they are about to give birth.

2) Data analysis of the effect of hypnobirthing on the anxiety level of third trimester pregnant women.

In this study, it is known that there is a significant effect with hypnobirthing treatment on pregnant women. This can be seen from the results of the analysis of the T-test statistical test obtained a value of $p = 0.01 < 0.05$ so that there is an effect of hypnobirthing on the anxiety level of third trimester pregnant women. This is because pregnant women who are given hypnobirthing feel calm, relaxed and comfortable so that they are able to think about positive things and are able to reduce anxiety. Research Results: From the results of the Wilcoxon test, the anxiety level of the control group at pretest and posttest obtained a significance value of 0.083, while in the experimental group the significance value before and after doing regular hypnobirthing exercises was 0.000. Based on the

Mann Whitney test, the significance value of the control and experimental groups after the intervention is 0.000.

CONCLUSION

There is an influence on the anxiety level of pregnant women which is very significant between before treatment and after hypnobirthing treatment.

SUGGESTION

The author is very grateful to all those who have contributed to this research. Especially among higher education institutions in the implementation of the Tridarma of Higher Education. Hopefully we can collaborate in development in the health sector for the benefit of the community.

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