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Application of Relaxation Techniques And Hypnobirthing Methodsto Reduce Anxiety During Birth in Novi lintas east district midwifery clinic Panyambungan District Christmas Mandailing Year 2024

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Article Info **ABSTRACT** The purpose of this study was to evaluate the effectiveness of the Keywords: Hypnobirthing Method, application of relaxation techniques and hypnobirthing methods in Anxiety, reducing anxiety levels in laboring mothers at the Novi Midwife Clinic **During Childbirth** Lintas Timur, Panyabungan District. This study used a descriptive design with a cross-sectional approach, involving 41 randomly selected respondents. Data were collected through questionnaires measuring anxiety levels before and after the application of relaxation and hypnobirthing techniques, and analyzed using the Wilcoxon test to determine significant differences. The results showed that there was a significant decrease in the anxiety level of laboring mothers after the application of relaxation and hypnobirthing techniques, with a p value = 0.003 (p < 0.05). Before the intervention, the average anxiety score was 44.5 (moderate anxiety), while after the intervention, the average score decreased to 37.0 (mild anxiety), indicating a 16.8% decrease in anxiety. The implications of the results of this study indicate that the application of relaxation and hypnobirthing techniques can be an effective alternative intervention in midwifery practice to help laboring women overcome anxiety, so that the labor process can take place more smoothly and comfortably. This study also provides a basis for health workers to integrate this technique in childbirth preparation programs for pregnant women. This is an open access article **Corresponding Author:** under the CC BY-NClicense Helmi Wardah Nasution Akademi Kebidanan Madina Husada Madina, Indonesia helmiwrdahnasution@gmail

INTRODUCTION

Anxiety during pregnancy is a common problem faced by many expectant mothers, with prevalence varying between 10% to 30% of the pregnant population worldwide. According to recent studies, around 20% of pregnant women experience significant levels of anxiety, which can negatively impact maternal and fetal health, as well as the labor process itself. High anxiety can lead to complications such as premature labor, increased pain during childbirth, and can even affect the bonding between mother and baby after birth. Therefore,

Application of Relaxation Techniques And Hypnobirthing Methodsto Reduce Anxiety During Birth in Novi lintas east district midwifery clinic Panyambungan District Christmas it is important to seek effective interventions to reduce this anxiety and improve the birth experience (Sundariningsih et al., 2021).

Various studies have shown that relaxation techniques and hypnobirthing methods can significantly reduce anxiety in pregnant women. A study by Febrianty (2023) found that 37.5% of 48 respondents experienced a decrease in anxiety after applying hypnobirthing. Another study by Wulandari (2017) also showed that the average anxiety score of third trimester primigravida mothers decreased after hypnobirthing intervention, with a p value <0.05, which indicates statistical significance. In addition, Khasanah (2022) reported that almost 90% of respondents experienced a decrease in anxiety after using relaxation techniques. These findings support the use of relaxation techniques and hypnobirthing as effective methods to reduce anxiety in laboring mothers.

Childbirth causes pain, fear, anxiety and prolonged labor. Long labor is one of the factors causing the high maternal mortality rate in Indonesia, which is 5%. One of the non-pharmacological methods to speed up the labor process is hypnobirthing, by giving positive suggestions, it will make mothers feel safe and comfortable and enjoyable in facing the labor process (Masritna, 2020).

Anxiety is a normal condition that occurs in various circumstances, such as growth, change and new experiences. Anxiety and feelings of fear that have no clear cause and are not supported by the existing situation. One source of anxiety stressors is pregnancy. In Indonesia there are 28.7% of pregnant women who experience anxiety facing labor. Anxiety is more common in primigravida mothers. Anxiety in primigravida mothers can arise in the third trimester. Anxiety has a negative impact on pregnant women such as stunted fetal growth, weakening uterine muscle contractions, the risk of giving birth to premature babies, and affects the growth and development of children (Siti Aminah, 2022).

According to the Word Health Organization (WHO) reports that the prevalence of pregnant women worldwide who experience anxiety is 41.8%. In East Java in 2020, 37.9% of pregnant women experienced anxiety. Based on the results of the study, it is known that around 118 laboring women 75% of them experienced very high anxiety during the active first stage. Of these experienced anxiety and expressed fear of pregnancy and the labor process that would take place in both primiparous and multiparous mothers.(Bengkala District Health Office, 2022).

In some countries such as the United States, a non-pharmacological method has been developed to deal with labor, namely the hypnobirthing method. This method is a natural method used to eliminate fear, panic, tension and other pressures that haunt mothers during labor, Hypnobirthing allegedly provides many benefits because it trains pregnant women to always relax, be calm and stabilize emotions. Hypnobirthing aims to allow mothers to give birth comfortably and relieve the pain of childbirth without the help of any anesthetic (Widiawati, 2019).

The United Nations International Children's Emergency Fund (UNICEF) states that the maternal labor process will face a number of problems. The problems experienced by mothers in labor are around 12,231,124 million people out of 30% of them, most mothers experience anxiety due to their first pregnancy (Sitepu S., 2016).

This is in accordance with the existing literature related to the hypnobirthing method which states that it will make mothers relaxed, comfortable and calm and reduce anxiety in laboring mothers at stage I. Hypnobirthing teaches laboring mothers at stage I to carry out natural relaxation techniques when contractions occur (Sari, LP, & Tritik, SM., 2021). Anxiety is a sense of worry, nervousness, or discomfort about something with an uncertain outcome and can appear together, predispose or cause depression. (Kajdy et al., 2020).

According to SDKI data (Indonesian demographic and health survey), 2023 While the Neonatal Mortality Rate (Neonatal Mortality Rate) is 9.30 among 1,000 live births in Indonesia, meaning that there are 9-10 babies who die before the age of 1 child mortality rate aged 1-4 years (Child Mortality Rate) of 2.98, meaning that there are 3 child deaths aged 1-4 per 1,000 Pain that arises during normal labor primigravida mothers encourage using painkillers such as analgesics and sedatives. One of the nonpharmacological methods to reduce the intensity of pain during labor is the Hypnobirthing method (AkhiriSaleh, 2020).

The maternal mortality rate in North Sumatra (sumut) reached 119 cases and the newborn mortality rate was 299 cases. Therefore, the North Sumatra provincial government (pemprov) continues to implement. Medan City ranked third with an amount of 6.87% or there were 9 cases. Labuhanbatu recorded 10 cases and Deliserdang 16 cases. Meanwhile, for infant mortality cases, Medan City occupied the first position with a total of 65 cases, followed by Gunungsitoli with 39 cases and South Nias with 34 cases, (Alwi, 2023).

Based on an initial survey conducted by the research on October 16, 2023 by asking data about patients who gave birth to perform "Knowledge of Hypnobirthing Methods and Relaxation Techniques to Reduce Anxiety During Childbirth" at midwives at the Novi Midwife Clinic Lintas Timur, Panyanbungan District, Mandailing Natal Regency, the research obtained data and counted the number of pregnant women who were pregnant who wanted to give birth and did hypnobirthing, so that the data obtained shows that the total number of mothers who do hypnobirthing relaxation to reduce anxiety during childbirth as many as 10 pregnant women 9 pregnant women who successfully do hypnobirthing, and 1 person who does not succeed by doing the hypnobirthing method because the mother is too anxious about the birth of her baby until her hypertension gets higher and results in the failure of hopnobirthing teraphi.

Although many studies have been conducted on the effectiveness of hypnobirthing and relaxation techniques, there is still a lack of research focusing on the application of these methods in local midwifery clinics, particularly in the Panyabungan area. Existing studies are often conducted in large hospitals or more developed health centers, so the results may not be fully applicable to the context of smaller, less accessible midwifery clinics.

With increasing rates of anxiety among pregnant women and its significant impact on maternal and infant health, this study is of particular importance. Given that many pregnant women in remote areas may not have access to adequate mental health services, the application of relaxation and hypnobirthing techniques in local midwifery clinics may provide a practical and effective solution. This study aims to fill this gap by evaluating the application of relaxation and hypnobirthing techniques at the Novi Lintas Timur Midwife Clinic, and providing recommendations for better midwifery practice in managing maternal anxiety.

METHODS

The type of research used is a descriptive study with a cross sectional approach which aims to identify. Application of Relaxation Techniques and Hypnobirthing Methods To Reduce Anxiety During Birth In Novi Lintas East District Midwefery Clinic Panyabungan District Christmas Mandailing Year 2024 41 people. With the slovin sampling formula, a sample 41 respondents was obtained. The study was conducted at the Novi Midwife Clinic in December- January 2024. Before the data is analyzed, validity and reliability tests are carried out. Data analysis used univariate and bivariate analysis. Univariate analysis is to get an idea of the frequency distribution of respondents. And Bivariate analysis is an analysis that has The purpose is to test the difference and measure the relationship between two research variables, namely between the independent variable and the dependent variable. Bivariate analysis in this study used the chi-square test with a confidence level of 95%. Guidelines in accepting hypotheses. If the probability value(p) ≤0.05 then H0 is rejected, if (p) >0.05 then H0 fails to be rejected. Data is presented in tabular form.

Research Design

This study used a descriptive design with a cross-sectional approach. This design was chosen to evaluate the relationship between the application of relaxation techniques and hypnobirthing methods with the anxiety level of laboring mothers at one specific point in time. With this approach, researchers can collect data simultaneously from the respondents involved, thus enabling faster and more efficient analysis of the effect of the intervention on anxiety.

Inclusion and Exclusion Criteria

The inclusion criteria in this study are:

Pregnant women who are in the third trimester (28 weeks and above).

Mothers who are willing to take part in relaxation and hypnobirthing technique sessions.

Mothers who do not have a history of severe mental disorders.

Exclusion criteria include:

Pregnant women with medical complications that may affect the delivery process.

Mothers who are on medication for anxiety disorders or depression.

Mothers who could not communicate well or did not understand the instructions given.

Data Analysis

The collected data were analyzed using descriptive and inferential statistical methods. Descriptive analysis was used to describe the characteristics of respondents and anxiety levels before and after the intervention. To test the difference in anxiety levels before and after the application of relaxation and hypnobirthing techniques, the Wilcoxon test was used. The statistical software used in data analysis was SPSS (Statistical Package for the Social Sciences) version 25.0. The results of the analysis were considered significant if the p value was <0.05. Data were presented in tables and graphs to facilitate interpretation.

RESULTS AND DISCUSSION

To identify the relationship between pregnant women's anxiety levels about having sex during pregnancy, researchers used questionnaire sheets. The following will be described about the results of the study, namely the characteristics of respondents, Application of Relaxation Techniques and Hypnobirthing Methods To Reduce Anxiety During Birth In Novi Lintas East District Midwefery Clinic Panyabungan District Christmas Mandailing Year 2024

Analisis Univariat

Table 1. Frequency Distribution of Respondent Characteristics based on Novi Lintas Timur Midwife Clinic in 2024

| NO | Characteristics of Respondents | N | % |
|----|--------------------------------|----|-------|
| | Age | | |
| 1 | < 20 Tahun | 3 | 7,3 |
| 2 | 21 – 35 Tahun | 36 | 87,8 |
| 3 | >35 Tahun | 2 | 4,9 |
| | Jumlah | 41 | 100,0 |
| | Education | N | % |
| 1 | SD | 6 | 14,6 |
| 2 | Junior | 12 | 29,3 |
| 3 | SMA | 17 | 41,5 |
| 4 | Akademi | 6 | 14,6 |
| | Jumlah | 41 | 100,0 |
| | Resources | N | % |
| 1 | Mass media | 2 | 4,9 |
| 2 | Print | 23 | 56,1 |
| 3 | Health Workers | 13 | 31,7 |
| 4 | Family | 3 | 7,3 |
| | Jumlah | 41 | 100,0 |
| | Paritas | | |
| 1 | Primipara | 26 | 63,4 |
| 2 | Scundipara | 11 | 26,8 |
| 3 | Multipara | 4 | 9,8 |
| | Jumlah | 41 | 100,0 |
| | Anxiety Level | | |
| 1 | No anxiety | 5 | 12,2 |
| 2 | Mild anxiety | 8 | 19,5 |
| 3 | Moderate anxiety | 18 | 43,9 |
| 4 | Severe anxiety | 10 | 24,4 |
| | Jumlah | 41 | 100,0 |
| _ | Work | 0- | a= - |
| 1 | IRT | 27 | 65,9 |
| 2 | Private Employees | 4 | 9,8 |
| 3 | Self employed | 5 | 12,2 |
| | | | |

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| Jumlah | 41 | 100,0 |
|-----------|----|-------|
| 5 Laborer | 3 | 7,3 |
| 4 PNS | 2 | 4,9 |

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Examine the relationship of independent variables including age, education, sources of information, parity, with the dependent variable, namely the level of anxiety of pregnant women during sexual intercourse, bivariate analysis uses the chi- square test with α =0.05 which is described as follows:

Tabel 2. Results of Analysis of Characteristics of Respondents with Anxiety of Pregnant

| NO | Age Mother | F | % | F | % | F | % | F | % | |
|----|-------------------|---|------|---|------|----|------|-----|------|-------|
| 1 | <20Tahun | | | | | | | | | |
| | | 0 | 0 | 2 | 4,9 | 0 | 0 | 1 | 2,4 | |
| 2 | 20-35 Tahun | 5 | 12,2 | 4 | 9,8 | 18 | 43,9 | 9 | 22,0 | 0,019 |
| 3 | >35 Tahun | 0 | 0 | 2 | 4,9 | 0 | 0 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Education | | | | | | | | | |
| 1 | SD | 0 | 0 | 1 | 2,4 | 2 | 4,9 | 3 | 7,3 | 0,000 |
| 2 | SMP | 0 | 0 | 3 | 7,3 | 7 | 17,1 | 2 | 4,9 | |
| 3 | SMA | 0 | 0 | 4 | 9,8 | 8 | 19,5 | 5 | 12,2 | |
| 4 | Akademi | 5 | 12,2 | 0 | 0 | 1 | 2,4 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Resources | | | | | | | | | |
| 1 | Mass Media | 0 | 0 | 0 | 0 | 2 | 4,9 | 0 | 0 | |
| 2 | Print | 5 | 12,2 | 6 | 14,6 | 9 | 22,0 | 3 | 7,3 | 0,040 |
| 3 | Health Worker | 0 | 0 | 2 | 4,9 | 7 | 17,1 | 4 | 9,8 | |
| 4 | Family | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 7,3 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Paritas | | | | | | | | | |
| 1 | Primipara | 5 | 12,2 | 4 | 9,8 | 14 | 34,1 | 3 | 7,3 | |
| 2 | Scundipara | 0 | 0 | 4 | 9,8 | 3 | 4 | 9,8 | 22,0 | 0,033 |
| 3 | Multipara | 0 | 0 | 0 | 0 | 1 | 2,4 | 3 | 7,3 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Work | | | | | | | | | |
| 1 | IRT | 2 | 4,9 | 5 | 12,2 | 12 | 29,3 | 8 | 19,5 | |
| 2 | Private Employees | 1 | 2,4 | 1 | 2,4 | 2 | 4,9 | 0 | 0 | |
| 3 | Self Employed | 0 | 0 | 0 | 0 | 3 | 7,3 | 2 | 4,9 | 0,022 |
| 4 | Buruh | 0 | 0 | 2 | 4,9 | 1 | 2,4 | 0 | 0 | |
| 5 | Laborer | 2 | 4,9 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |

Women During Sexual Intercourse at Novi Midwife Clinic in Lintas Timur in 2024

It is known that the level of anxiety during childbirth after being given relaxation and hypnobirthing treatment is lower than the level of anxiety before being given relaxation and hypnobirthing treatment.

Indicated by the respective median values, namely 44.5 (Pre) and 37.0 (Post). Before being given treatment, the highest level of anxiety was a score of 49 (severe anxiety) and the lowest was a score of 40 (moderate anxiety). Meanwhile, after being given relaxation and hypnobirthing treatment, the highest level of anxiety was a score of 40 (moderate anxiety) and the lowest score was 26 (mild anxiety).

The results of the statistical test using the Wilcoxon test showed that the p value $(0.003) < \alpha$ (0.05) means that Ho is rejected. so there is a difference in the level of anxiety during childbirth before and after the application of relaxation techniques and hypnobirthing methods. These results prove that there is a significant influence of the application of relaxation techniques and hypnobirthing methods on the level of anxiety in mothers during childbirth at the Novi Midwife Clinic in 2024. These results prove that relaxation techniques and hypnobirthing methods can reduce anxiety levels in mothers during childbirth.

Discussion

Anxiety Level During Childbirth Before Implementing Relaxation Techniques and Hypnobirthing Methods at Novi Midwife Clinic in 2024.

The results of the study showed that before relaxation and hypnobirthing were carried out, there were 4 respondents who had moderate anxiety and 6 respondents who had severe anxiety. This can be caused by the labor process which will cause tension and anxiety, fear of facing the labor process, unable to withstand the cramps, and worry about the condition of the fetus.

The results show high anxiety in mothers giving birth. Anxiety in mothers giving birth is due to the mother's inaccurate perception of the labor process. Childbirth is perceived as a frightening process and causes extraordinary pain. Some mothers feel traumatized because during their first delivery they experienced various difficulties and the pain caused during delivery still lingers in the mother's mind. Some of the things above make pregnant women feel great anxiety before the birth of their baby. (Kuswandi, 2010 in Sariati, et al. 2016). In the labor phase, there is also an increase in anxiety, with increasing anxiety leading to an increase in the intensity of pain. As the labor process progresses, causes pregnant women to feel increasingly anxious and this anxiety causes the pain to become more intense and vice versa. The sensation of pain experienced by the mother in labor comes from pain signals that arise when the uterine muscles contract with the aim of pushing the baby out of the womb. Psychological conditions that often occur in women in the first stage of labor are anxiety and fear of their own sins or mistakes, the emergence of a feeling of tension, fear, anxiety and inner conflicts and the emergence of fear of facing pain and the risk of danger in giving birth to the baby which are obstacles in the birthing process. (Sariati, et al. 2016)

The researcher assumes that this has an impact on the mother's perception of pain and self-control ability regarding the labor process. Mothers who are unable to control the pain they feel during the labor process will find it difficult to control the pain they feel due to the lack of pain management, namely deep breathing relaxation techniques. Cervical opening also affects the intensity of pain felt, The more the intensity of pain increases as the cervical opening process progresses, the greater the pain felt. The anxiety felt by the mother begins in stage I of the latent phase until it enters the active phase. This can be seen from the facial expressions when the researcher makes observations, Respondents appeared to hiss, which affected the intensity of pain during labor.

Anxiety Level During Childbirth After Implementation of Relaxation Techniques and Hypnobirthing Methods at Novi Midwife Clinic in 2024

The results of the study after being given relaxation and hypnobirthing, the level of anxiety of mothers giving birth changed, namely that 3 respondents (30%) had mild anxiety, 7 respondents (70%) had moderate anxiety. The decrease in anxiety was caused by the provision of simple relaxation techniques, namely deep breathing techniques.

This study is in line with Febrianty's (2023) research that the majority of pregnant women had mild anxiety levels after undergoing hypnobirthing, amounting to 18 respondents with a percentage (37.5%) of 48 respondents. In line with Wulandari's research, 2017 stated that there was a decrease in anxiety after hypnobirthing, where the average anxiety score of primigravida mothers in the third trimester after hypnobirthing was lower than the average anxiety score before hypnobirthing, reaching a score of (17.6) or falling into the mild anxiety category. From the analysis results, it was found that p = 0.00. This shows that hypnobirthing has an effect on reducing anxiety in primigravida mothers in the third trimester. In addition, the level of anxiety that has the most effect on hypnobirthing is at the mild and moderate levels of anxiety, but there is a decrease in anxiety scores for mild, moderate, severe, and very severe anxiety. At the severe and very severe levels of anxiety there is no effect because the number of respondents is likely insufficient for data analysis.

Hypnobirthing efforts are focused on eliminating fear, tension or anxiety syndromes because the hypnosis used is more focused on forming positive suggestions when the brain is in a calm or relaxed state. The techniques of this method are very easy to learn or practice, including slow breathing patterns and how to release endorphins from the body (the body's natural relaxant) which allows prospective mothers to enjoy a safe and comfortable labor process without anxiety and requires a truly calm and relaxed state (Hernawati & Ardelia, 2018).

This decrease in anxiety levels is because hypnobirthing brings the brain to work on alpha waves, namely waves that have a frequency of 14-30 HZ. In this condition, the brain is in a relaxed, calm state, between conscious and unconscious and almost asleep, when the body begins to release serotonin and endorphin hormones (Sariati et al., 2018). Hypnobirthing therapy is given to pregnant women who are about to give birth and is carried out for 5 minutes after the pregnant woman feels calm, then continued for up to 30 minutes (Marbun et al., 2019).

Mothers who are given hypnobirthing experience a decrease in anxiety to no anxiety compared to mothers who are not given hypnobirthing. This is because mothers who are given hypnobirthing feel more relaxed, comfortable and calm, so that mothers are able to face the labor process comfortably and apply the suggestions that have been given when hypnobirthing is done. Therefore, mothers who are given hypnobirthing will feel calmer, more comfortable and will not experience anxiety until the mother gives birth.

The hypnobirthing relaxation method helps to focus attention based on the belief that women can experience labor through instinct to give birth naturally with calm, comfort, and confidence. This exercise teaches pregnant women to carry out natural relaxation techniques, so that the body can work with all nerves harmoniously and with full cooperation. A series of relaxation techniques ranging from muscle relaxation, breathing relaxation, mind relaxation and planting positive sentences that are carried out regularly and with concentration will cause a relaxed condition in the body so that the body responds to release endorphins that make the mother relax and reduce pain, especially when the brain reaches alpha waves or when resting. In this condition, the body releases serotonin and endorphins so that humans are in a relaxed condition without tension and anxiety. (Sariati, 2016)

According to the researcher's opinion, from the results of the study it is known that the level of anxiety of mothers in labor decreased after relaxation techniques and hypnobirthing were carried out. By providing relaxation techniques and hypnobirthing, it can provide a perfect relaxation effect that can reduce muscle tension and feelings of boredom and anxiety so as to prevent the aggravation of pain stimuli by exhaling slowly. In addition, relaxation training and hypnobirthing can be an alternative intervention used to reduce anxiety in primiparous mothers.

The Effect of Hypnobirthing Method and Relaxation Techniques to Reduce Anxiety During Childbirth at Novi Midwife Clinic in 2024

Based on the results of data analysis, it is known that the level of anxiety during childbirth after being given relaxation and hypnobirthing treatment is lower than the level of anxiety before being given relaxation and hypnobirthing treatment, indicated by the median values of 44.5 (Pre) and 37.0 (Post) respectively. Before being given treatment, the highest level of anxiety was a score of 49 (severe anxiety) and the lowest was a score of 40 (moderate anxiety). While after being given relaxation and hypnobirthing treatment, the highest level of anxiety was a score of 40 (moderate anxiety) and the lowest was a score of 26 (mild anxiety).

The results of the statistical test using the Wilcoxon test obtained that the p value $(0.003) < \alpha$ (0.05) means that Ho is rejected, so there is a difference in the level of anxiety during childbirth before and after the application of relaxation techniques and hypnobirthing methods. These results prove that there is a significant effect of the application of relaxation techniques and hypnobirthing methods on the level of anxiety in mothers during childbirth at the Novi Midwife Clinic in 2023. These results prove that relaxation techniques and hypnobirthing methods can reduce the level of anxiety in mothers during childbirth.

The results of this study are in line with Khasanah's (2022) study which showed that all studies using mothers in labor obtained a p value <0.05 as well as studies using third

trimester pregnant women, so that hypnobirthing significantly reduces anxiety in mothers in labor and in third trimester pregnant women in preparing for childbirth. The results of the study showed that almost all respondents experienced a decrease in anxiety, namely 9 journals (90%), while the study conducted (Asman et al., 2021) found 5 people who did not experience changes in anxiety levels.

The benefits of approaching maternal labor include reducing anxiety and fear before labor which can cause tension, pain, and pain during labor; making the mother feel comfortable, relaxed, and safe before giving birth; making the mother able to control the sensation of pain during uterine contractions; reducing the need for anesthesia; reducing fatigue and greatly saving energy during labor; facilitating the bonding process; increasing endorphin levels in the body to reduce pain during contractions and speed up labor (Imannura & Susanti, 2018). This hypnobirthing method is based on the belief that every woman has the potential to go through the birth process naturally, calmly, and comfortably (without pain). This program teaches pregnant women to be at one with the movements and rhythms of their bodies during the labor process, allowing their bodies and minds to work, and believing that their bodies are able to function as they should so that the pain disappears (Asman et al., 2021).

Hypnobirthing relaxation provides positive suggestions to the mother. This suggestion changes beta brain waves (conscious mind) into alpha brain waves (unconscious mind). In the cerebral cortex, a sensory association process occurs where stimuli are analyzed, understood and arranged into something real so that the brain recognizes the object and the meaning of the presence. Thoughts are the result of a "pattern" of stimulation of various parts of the nervous system at the same time and in a certain sequence, involving the cerebral cortex, thalamus, limbic system and the upper part of the reticular formation of the brain stem. The stimulated areas of the limbic system, thalamus and reticular formation cause a sense of pleasure. In the hypothalamus, there is an increase in beta endorphins derived from the POMC peptide fragment. The secretion of beta endorphins will help the mother increase pain tolerance during labor so that anxiety decreases (Nursalam et al., 2017).

Decrease in anxiety levels due to intervention in the form of hypnobirthing techniques. Hypnobirthing is one way to prepare for a natural, comfortable, and smooth childbirth so that it does not feel painful. Even before a mother is pregnant, if she experiences trauma, it is recommended to undergo self-healing/self-hypnosis, so that all trauma and negative feelings can be eliminated. Generally, hypnobirthing is done starting from the third trimester, although some mothers have experienced it earlier. Hypnobirthing is a natural effort to prepare for childbirth by reprogramming the pain records that have been recorded in the subconscious.

Mothers who do not experience a decrease in anxiety are caused by the lack of concentration of respondents when performing this technique, so that it does not cause a reaction to changes in their anxiety levels. Hypnobirthing requires concentration in its implementation in order to provide optimal results, if the mother's concentration is diverted, then the process of the endorphin stimulation mechanism cannot occur so that the mother cannot feel relaxed, calm and comfortable.

According to researchers, relaxation training and hypnobirthing can be an alternative intervention used to reduce anxiety in mothers during childbirth. The labor process is a physiological thing for every woman. But some women feel afraid because of the pain that arises. Therefore, relaxation techniques and hypnobirthing can be used because they are easy and do not require costs. So that the mother in labor can adapt to her labor. The labor went smoothly, safe mother and baby.

CONCLUSION

This study demonstrates that the application of relaxation techniques and hypnobirthing methods significantly reduces anxiety levels in laboring mothers at the Novi Lintas Timur Midwife Clinic. The findings indicate a significant difference between anxiety levels before and after the intervention, with the statistical analysis showing a p-value < 0.05. Before the intervention, a substantial number of respondents experienced moderate to severe anxiety; however, post-intervention results show a reduction in anxiety levels, with most respondents exhibiting mild anxiety. These findings suggest that integrating relaxation and hypnobirthing techniques into midwifery practices can be an effective approach to improving maternal mental health during childbirth. The study emphasizes the importance of implementing these techniques in childbirth preparation programs and highlights the need for training health personnel to enhance their understanding and skills in applying these methods. Furthermore, the results underline the necessity of focusing on the mental well-being of pregnant women within midwifery and public health practices. The study also suggests that further research is needed to explore the long-term effects of relaxation and hypnobirthing techniques on maternal mental health and child development. However, the study's limitations, such as the small sample size and external factors not considered, should be addressed in future research to improve the generalizability of the results. Overall, this study provides valuable insights into the benefits of relaxation and hypnobirthing techniques, advocating for their broader adoption in midwifery practices to enhance maternal and child health outcomes.

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