

Effect of Murottal Surah Ar-Rahman Therapy on Stress Reduction among Primigravida Women in the Third Trimester

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Abstract:

Stress is one of the most common psychological problems experienced by pregnant women, particularly among primigravid mothers who are expecting their first child. This condition often arises due to anxiety, fear, and negative thoughts regarding pregnancy and childbirth. Internal and external factors, such as emotional changes, family support, and social environment, can influence the mother's psychological well-being. The third trimester is considered the most critical phase, as physical discomfort and emotional instability tend to increase during this period. This study aimed to determine the effect of Murottal Surah Ar-Rahman therapy on stress levels among primigravid pregnant women in their third trimester. The research employed a quantitative pre-experimental design with a one-group pre-test-post-test approach. The sample consisted of 18 primigravid pregnant women selected through purposive sampling. Data were collected using a modified Depression Anxiety Stress Scale (DASS) questionnaire administered before and after therapy. The results showed that before receiving therapy, 5 respondents (27.78%) experienced mild stress and 13 respondents (72.22%) experienced moderate stress. After therapy, 11 respondents (61.11%) had normal stress levels and 7 respondents (38.89%) experienced mild stress. Statistical analysis revealed a significant difference ($p = 0.000$) between pre-test and post-test scores, indicating that Murottal Surah Ar-Rahman therapy effectively reduced stress levels among primigravid pregnant women. The study concludes that listening to Murottal Surah Ar-Rahman can serve as a simple, non-pharmacological intervention to support emotional stability and promote mental health in pregnant women during the third trimester.

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INTRODUCTION

A common problem often experienced by individuals is stress, which affects both their physical and psychological condition. Stress is the result of an interaction between an individual and their environment, where the person perceives the situation as a demand that exceeds their abilities or as a threat to their health. Furthermore, an individual's appraisal plays an important role in determining the level of stress experienced when facing a perceived threatening situation (Aghniya et al., 2025). In the initial stage, the individual evaluates the event they are experiencing, which can be categorized into three types: irrelevant, positive, or stressful. In the next stage, the individual assesses the type of coping strategy that can be used to deal with the situation, which is divided into two approaches: problem-focused coping and emotion-focused coping (Folkman & Lazarus, 1984).

Pregnancy is a natural process essential for human survival. It typically occurs after a woman reaches puberty, marked by the onset of menstruation. Pregnancy is divided into three stages: the first trimester (weeks 1-13), the second trimester (weeks 14-27), and the third trimester (weeks 28-40). When pregnancy is planned, it brings joy and hope, but on the other hand, it requires women to adapt to the changes that occur during pregnancy, both physiological and psychological (Chrisyanna, 2023).

Stress is a phenomenon commonly experienced by every primigravida mother, triggered by worries or negative thoughts about what might happen to her (Rahmayani et al., 2018). The psychological factors experienced by pregnant women are influenced by various aspects, such as internal and external stressors, as well as family support (Rahmadhani et al., 2021). In the third trimester, discomfort may reappear as the mother feels awkward or unattractive, compounded by feelings of sadness due to the impending separation from her baby. Conflicts and problems encountered during pregnancy can affect both the mother's condition and her pregnancy (Annisa & Suprayitno, 2019).

Prenatal stress is common, but it often goes undetected and is considered insignificant during pregnancy (Nuryati & Handayani, 2022). Research shows that 47.7% of normal pregnant women experience severe stress before delivery, 16.9% experience moderate stress, and 35.4% experience mild stress (Zulkahfi, 2020). One factor that can impact the health of pregnant women and their fetuses is stress. Various variables, including maternal age, occupation, social support networks, marital status, and prenatal health issues, can contribute to stress in pregnant women (Marwah et al., 2023). The various psychological pressures experienced by pregnant women in the third trimester appear to be more complex and increased compared to previous trimesters. This is due to the growing pregnancy, which can lead to stress in pregnant women (Renny R & Yuliastanti, 2020). Stress in pregnant women can jeopardize pregnancy by leading to emotional disturbances such as feelings of being disturbed, sad, or worried, which refer to prenatal distress. High levels of stress during pregnancy can potentially lead to complications such as preeclampsia, depression, nausea and vomiting during pregnancy, premature birth, low birth weight, and low APGAR scores (Mizrak & Kabakci, 2020).

Stress management can be done through pharmacological and non-pharmacological approaches. Pharmacological therapies commonly used include antidepressants and anti-anxiety medications, which are effective in reducing stress but carry the risk of dependence and side effects (Marwah et al., 2023). Therefore, non-pharmacological therapies are a more accessible, affordable, and safer alternative. Some non-pharmacological methods that can help reduce stress include relaxation therapies, such as deep breathing and autogenic relaxation, as well as distraction

techniques, such as listening to the Murottal Al-Qur'an or reading books (Kurnanto et al., 2023).

Murottal Al-Qur'an therapy is a non-pharmacological intervention that can be used to alleviate stress in pregnant women. This therapy involves listening to recordings of the Al-Qur'an recited by a skilled reciter (Handriyani et al., 2024). The melodic sound of the recitation has a calming effect on the mind and body, reducing stress hormone levels and promoting relaxation by stimulating the production of endorphins. It can also help distract from feelings of fear, anxiety, and tension (Ovita Rizki, 2024). Furthermore, this therapy has been shown to have a positive impact on physiological parameters, including lowering blood pressure, heart rate, and respiratory rate, as well as reducing brain activity (Setiowati & Asnita, 2020).

Previous research has shown that Murottal Al-Qur'an therapy, specifically Surah Ar-Rahman, has an impact on stress levels in pregnant women. The results of the study showed that before the therapy was administered, 25 respondents (44.6%) experienced moderate stress, while 31 respondents (55.4%) experienced severe stress. After undergoing Murottal therapy, there was a decrease in stress levels, with 35 respondents (62.5%) experiencing mild stress, 15 respondents (26.8%) experiencing moderate stress, and only 6 respondents (10.7%) still experiencing severe stress (Annisa & Suprayitno, 2019).

Based on data from UPTD Puskesmas Gunung Kemala over the past three months, it was found that the number of third-trimester primigravida pregnant women was 27 individuals. Based on the description above, the researcher discusses the use of Murottal in reducing stress among third-trimester primigravida mothers.

RESEARCH METHODS

The research design used in this study is a quantitative research method. This study is a pre-experimental study with a one-group pretest-posttest design, in which the researcher measures the level of stress before and after the implementation of *murottal* therapy. The purpose is to analyze the effect of *murottal* therapy on stress levels among primigravida mothers in their third trimester who experience stress. This research was conducted in the working area of UPTD Puskesmas Gunung Kemala Prabumulih from April to May 2025. The population in this study consisted of 27 third-trimester primigravida pregnant women. The sampling technique used was accidental sampling, due to the specific and limited population and strict inclusion criteria, resulting in a total of 18 respondents. Data were collected through a questionnaire filled out by respondents regarding their stress levels. The study was conducted on third-trimester primigravida pregnant women within the working area of UPTD Puskesmas Gunung Kemala Prabumulih, using a Standard Operating Procedure (SOP) for the *Murottal Surah Ar-Rahman* therapy. During the administration of the therapy, participants were instructed to be in a comfortable position. They were asked to **close** their eyes and focus fully while listening to the audio recitation of *Surah Ar-Rahman*. Respondents listened to the full recitation of *Surah Ar-Rahman* from verses 1 to 98, with an estimated duration of 15 minutes. The frequency of the therapy was 1–3 times per day, and respondents were allowed to continue the therapy even when the researcher was not present. In this study, univariate analysis was conducted to describe the stress levels before and after the *Murottal Surah Ar-Rahman* therapy. Afterward, a bivariate analysis was performed to determine the effect of the therapy on reducing stress among third-trimester primigravida mothers in the working area of UPTD Puskesmas Gunung Kemala Prabumulih. To assess the differences in stress levels before and after the intervention, a Paired Samples T-Test was used if the data were normally

distributed; otherwise, the Wilcoxon test was applied for non-normally distributed data.

RESULTS

Stress Levels in Pregnant Women Before Murottal Surah Ar-Rahman Therapy
Pre-therapy stress levels for Murottal Surah Ar-Rahman can be seen in Table 1.

Table: 1 Pre-Therapy Stress Levels For Murottal Surah Ar-Rahman

Level of Stress	Frequency (F)	Percentage (%)
Mild stress	5	27,78 %
Moderate stress	13	72,22 %
Total	18	100 %

From Table 1 presents the distribution of stress levels among 18 primigravid pregnant women in their third trimester before receiving Murottal Surah Ar-Rahman therapy. The data show that 5 respondents (27.78%) experienced mild stress, while 13 respondents (72.22%) experienced moderate stress. This indicates that the majority of primigravid pregnant women had a moderate level of stress prior to the intervention.

Stress Levels in Pregnant Women After Murottal Surah Ar-Rahman Therapy
Post-therapy stress levels for Murottal Surah Ar-Rahman can be seen in Table 2.

Table: 2 Post-Therapy Stress Levels for Murottal Surah Ar-Rahman

Level of Stress	Frequency (F)	Percentage (%)
Normal	11	61,11 %
Mild stress	7	38,89%
Total	18	100 %

From table 2 shows the distribution of stress levels among 18 primigravid pregnant women in their third trimester after receiving Murottal Surah Ar-Rahman therapy. The results indicate that 11 respondents (61.11%) had normal stress levels, while 7 respondents (38.89%) experienced mild stress. These findings suggest that after the intervention, the majority of participants experienced a reduction in stress levels, demonstrating the positive effect of Murottal Surah Ar-Rahman therapy in lowering stress among primigravid pregnant women.

Effect of Murottal Surah Ar-Rahman Therapy on Stress Reduction among Primigravida Women in the Third Trimester. The results of the normality test are presented in Table 3.

Table: 3 Normality Test Results of Stress Levels Pre and Post Murottal Surah Ar-Rahman Therapy

	Kolmogorov-Smirnov ^a			Shapiro-Wilk		
	Statistic	Df	Sig.	Statistic	Df	Sig.
Pre test	.106	18	.200	.968	18	.765
Post test	.117	18	.200	.943	18	.324

The normality test was conducted using two methods, namely Kolmogorov-Smirnov and Shapiro-Wilk. The test results showed that the pre-therapy stress levels had a significance value of 0.200 in the Kolmogorov-Smirnov test and 0.765 in the Shapiro-Wilk test. Since the significance value in the Kolmogorov-Smirnov test is > 0.05 , the data is normally distributed according to this test. Meanwhile, the post-therapy stress levels had significance values of 0.200 in the Kolmogorov-Smirnov test and 0.324 in the Shapiro-Wilk test. Both values are > 0.05 , so it can be concluded that the data is normally distributed according to both tests.

Effect of Murottal Surah Ar-Rahman therapy on stress reduction among primigravida women in the third trimester can be seen in Table 4 below.

Table: 4 Effect Of Murottal Surah Ar-Rahman Therapy on Stress Reduction among Primigravida Women in the Third Trimester

		Paired Differences						T	Df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference					
					Lower	Upper				
Pair 1	Pre-therapy - Post-therapy Murottal Surah Ar-Rahman	38.05	14.04	3.311	31.06	45.04	11.493	17	0.00	

Table 4 presents the results of the paired sample t-test conducted to analyze the effect of Murottal Surah Ar-Rahman therapy on the stress levels of primigravid pregnant women in their third trimester. The analysis shows a mean difference of 38.05 between pre-therapy and post-therapy stress scores, with a standard deviation of 14.04 and a standard error mean of 3.311. The 95% confidence interval of the difference ranges from 31.06 to 45.04, indicating consistency in the observed effect. The obtained t-value was 11.493 with 17 degrees of freedom (df), and the significance value ($p = 0.000$) is less than 0.05. This result demonstrates a statistically significant difference in stress levels before and after the therapy, meaning that Murottal Surah Ar-Rahman therapy effectively reduced stress levels among primigravid pregnant women in their third trimester. Therefore, it can be concluded that Murottal Surah Ar-Rahman therapy has an effect on stress in primigravida mothers in the third trimester.

DISCUSSION

Stress Levels in Pregnant Women Before Murottal Surah Ar-Rahman Therapy Pre-therapy stress levels for Murottal Surah Ar-Rahman

Psychological adaptation in pregnant women is related to their perception of pregnancy risks and the childbirth process, making them highly emotional in preparing for or anticipating anything that may occur. Negative thoughts and feelings of fear are often the root causes of stress (Renny R & Yuliastanti, 2020). The anxiety experienced by pregnant women with primigravida parity generally arises because they do not yet have a clear understanding of the childbirth process (Nurlela et al., 2024). Feelings of fear often emerge as a result of hearing various stories about

childbirth experiences, especially as the pregnancy progresses closer to delivery and the thought of a frightening labor process begins to appear (Rahmadhani et al., 2021).

A different view was expressed by Annisa & Suprayitno (2019), who stated that most pregnant women experience severe stress. Physical changes in pregnant women are one of the main causes of high stress levels, which are influenced by hormonal changes, a lack of knowledge about pregnancy, financial or economic problems, and unwanted pregnancies. These factors have negative impacts on both the mother and the fetus. Based on the research findings and related theories, it can be assumed that pregnant women often experience significant physical, emotional, and psychological changes (Aprillia Rahmasanti & Hapsari Windayanti, 2021). These changes can lead to high stress levels as they adapt to the new circumstances. High stress can negatively impact the health of both the mother and the fetus (Zulkahfi, 2020). Pregnant women experiencing stress require effective interventions to reduce stress and improve their health. Such interventions may include therapy, counseling, or relaxation techniques (Ulfah et al., 2025).

Stress Levels in Pregnant Women After Murottal Surah Ar-Rahman Therapy Post-therapy stress levels for Murottal Surah Ar-Rahman

The level of anxiety experienced by the respondents decreased after being given the murottal Al-Qur'an therapy. The mothers developed hopes for a safe and smooth delivery, which arose from their renewed faith and trust in the Creator after listening to the recitation of the Qur'anic verses, influenced by both the reader's voice and the verses themselves. Murottal Al-Qur'an therapy has almost no harmful side effects for its listeners (Rahmadhani et al., 2021).

Pregnant women in their third trimester with primigravida parity experience psychological changes due to emotional fluctuations. Murottal Al-Qur'an refers to the recitation of the Qur'an delivered with a rhythmic and correct reading style, which has a positive impact on the emotional state of pregnant women (Siagian et al., 2025). Murottal Al-Qur'an therapy can stimulate alpha brain waves, making listeners feel calm, peaceful, and serene, leading to a sense of surrender and awareness of the greatness and majesty of Allah SWT. The murottal recitation itself works on the brain, where, when stimulated, it triggers the production of neuropeptide chemicals that activate endorphins to enhance feelings of relaxation (Indrawati et al., 2022).

Based on the research findings and related theories, it can be assumed that after receiving Murottal Surah Ar-Rahman therapy, the stress levels of pregnant women will decrease significantly. With reduced stress and increased relaxation, pregnant women can enjoy their pregnancy more and feel happier. Additionally, this therapy can help alleviate anxiety and fear experienced by pregnant women.

Effect of Murottal Surah Ar-Rahman therapy on stress reduction among primigravida women in the third trimester

The autonomic nervous system consists of two main components, namely the sympathetic and parasympathetic nervous systems, which work in opposition to maintain the balance of body functions (homeostasis). The parasympathetic nervous system plays an important role in reducing increased bodily activity caused by stress by initiating the "rest and digest" response, a state of rest and relaxation (Yunitasari et al., 2025). When a person experiences stress, activation of the sympathetic nervous system causes an increase in heart rate, blood pressure, and the secretion of stress hormones such as cortisol and adrenaline (Rais, 2024). Conversely, when the parasympathetic nervous system is activated, sympathetic activity decreases, resulting in a reduction in heart rate and blood pressure, and an increase in feelings of calmness.

This parasympathetic activation is primarily mediated by the vagus nerve, which stimulates the secretion of relaxation-related hormones such as endorphins and serotonin (Mudawamah et al., 2024). In pregnant women, chronic stress can affect hormonal balance and fetal conditions through increased cortisol levels. Therefore, activation of the parasympathetic nervous system through relaxation techniques such as murottal therapy of Surah Ar-Rahman, deep breathing, or meditation plays a role in suppressing cortisol production, reducing muscle tension, and enhancing the emotional well-being of pregnant women (Ulya et al., 2024).

Therefore, it can be concluded that Murottal Surah Ar-Rahman therapy has an effect on stress in primigravida women in the third trimester. The recitation of the Quran contains human voice elements, which are a powerful healing instrument and a readily accessible tool. Sound can reduce stress hormones by activating natural endorphins, increasing feelings of relaxation, and diverting attention from fear, anxiety, and tension. It can also lower blood pressure, slow down breathing, heart rate, pulse, and brain wave activity. Slower breathing rates can induce calmness, emotional control, deeper thinking, and better metabolism. The Quran is a comprehensive remedy for various types of diseases, both physical and spiritual (Nihla & Sukraeny, 2023). Other studies also suggest that Murottal therapy can affect respondents' physical, psychological, and spiritual well-being. Murottal therapy with Surah Ar-Rahman can be a stress reliever for respondents due to its soothing and calming effects. Murottal therapy can create a peaceful and relaxing atmosphere, reducing stress levels (Rahmayani et al., 2018). Based on the research findings and related theories, it can be assumed that Murottal Surah Ar-Rahman therapy can significantly reduce stress in primigravida women in the third trimester. This therapy can help them feel more relaxed and calm, leading to a more stable emotional state. With reduced stress and increased relaxation, pregnant women can enjoy their pregnancy more and feel happier.

CONCLUSION

The murottal therapy of Surah Ar-Rahman has an effect on reducing stress levels in pregnant women, making it a potential non-pharmacological intervention to promote relaxation and calmness during pregnancy. Health institutions may consider incorporating this therapy as part of non-pharmacological interventions in antenatal care services, particularly for pregnant women experiencing moderate to high levels of stress. In addition, training should be provided on the application of murottal therapy to support pregnant women, especially in addressing psychological issues during pregnancy such as anxiety and stress. Murottal therapy can also serve as an educational and family empowerment medium to create a supportive and calming environment for pregnant women at home, involving husbands and other family members in spiritual relaxation activities.

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REFERENCES

- Aghniya, R., Kristina, M., Widiyanti, S., & Sadiman, S. (2025). The Impact of Murottal Qur'an Therapy on Anxiety Levels in Third Trimester Pregnant Women at Simpura Health Center Bandar Lampung. *Journal of Health Management, Administration and Public Health Policies (HealthMAPs)*, 3(1), 1–10. <https://doi.org/10.52060/healthmaps.v3i1.3037>
- Annisa, A., & Suprayitno, E. (2019). Terapi Murattal Surat Ar-Rahman Menurunkan Stres Kehamilan. *Jurnal Ilmu Kesehatan*, 4(1), 38–41. <https://doi.org/10.24929/jik.v4i1.700>
- Aprillia Rahmasanti, & Hapsari Windayanti. (2021). Perbedaan Kecemasan Ibu Hamil Trimester III Sebelum dan Sesudah Pemberian Murottal Al-Qur'an Surah Ar-Rahman di Wilayah Kerja Puskesmas Kaliabang Tengah Kota Bekasi. *Journal of Holistics and Health Science*, 3(2), 99–108. <https://doi.org/10.35473/jhhs.v3i2.102>
- Chrisyanna, Y. (2023). Efektifitas Diaphragm Breathing Exercise terhadap Tingkat Kecemasan Ibu Hamil Trimester III. *Jurnal Interprofesi Kesehatan Indonesia*, 2(4), 386–396. <https://doi.org/10.53801/jipki.v2i4.84>
- Folkman, S., & Lazarus, R. S. (1984). Stress, appraisal, & coping. In *Springer Publisher Company*.
- Handriyani, Y., Hamami, T., Khilmiyah, A., Rahmatullah, A. S., & Kamaruddin, M. S. Bin. (2024). Effectiveness of the Al-Qur'an Murottal Method in Reducing Labor Anxiety in First-Time Pregnant Women in Sleman Yogyakarta. *Jurnal Pendidikan Agama Islam*, 21(2), 384–401. <https://doi.org/10.14421/jpai.v21i2.9709>
- Indrawati, I., Yufdel, Y., & Elfira, E. (2022). The Effect of Murothal Al-Qur'an Therapy on Reducing Anxiety and Quality of Life on Pregnant Women. *Jurnal Kebidanan*, 12(2), 119–123. <https://doi.org/10.31983/jkb.v12i2.7718>
- Kurnanto, M. E., Hefni, H., Istiqomah, I., Sukmawati, F., & Nurrahmi, H. (2023). Surah Al-Fatihah-Based Guidance Model To Reduce Women'S Anxiety of Their First Pregnancy. *Journal for the Study of Religions and Ideologies*, 22(64), 96–117.
- Marwah, D. S., Zata, K. N., Naufal, M., Fadhillah, M. I., & Fithri, N. K. (2023). Literature Review: Analisis Faktor Yang Berhubungan Dengan Tingkat Stres Ibu Hamil Dan Implikasinya Pada Kesehatan Janin. *Jurnal Ilmu Kedokteran Dan Kesehatan*, 10(8), 2578–2587. <https://doi.org/10.33024/jikk.v10i8.10281>
- Mizrak, S. B., & Kabakci, E. N. (2021). The experiences of pregnant women during the COVID-19 pandemic in Turkey: A qualitative study. *Women and Birth*, 34(2), 162–169. <https://doi.org/10.1016/j.wombi.2020.09.022>
- Mudawamah, S. N., Yanti, L., & Dewi, F. K. (2024). Phenomenological Study of Murottal Therapy to Overcome Anxiety in Unwanted Pregnancy. *Proceeding ICHBS*, 1(1), 172–179.

- Nihla, A. L., & Sukraeny, N. (2023). Penerapan Terapi Murottal Al-Qur'an Surat Ar-Rahman Untuk Menurunkan Intensitas Skala Nyeri Kepala Pada Pasien Cedera Kepala Di RSUD KRMT Wongsonegoro Kota Semarang. *Holistic Nursing Care Approach*, 3(1), 11. <https://doi.org/10.26714/hnca.v3i1.11134>
- Nurlela, L., Asih, F., Pindi, K., & Syamsuriati, S. (2024). Al-Quran Recitation Therapy with Surah Ar-Rahman on Students' Sleep Quality: A Randomized Controlled Trial. *Diversity: Disease Preventive of Research Integrity*, 63–69. <https://doi.org/10.24252/diversity.v4i2.45901>
- Nuryati, T., & Handayani. (2022). Pelatihan Manajemen Stres Pada Ibu Hamil Di Puskesmas Bojong Menteng Kota Bekasi. *Jurnal Pengabdian Kepada Masyarakat*, 1(9).
- Ovita Rizki, A. (2024). Hubungan Terpai Murrotal Surah Ar-Rahman Dan Relaksasi Nafas Dalam (Deep Breathing) Terhadap Kualitas Tidur Ibu Hamil Di Wilayah Kerja Puskesmas Tlogosari Kulon Kota Semarang. In *Ayan* (Vol. 15, Issue 1, pp. 37–48).
- Rahmadhani, A., Agustini, T., & Taqiyah, Y. (2021). Pengaruh Terapi Murottal Al – Qur'an Terhadap Tingkat Kecemasan Ibu Hamil Trimester III Dalam Menghadapi Proses Persalinan. *Window of Nursing Journal*, 02(02), 113–122. <https://doi.org/10.33096/won.v2i2.831>
- Rahmayani, M. ., Rohmatin, E., & Wulandara. (2018). Pengaruh Terapi Murottal Al-Qur'an Terhadap Tingkat Stres Pada Pasien Abortus di RSUD dr. Soekardjo Kota Tasikmalaya Tahun 2018. *Jurnal Bidan 'Midwife Journal'*, 4(02), 36–41.
- Rais, G. (2024). The Effect of Prenatal Yoga and Quran Recitations on Cortisol Hormone Levels and Labor Readiness. *Pakistan Journal of Life and Social Sciences (PJLSS)*, 22(2). <https://doi.org/10.57239/pjlss-2024-22.2.00977>
- Renny R, W., & Yulianti, Y. (2020). Pengaruh Stres Pada Ibu Hamil Trimester Iii Terhadap Aktivitas Janin Yang Dikandung Di Wilayah Puskesmas Grabag 1 Kabupaten Magelang Stress Effect of Pregnant Women on Trimester Iii Fetus Activities in the Health District Grabag 1 Magelan. *Jurnal Kebidanan*, XII(02), 146–156.
- Setiowati, W., & Asnita, N. (2020). Pengaruh Terapi Murottal Al-Quran Surah Maryam terhadap Tingkat Kecemasan Pada Ibu Hamil Trimester III. *Universitas Darul Azhar*, 9(9), 77–83. <https://doi.org/10.1017/CBO9781107415324.004>
- Siagian, D. S., Nurazlinda, N., & Ratih, R. H. (2025). The Influence Of Complementary Murottal Al-Qur'an Therapy On The Anxiety Of Pregnant Women In The 3rd Trimester In The Working Area Of The Payung Sekaki Health Center. *Jurnal Ilmu Kesehatan Abdurrah*, 3(2), 16–22.
- Ulfah, U., Rahman, S., Asmadiannor, A., & Wijaksono, M. A. (2025). Pengaruh Murottal Al Qur'an Surah Maryam Terhadap Kecemasan Ibu Hamil Trimester III Di Ruang Penyakit Dalam Rumah Sakit Bhayangkara Tk. III Banjarmasin. *Sains Medisina*, 3(4 SE-Artikel), 187–195.

- Ulya, N. A., Rahayu, H. S. E., & Sulistyono, D. (2024). The Effect of Al-Qur'an Murottal Therapy on Anxiety in Third Trimester Pregnant Women: Study Literature Reviews. *4th Borobudur International Symposium on Humanities and Social Science 2022 (BIS-HSS 2022)*, 1033–1042. https://doi.org/10.2991/978-2-38476-118-0_119
- Yunitasari, E., Aliun, F. W., & Oktarosada, D. (2025). Pengaruh terapi wudhu dan murottal Al-Qur'an terhadap kecemasan siswa dalam menghadapi ujian. *Journal of Public Health Concerns*, 5(1), 31–40.
- Zulkahfi, Z. (2020). Pengaruh Terapi Murottal Al Quran Surah Maryam Terhadap Penurunan Tingkat Kecemasan Pada Ibu Hamil Trimester Iii Di Wilayah Kerja Puskesmas Meninting. *PrimA: Jurnal Ilmiah Ilmu Kesehatan*, 6(2), 91–97. <https://doi.org/10.47506/jpri.v6i2.185>