

POSTPARTUM BLUES PHENOMENON: MUROTTAL AND DHIKR THERAPY INTERVENTION

Machfudloh¹, Meilia Rahmawati², Ikliya Fitri³

¹²³Midwifery Study Program Bachelor of Midwifery and Midwife Professional Education, Faculty of Medicine, Sultan Agung Islamic University Semarang, Indonesia

Corresponding Author: machfudloh@unissula.ac.id

ABSTRACT

Emotional strain arises during the postpartum phase. Postpartum blues is one of the common complications that arise from psychological issues in postpartum mothers. Inappropriate handling can cause postpartum depression and even psychosis, damage the mother-infant bond, and, in the worst-case scenario, harm the kid. Postpartum blues, often known as baby blues, affects 26–85% of women in Asian countries after giving birth, whereas 50–70% of postpartum mothers in Indonesia experience the condition. The percentage of women who get the baby blues ranges from 50 to 70%. The baby blues syndrome affects 1 to 2 moms out of every 1000 babies. This study aimed to analyze the intervention of murottal Al-Qur'an therapy and dhikr on the phenomenon of postpartum blues. This type of research is quantitative by design quasi-experiment *one group pretest-posttest*. 30 respondents participated using a positive sampling technique. Intervention is given once a day for 6 days independently accompanied by researchers. The instrument is the EPDS (Edinburgh Postnatal Depression Scale) questionnaire and the analysis test used is the Wilcoxon test. Before receiving Al-Qur'an murottal treatment and dhikris, postpartum moms' EPDS score After receiving Al-Qur'an murottal therapy intervention and dhikr in the Semarang City Health Center area, the majority of postpartum mothers (83.3%) experienced a decrease in EPDS scores, indicating that they were in the normal category. Out of all respondents, 100% reported having mild depression or postpartum blues. The findings of the Wilcoxon test showed a significance value of $p < 0.001$, indicating that dhikr and murottal Al-Qur'an therapy had an impact on the postpartum blues phenomena. The average difference between the EPDS scores before and after the intervention is four points. When it came to the postpartum blues phenomena in the Semarang City Health Center region, the intervention of murottal Al-Qur'an therapy and dhikr produced a significant value of $p < 0.001$, indicating that the phenomenon was affected by the intervention.

Keywords: Postpartum Blues, Murottal Al-Qur'an Therapy, and Dhikr Therapy



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INTRODUCTION

Postpartum "blues" are defined as low mood and mild depressive symptoms that are temporary and self-limited. The pathogenesis is largely unknown. However, hormonal changes as one of the main causative factors in developing postpartum mood swings. Usually, there is a drastic decrease in estradiol, progesterone, and prolactin after delivery (Balaram and Marwaha, 2021).

According to the (World Health Organization, 2018), the incidence of postpartum blues (baby blues) in Asian countries is quite high, which is around 26-85%,

while in Indonesia the incidence of postpartum blues is between 50-70% of postpartum mothers. Women who experience the incidence of baby blues range from 50-70%. There are 1 to 2 per 1000 births of mothers who experience baby blues syndrome (Kemenkes RI, 2022).

Mothers with postpartum blues can experience an increased risk of postpartum depression, where postpartum major depression is approximately 4 to 11 times more common in women who experience postpartum blues or postpartum psychosis can occur if not treated immediately (Balaram and Marwaha, 2021).

Postpartum blues The exact cause is not known, but baby factors, psychosocial

background, physical discomfort resulting from postpartum body changes, problems with the first child, and hormonal factors are possible causes of postpartum blues. There are other opinions regarding the causes of postpartum blues, namely the experience of giving birth and the number of births (Susanti and Sulistiyanti, 2017).

Treatment for postpartum blues includes validation, education, reassurance, and psychosocial support (Balaram and Marwaha, 2021). The treatment apart from using a therapeutic communication approach and increasing mental support can be provided with actions that can help reduce the symptoms of postpartum blues, one of which is by providing the teaching of religious doctrine, religious doctrine, and prayer, which is a kind of self-relaxation, creates "good feelings" in the individual. There is tremendous power in belief in God, which gives spiritual strength to people, helps them overcome difficulties in life, and relieves their worries and anxieties (Akbarzadeh et al., 2015).

One treatment that can reduce postpartum blues is murottal Al-Qur'an and dhikr because listening to murottal Al-Qur'an can reduce levels of anxiety, stress, and depression. (Twistiandayani and Prabowo, 2021), and dhikr can reduce anxiety (Puti Febrina Niko, 2018), and stress levels (Sutioningsih, Suniawati and Hamsanikeda, 2019), and increase mental peace (Kumala, Kusprayogi and Nashori, 2017). Murottal is a type of music that can influence listeners positively (Wiulin Setiowati, 2020). Listening to murottal Al-Qur'an can make you remember and submit everything you face to God and feel closer to God which will make you surrender, thereby increasing the state of calm and relaxation. (Al Kasanah and Pitayanti, 2021). Dhikr is a link between creatures and the creator (Al-Hakim, 2018). Dhikr makes the body relaxed or relaxed, peaceful, and calm (Astuti, Hartinah, and Permana, 2019).

Based on previous research on the effectiveness of murottal Al-Qur'an and dhikr, listening to murottal surah ar-rahman for 15 minutes and dhikr Subhanalloh wabihamdihi,

subhanalloh hil'azim for 25 minutes can reduce anxiety in Mild Pre-Eclampsia (Widiastuti et al., 2018).

Based on research (Tobing et al., 2018) an intervention was carried out on one of the mothers who experienced anxiety during her pregnancy, by listening to the Qur'an murottal regularly, at least once a day for 6 days, it was found that there was a reduced risk of depression in pregnant women.

Based on the background presented, researchers are interested in researching the intervention of murottal Al-Qur'an therapy and dhikr on the phenomenon of postpartum blues.

METHOD

This type of research is quantitative with a research design using quasi-experiment with a one-group pretest-post-test design. The subjects in this study were postpartum mothers on days 7 to 14 who experienced postpartum blues, were Muslim, primiparous, gave birth normally, the baby was alive, had no hearing loss, and were not in the lochia expulsion period. The total sample was 30 postpartum mothers, the sampling technique used purposive sampling with all postpartum mothers given intervention. Intervention in the form of listening to the murottal of the Qur'an Surat Ar-Rahman for approximately 12 minutes with mobile media via YouTube from a predetermined link, then dhikr with lafadz subhanalloh wabihamdihi, subhanalloh hil'azim (most holy of Allah and all praise be to Him, most holy of Allah the greatest) for 25 minutes for 6 days a day carried out once during the visit, independently accompanied by researchers. The instrument used was the EPDS (Edinburgh Postnatal Depression Scale) questionnaire. Measurements using the EPDS questionnaire were carried out 2 times, namely before the intervention was given on the first day and after the intervention was given on day 6. The analysis test used the Wilcoxon test. This research was conducted from March to April 2022 and was carried out in the work area of the Semarang City Health Center. There was an ethical approval No Ref 64/II/2022/Bioethics

Commission before data collection was conducted

RESULTS

Table 1. Characteristics Of Postpartum Mothers Given Qur'anic Murottal Therapy And Dhikr

Characteristics of Respondents	Frequency	Percentage
Age		
a. <20 years old dan >35 years old	6	20,0%
b. 20-35 years old	24	80,0%
Education		
a. Low (SD/ SMP)	0	0,0%
b. Higher (SMA/ SMK/ Perguruan tinggi)	30	100,0%
Husband and wife's salary		
a. <District/City Minimum Wage	6	20,0%
b. ≥District/City Minimum Wage	24	80,0%
Work		
a. Work	4	13,3%
b. Does not work	26	86,7%
Husband's support		
a. Get support	24	80,0%
b. Lack of support	6	20,0%
Pregnancy status		
a. Planned pregnancy	28	93,3%
b. Unplanned pregnancy	2	6,7%
History of mental disorders		
a. Have been diagnosed with depression during pregnancy or There are family members diagnosed with mental disorders	0	0,0%
b. No history of mental disorders	30	100,0%

Based on Table 1, It was found that from 30 respondents, most of the respondents were aged 20-35 years, namely 24 respondents (80.0%). All respondents of their last education were high school / vocational / higher education (100.0%). The salaries of husbands and wives earned for one month are mostly more than or the same as MSEs, which is as many as 24 respondents (80.0%). The respondents of this study were dominated by non-working mothers, namely as many as 26 respondents (86.7%). A total of 24 respondents (80%) received support from their husbands during the postpartum period. Almost all respondents (93.3%) said that this pregnancy was a planned pregnancy. In addition, all respondents had no history of mental disorders (100.0%).

Table 2. EPDS Scores of Postpartum Mothers Before and After Qur'an Murottal Therapy and Dhikr

EPDS Score	Pre-test		Post-test	
	Frequency	Percentage	Frequency	Percentage
Normal 0-9	0	0,0%	25	83,3%
Mild depression/ postpartum blues 10-12	30	100,0%	5	16,7%
Major depression >13	0	0,0%	0	0,0%
Total	30	100,0%	30	100,0%

Based on table 2, shows that after being given the intervention, the EPDS score decreased, dominated by the normal category with an EPDS score in the range of 0-12, amounting to 83.3%. A total of 5 respondents (15.7%) still experience postpartum blues.

Table3.The Effect of Providing Murottal Al-Qur'an Therapy and Dhikr on the Occurrence of Postpartum Blues

	N	Mean	Std. Deviation	Min.	Max.
Pre-Test	30	10.57	,774	10	12
Post-Test	30	7.03	2,236	3	11
Z					-4,719
Asymp. Sig. (2-tailed)					
<,001					

Table 3 explains that before being given therapy the average EPDS score was 11 and after being given therapy the average EPDS score was 7. Based on this, there was a decrease in the score with an average of 4. Table 3 shows that the Wilcoxon test results obtained a significance value of <0.001, so it can be concluded that there is a difference in the EPDS score results before and after the intervention was given. The significance value is <0.001, which is smaller than 0.05, which indicates that Ho is rejected and Ha is accepted, which means that there is an influence of providing mutual Al-Qur'an therapy and dhikr on the incidence of postpartum blues.

DISCUSSION

Based on the results of research regarding the effect of murottal Al-Qur'an therapy and dhikr on the incidence of postpartum blues in the Semarang City area, the results showed that providing murottal Al-Qur'an therapy and dhikr can be one of the treatments for postpartum blues incidents. The results obtained were that of the 30 respondents the EPDS score before being given Al-Qur'an murottal therapy and dhikr was 10-12, after being given Al-Qur'an murottal therapy and dhikr it became more varied, namely 3-11. After giving Al-Qur'an murottal therapy and dhikr, the EPDS score decreased.

Al-Qur'an murottal therapy and dhikr play a role in reducing stress-related hormones and activating endorphin hormones, causing feelings of relaxation, and can divert attention from feelings of tension, fear, and anxiety.

When listening to murottal Al-Qur'an, the body will stimulate delta waves which make the

body calm and comfortable. Listening to murottal can also reduce stress-related hormones and stimulate the release of endorphins, making the body calmer, and reducing feelings of anxiety, fear, and tension.(Harisa et al., 2020).

Dhikr is one of the mental health treatments because remembering Allah can reduce anxiety and depression. Saying dhikr readings, the brain will respond automatically to the release of endorphin hormones as a stimulus for feelings of comfort and happiness(Himawan, Suparjo, and Cuciat, 2020).

Based on research conducted by Fitria et al., (2022) showed results that murottal Al-Qur'an therapy reduced anxiety scores in postpartum mothers and murottal Al-Qur'an therapy as an alternative method for dealing with anxiety in postpartum mothers. The method used was quasi-experimental with a pretest and posttest design without a control group. The intervention was carried out for 15 minutes for 7 days, with an average reduction in anxiety scores of 13.6.

In this study, the intervention provided was different from the study by Fitria et al., (2022) because in that study it was not explained which letters were used, only murottal was used. Researchers carried out interventions by research conducted by Eclampsia (Widiastuti et al., 2018) using murottal therapy of Surah Arrahman and dhikr of Subhanalloh wabihamdihi, Subhanalloh Hil'azim and carried out based on (Tobing et al., 2018) research which can be done for 6 days at least once.

Listening to the correct recitation of the Qur'an with regular rhythm can reduce anxiety for the listener, besides that it can also create peace of mind. Murottal Al-Qur'an provides motivation and strength, so that it can reduce blood pressure to become stable and can reduce tension, as well as making listeners calmer in dealing with anxiety.

Based on research conducted by Maimunah and Masita, (2019)The results showed that the double D method (Dhikr and Prayer) can reduce the level of postpartum depression in postpartum mothers in the letting go phase. This research method is quasi-experimental. The

sample was 84 with low levels of postpartum depression, 42 in the control group and 42 in the intervention group. Intervention is carried out by reading *lafadz laa khaula wala kuwwata illah billah* and *laa illaha illah anta inni kuntu minal dzalimin*, 3 times over a period of 2 weeks. After the intervention, depression decreased by 42%.

Dhikr is a phrase that focuses on efforts to always remember Allah whenever and wherever. Dhikr is a beta blocker or inhibitory response that can cause the brain to become alpha so that energy becomes strong and hormones become stable, especially the hormone cortisol which plays a role in the stress response. Based on the results of this study, the results of the decline that occurred in postpartum mothers who experienced depression were different due to different methods of providing the intervention.

Surah Ar-Rahman is the 55th surah in juz 27 and consists of 78 verses. This letter reminds its readers of the extraordinary gifts and favors of Allah Almighty. In verse 16, which means "Then, which favor of your lord do you lie?", the verse reminds the listener what a blessing Allah Almighty gives to his servant. This verse is even repeated 31 times.

Based on research conducted (Kurniawati and Septiyono, 2022), it was found that the factors that can affect the occurrence of postpartum blues include, age ($p = 0.002$) where women under 20 years old or over 35 years old during the postpartum period are at risk of experiencing postpartum blues, because age is often related to the mental readiness of the woman to become a mother; salary ($p = 0.032$), Income is one of the factors that play an important role in human life and is related to the economic status of the family in postpartum mothers. The higher the income, the better the readiness for childbirth to minimize the incidence of postpartum blues; education ($p = 0.001$), Education has a significant effect on the incidence of postpartum blues, especially in mothers with low education. Education influences knowledge and most importantly shapes one's actions; work ($p = 0.042$), Working women can experience postpartum blues because of the many role conflicts that cause new problems; Type of delivery ($p = 0.0001$),

The type of delivery is associated with the risk of injury during labor, which causes aches and pains. Long labor will make the mother have an unsatisfactory labor experience; Husband support ($p = 0.003$), Husband support for postpartum mothers can reduce the incidence of postpartum blues in postpartum mothers because when a husband is affectionate and patient and can meet the needs of his wife, he feels helped in caring for his baby; and pregnancy status ($p = 0.009$), pregnancy status is related to the mother's readiness physically, mentally, and economically. If mothers have adequate physical and mental readiness, stress levels, anxiety, and fear of pregnancy and childbirth are reduced making it easier for them to adapt to their new roles.

CONCLUSION

This research provides an illustration that all postpartum mothers (100%) experienced mild depression or postpartum blues and after being given Al-Qur'an murottal therapy intervention and dhikr in the Semarang City Health Center area, the results showed that the majority of postpartum mothers (83.3%) experienced a decrease in EPDS scores which showed in the normal category. The intervention of murottal Al-Qur'an therapy and dhikr on the postpartum blues phenomenon in the Semarang City Health Center area obtained a significance value of $p < 0.001$ where the intervention of murottal Al-Qur'an therapy and dhikr affected the phenomenon of postpartum blues. The weakness of this research is that it does not explore whether the baby has problems or not. The hope for future research is to examine more deeply the factors that influence postpartum blues.

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