Music Therapy And Effective Communication Reduces Anxiety Levels in Welcoming Childbirth

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Abstract.
Labor pain is a physiological condition that can hinder the delivery process. Excessive pain can disturb the body’s homeostasis which can result in excessive and useless energy. Reducing the pain scale can be done by pharmacological and non-pharmacological measures. It’s normal for pregnant women and mothers to experience pain. Measuring the pain scale using the Numerical Rating Scale (NRS) and quasi-experiments. Music therapy is a form of implementation that uses music and songs in an integrated and directed manner to guide mothers in pregnancy with the aim that pregnant women feel relaxed, early stimulation of the fetus, and establish an emotional connection between the mother and the fetus. Music also affects the parasympathetic nerves or the nervous system, either directly or indirectly. (Welina et al, 2021) Effective intrapersonal communication between a midwife can help mothers overcome depression during pregnancy and childbirth. It can also help patients stay positive throughout the pregnancy and delivery process, making it fun and easy to deal with issues that arise while raising a child. The anxiety level score in the pre-test measurement is higher than the post-test measurement, indicated by the mean value in the pre-test (22.67) higher than the post-test (16.77) which means that there is a decrease in the anxiety level score in the respondents before and after intervention. The results of this study were that there was a significant effect of classical music therapy on reducing the anxiety level of third-trimester pregnant women. This was evident from the statistical test used, the Wilcoxon Match Pairs Test, with a result (p=0.000) less than (<0.05). The researcher’s assumption is that music therapy can distract pregnant women so as to reduce maternal anxiety in welcoming labor and effective communication between midwives and pregnant women can motivate pregnant women to be brave in facing labor and reduce anxiety in welcoming labor.

Keywords: Music therapy, Effective Communication and Anxiety levels.

I. INTRODUCTION
Childbirth is the process of moving the exit of the fetus, placenta, and membrane through the birth canal spontaneously, and without complications. This process begins with cervical dilatation due to uterine contractions with regular frequency, duration, and force until complete opening, and is ready to remove the fetus from the mother’s uterus (Nature. S.H, 2020). Labor pain is a physiological condition that can hinder the labor process. Excessive pain can interfere with the body’s homestasis which can result in excessive energy and is not beneficial. Pain scale reduction can be done through pharmacological and non-pharmacological measures. Complaints of pain are naturally experienced by pregnant women and maternity mothers. Measure the pain scale using the Numerical Rating Scale (NRS), and pseudo-experimental. Music therapy is a form of implementation by playing music and songs in an integrated and directed manner to guide the mother during pregnancy with the aim that the pregnant woman feels relaxed, early stimulation of the fetus, and establish an emotional connection between the mother and the fetus.

Music also affects the parasympathetic nerves or the nervous system, either directly or indirectly. (Welina et al, 2021) Effective intrapersonal communication between a midwife can help mothers overcome depression while going through the process of pregnancy and childbirth. It can also help patients stay positive during the process of pregnancy and childbirth, making it fun and easy to deal with the problems that arise while raising a child. According to the World Health Organization (2019) deaths in mothers are caused by major complications such as bleeding, infection, high blood pressure during pregnancy, complications from childbirth, and unsafe abortions. Based on WHO data, almost 75% of the main complications that cause maternal death are high blood pressure during pregnancy (preeclampsia and eclampsia). The results showed that as many as 52.7% of pregnant women who had moderate anxiety levels experienced hypertension, while 57.8% of pregnant women who had high anxiety levels experienced pre-eclampsia. (Isnaini et al, 2020).
II. METHODS
In this study, researchers used the Pre-Experimental method (One-Group Pre-Post Test Design) where this study was carried out on one group of subjects observed without comparing with the influence of treatment imposed on other groups. The sample size was 25 respondents, where the limitation in this study is that with more samples it is expected to be representative of the existing population and it is hoped that the study will be better.

Teknik analisis data dengan menggunakan:
(a) Univariate Analysis
This univariate data analysis was used to obtain an overview of the frequency and percentage distribution of each variable studied for both dependent variables and independent variables. Analysis using software (Ms. Excel)
(b) Bivariate Analysis
This analysis is carried out by linking independent variables and dependent variables. The goal is to see the existence of a significant relationship between independent and dependent variables. The statistical test used is the Chi Square statistical test.

III. THEORETICAL FOUNDATIONS
1. Music Therapy
Music therapy is therapy using music whose purpose is to improve or improve various conditions, both physical, emotional, cognitive, and social for individuals of different ages. Music is an effective distraction technique that can reduce the intensity of pain, stress states and the level of anxiety by way of distracting a person from the feelings of pain and anxiety felt. Schneider and Workman mention, that distraction with the use of music becomes effective because the individual concentrates there is an interesting or pleasant stimulus rather than focusing on unpleasant symptoms (Solehati and Cecep 2017). Music therapy is a form of activity that uses music and songs / singing in an integrated and directed manner in guiding these mothers during pregnancy which is intended to achieve the objectives: relaxation for pregnant women, early stimulation of the fetus, establishing emotional attachment between the pregnant woman and the fetus (Maryunani and Yetty S, 2017).

From some of the understandings above, it can be seen that there is a connection between music and a person's emotions or mentality. Especially for pregnant women and postpartum mothers, music therapy, among others, aims to provide stimulation to the fetus/baby so that one day it becomes a smart and quality child (Maryunani, 2017).

2. How music works as therapy
Djafaar quoted by Hajizah (2018) said that the mechanism of how music works as a therapeutic tool is to affect all organs of the body's system. It is added that classical music has the function of calming the mind and catharsis of emotions, and can optimize tempo, rhythm, melody and regular harmony and can produce alpha waves in the eardrum so as to provide calm that makes the brain ready to receive new input, relaxing and putting to sleep. According to Reeder, Hajizah (2018) said that in general throughout the contractions and between contractions if the woman wants her to listen to the music that has been chosen, this condition will give a stimulus to the listener's senses that is difficult to ignore. For visual input, it will focus on an object or close its eyes and imagine something expressed by the music verse. Based on gate control theory, implus pain can be regulated or inhibited by defense mechanisms along the central nervous system. This theory says that pain impulses are delivered when a defense is opened and impulses are inhibited when a defense is closed. One way of closing this defense mechanism is to stimulate the secretion of endorphins that will inhibit the release of the substance.

Mozart's own classical music can also stimulate an increase in the hormone endorphin which is a substance a type of morphine supplied by the body, so that when peripheral pain neurons send signals to the synapse, it occurs between peripheral neurons and neurons that go to the brain where the substance should send impulses, at that time the endorphins will block the release of the substance from the sensory neurons. It added that music is one of the management of the non-pharmacological reduction in pain intensity. Music has been shown to reduce physiological anxiety in individuals who are ready for treatment and there has been a decrease in systolic and diastolic blood pressure in patients. The provision of this music facility shows

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a decrease in heart rate, respiration rate and oxygen demand. Music can also cause neuroendocrine effects that are useful for patients. Music bias improves a response such as endorphins that can affect mood, thus being able to lower anxiety, in this case according to music experts diverts the patient from pain, solves cycles of anxiety and fear that increase pain reactions, as well as shifts attention to pleasant sensations. (Hajizah, 2018)

3. **Childbirth**

Childbirth is the process of moving the exit of the fetus, placenta, and membrane through the birth canal spontaneously, and without complications. This process begins with cervical latation due to uterine contractions with regular frequency, duration, and force until complete opening, and is ready to remove the fetus from the mother's uterus (Nature. S.H, 2020).

4. **Pain**

Physiologically pain occurs when the muscles of the uterus contract in an attempt to open the cervix and push the baby's head towards the pelvis. Attempts to open the cervix and push the baby's head towards the pelvis. Pain in childbirth during I is a physiological process caused by the process of cervical dilatation, hypoxia of the uterine muscles during contraction, ischemia of the uterine corpus and stretching of the lower segment of the uterus and compression of the nerves in the cervix (Indriyani T, 2019). The condition of severe pain in the delivery process makes mothers afraid to face childbirth and is a reason to ask for a caesarean section even without medical indications (Purnama and Dewiani, 2019).

5. **Management of Pain in Childbirth**

Efforts made to reduce pain in labor are divided into 2 methods:

a. Pharmacological

The use of pharmacological methods in the form of analgesics and anesthetics, but the use of pharmacological methods makes it possible not to be the first choice for childbirth. However, pharmacological methods are more expensive and have the potential to have less good effects, both for the mother and the fetus (Fitria, Nova, and Nurbaya 2019; Kurniawati, Dasuki, and Kartini 2017).

b. Non-pharmacological

Non-pharmacological methods preferred by parturients to treat pain there are various methods that can be used, including warm baths, massage therapy, music, aroma therapy, warm compresses, breath exercises (Breath exercise), and birth ball practice. (Fitria, Nova, and Nurbaya 2019; Kurniawati, Dasuki, and Kartini 2017).

6. **Effective Communication**

Hypnobirthing technique is one way that can be applied by pregnant women, maternity, and puerperium to gain peace of mind when facing pregnancy and childbirth. This method can be taught to pregnant women as well as midwife interventions with other anxiety management methods. This is very much in line with the role of midwives as health education where midwives can teach certain skills to patients. (Yuseva et al, 2017)

IV. **RESULTS**

A. **Univariate Analysis**

1. **Characteristics of Respondents**

The majority of respondents in this study were aged >20 years with a total of 20 people (80%), while respondents aged < 20 years were 5 people (20%). The majority of respondents had a high school education with 13 people (53%), while the higher education level is 7 people (28%) and those with junior high school education are only 5 people (20%). The majority of respondents worked as Housewives with 20 people (80%), 3 people (12 %) working as traders, and the minority working as employees totaling 2 people (8 %).

2. **Respondents' Anxiety Levels**

<table>
<thead>
<tr>
<th>No</th>
<th>Anxiety Levels</th>
<th>Sum</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Before the Intervention</td>
<td>Light</td>
<td>3</td>
</tr>
</tbody>
</table>

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Table 1. Respondents' Anxiety Levels Before and After the Intervention

<table>
<thead>
<tr>
<th>Anxiety Level</th>
<th>Before Intervention</th>
<th>After Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Anxiety</td>
<td>7</td>
<td>28</td>
</tr>
<tr>
<td>Light</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>Medium</td>
<td>13</td>
<td>52</td>
</tr>
<tr>
<td>Heavy</td>
<td>2</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

In this study, the measurement of respondents' anxiety levels was carried out using the HARS Scale, here are the results: Table 1 shows data from respondents' anxiety levels before and after the intervention. The level of anxiety of respondents in the measurement before the intervention was that the majority of respondents experienced moderate anxiety with a total of 20 people (80%), who experienced mild anxiety totaled 3 people (12%), and the minority experienced severe anxiety totaling 2 people (8%). The level of anxiety of respondents in the measurement after the intervention was that the majority of respondents experienced moderate anxiety with a total of 13 people (52%), those who did not experience anxiety totaled 7 people (28%), respondents who experienced mild anxiety totaled 3 people (12%), and the minority experienced severe anxiety totaling 2 people (8%).

B. Bivariate Analysis

Bivariate analysis aims to test the research hypothesis of whether there are differences in anxiety level scores before and after the intervention in respondents. The analysis for this comparative study is a paired t-test when the data distribution is normal. When the data distribution is abnormal, the test used is the Wilcoxon Test (Dahlan, 2009). The statistical test used is the Wilcoxon Test.

1. Differences in the average score of respondents' anxiety levels in the pre-test and post-test

The analysis used to distinguish the average score of anxiety levels before and after being given music therapy was the Wilcoxon Test.

Table 2. Differences in Respondents' Average Anxiety Level Scores on Pre-test and Post-test

<table>
<thead>
<tr>
<th>Intervention</th>
<th>N</th>
<th>Mean</th>
<th>STD Deviasi</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score Anxiety Pre Test</td>
<td>25</td>
<td>22.67</td>
<td>2.869</td>
</tr>
<tr>
<td>Score Anxiety Post Test</td>
<td>25</td>
<td>16.77</td>
<td>5.191</td>
</tr>
</tbody>
</table>

Table 2 shows the differences in the average scores of respondents' anxiety levels on pretest and posttest. The pretest anxiety score had a mean value of 22.67 then decreased after an intervention with the mean value on the posttest anxiety score being 16.77. Thus it can be concluded that "there is a difference in the level of anxiety between before and after being given music therapy"

2. Effect of Music Therapy on Anxiety Levels in Pregnant Women in the III Trimester

Table 3. Effect of Music Therapy on Anxiety Levels in Pregnant Women in the III Trimester

<table>
<thead>
<tr>
<th>Anxiety Score</th>
<th>Post Test</th>
<th>AnxietyPre Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z</td>
<td>4.443b</td>
<td>Asymp Sig (2-tailed) = 0.000</td>
</tr>
</tbody>
</table>

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Table 3 shows the effect of music therapy on reducing the anxiety level of pregnant women in the III trimester with the Wilcoxon test analysis, which obtained a significance value of 0.000 (p<0.05), it can be concluded that "there is a significant difference, the effect of music therapy on the decrease in anxiety levels of pregnant women before and after being given music therapy".

### 3. Effect of Effective Communication on Anxiety Levels in Pregnant Women in the III Trimester

**Table 4. Analysis of the Effect of Effective Communication On Anxiety Levels In Welcoming Childbirth**

<table>
<thead>
<tr>
<th>Communication</th>
<th>Anxiety Levels</th>
<th>Light</th>
<th>Medium</th>
<th>Heavy</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
</tr>
<tr>
<td>Good</td>
<td>4 0.16</td>
<td>2 0.08</td>
<td>0 0</td>
<td>6</td>
<td>0.24</td>
</tr>
<tr>
<td>Enough</td>
<td>6 0.24</td>
<td>8 0.32</td>
<td>2 0.08</td>
<td>16</td>
<td>0.64</td>
</tr>
<tr>
<td>Less</td>
<td>0 0</td>
<td>3 0.12</td>
<td>0 0.00</td>
<td>3</td>
<td>0.12</td>
</tr>
<tr>
<td>Total</td>
<td>10 0.40</td>
<td>13 0.52</td>
<td>2 0.08</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on Table 3, it can be seen that the most respondents obtained effective communication in the sufficient category with anxiety levels in the moderate category, namely 8 people (32%). Midwives play a role in reducing the burden felt by clients by being good listeners so that they can find solutions to the problems experienced so that anxiety can be reduced. Based on the results of the Paired Sample t Test, a correlation coefficient of -0.329 with a p-value of 0.006 was obtained. Because the p value of 0.006 is less than 0.05 (p<0.05), the hypothesis in the study reads that there is a relationship between effective communication and anxiety levels in welcoming childbirth.

### V. DISCUSSION

This study aims to identify the effect of music therapy and effective communication on anxiety levels in III trimester pregnant women in welcoming childbirth. In this case will discuss the results of the study. The interpretation of the research results that have been obtained will be compared with the theory or related research results.

1. **Respondent's Anxiety Level**

The results of this study found that respondents experienced varying levels of anxiety during the III trimester of pregnancy. In pre-intervention observations, the majority of respondents experienced moderate anxiety, namely 22 people (73.3%), who experienced mild anxiety as many as 5 people (16.7%), and minority experienced severe anxiety totaling 3 people (10.0%). This is in line with Maghfiroh's research (2015) showing that pregnant women experience anxiety with varying levels of anxiety influenced by several factors. Anxiety is a normal reaction to changes that occur and will make a person have uncomfortable feelings. This is due to the existence of suspicions of dangers that threaten, endanger the sense of security, balance or life of an individual or his social group. Many times such anxiety accompanies pregnancy and reaches its peak at the time of delivery. The cause is pain during childbirth which is the main discussion in the discussion about pregnancy and childbirth (Syukrini in Hajizah 2019). According to researchers, the results of a study conducted by Asmara, et al (2017) also discussed the effectiveness of hypnotherapy and music therapy on maternal anxiety. The results of statistical tests conducted by Asmara, et al stated that there was a significant difference between before and after classical music was given (p=0.005). Anxiety is a response to certain threatening situations and it is normal for it to happen with development, changes in life. When facing childbirth, the appearance of this anxiety is very natural, because it is a new experience and is a difficult time for a woman (Stuart, 2008 in Ulfa, 2017). Music therapy can reduce anxiety in mothers because music therapy is an effective technique to distract a person from excessive anxiety.

Music can help a person become more relaxed, reduce stress, create a sense of security and well-being, release sadness, make them happy, and help and release pain (Analia & Moekron in Hajizah, 2019). This happens because of a decrease in Ardenal Corticotropin Hormone (ACTH) which is a stress hormone.

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This hormone is found in the hypothalamus which doubles in an active emergency of the sympathetic nerves and the autonomic nervous system as a conductor of the nerve impulse to the nucleus in the brainstem which allows the autonomic nerves to react directly to smooth muscles and internal organs to produce some changes in body systems such as increased heart rate. The sympathetic nervous system stimulates the adrenal medulla for the release of the hormones epinephrine (adrenaline) and norepinephrine which has the effect of increasing heart rate and blood pressure (Ulfa, 2017). Primigravida mothers who are about to give birth must have excessive emotions that can cause anxiety. The anxiety that arises can be caused by two factors, namely between pleasure and pain that is being felt. One form of anxiety is in the form of primary anxiety arising from birth trauma, which is the basis for the onset of neurotic anxiety. As a result, he will always be in a state of anxiety for fear of facing consequences that will be bad in an uncertain situation. According to Maghfiroh in Hajizah (2019) factors related to anxiety are knowledge, psychology, economics, experience, family support and husband support. Pregnant women with an age of less than 20 years or more than 35 years are a high-risk pregnant age because there can be abnormalities or disorders in the fetus, so it can cause anxiety in the pregnant woman. According to Handayani in Hajizah (2019) that the high anxiety found in mothers under the age of 20 and over 35 years.

To reduce the risk of childbirth, it should be for mothers aged < 20 years and >35 years to keep from getting pregnant, Even if pregnant at that age to be able to pay attention to the womb so that nothing desirable happens to the mother or to the fetus. There are many factors that influence the occurrence of anxiety, one of which is age. Pregnancy at the age of less than 20 years can cause problems, because the physical condition is not 100% ready. Some of the risks that can occur in pregnancy in this area are the tendency to increase blood pressure, emotions and readiness in the delivery process. Next is education, those who are more highly educated tend to pay more attention to the health of themselves and their families. Where the higher the level of education of a person the greater the opportunity to seek treatment to health services. On the contrary, low education will cause a person to experience stress, where the stress and anxiety that occurs is due to the lack of information obtained by the person (Notoatmodjo in Hajiza, 2019). The last parity factor, a person who is still in labor for the first time will experience high anxiety because they have never experienced childbirth while people who have more than one birthday also experience anxiety but are not very anxious because they have experienced childbirth. Every woman who experiences childbirth is always faced with a sense of anxiety and fear (Ulfa, 2017). The results of this study show that pregnant women experience different levels of anxiety caused by the active production of the hormone adrenaline. This is influenced by several factors, namely pain, age, physical state, knowledge, social environment support, and education, as well as parity.

2. The Effect of Music Therapy on Anxiety Levels in Pregnant Women in Welcoming Childbirth

The results of the statistical test analysis on the score of anxiety levels before and after the administration of classical music therapy in respondents showed that there was a significant difference in anxiety levels between before and after classical music therapy was given with (p value = 0.000) or (p<0.05). It also shows that there are statistical test results lower than the significance figures. This is in line with research conducted by Rahmawati (2010) which states that the administration of classical music therapy can reduce anxiety in third trimester primigravida mothers with a significance value of 0.015. The results of research conducted by Asmara, et al (2017) also discussed the effectiveness of hypnotherapy and classical music therapy on maternal anxiety. The results of statistical tests conducted by Asmara, et al stated that there was a significant difference between before and after classical music was given (p=0.005). Anxiety is a response to certain threatening situations and it is normal for it to happen with development, changes in life. When facing childbirth, the appearance of this anxiety is very natural, since it is a new experience and is a difficult time for a woman (Stuart, 2008 in Ulfa, 2017). Music therapy can reduce anxiety in mothers because music therapy is an effective technique to distract a person from excessive anxiety. Music can help a person become more relaxed, reduce stress, create a sense of security and well-being, release sadness, make them happy, and help and release pain (Analia & Moekroni, in Hajizah, 2019).
The provision of music therapy interventions makes a person relax, generates a sense of security and well-being, releases joy and sadness, releases pain and lowers stress levels, so that it can cause a decrease in anxiety (Musbikin in Hajizah, 2019). This happens because of a decrease in Adrenal Corticotropin Hormone (ACTH) which is a stress hormone. This hormone is found in the hypothalamus which doubles in emergencies that are active on the sympathetic nerves and autonomic nervous system as a conductor of the nerve impulse to the nucleus in the brainstem which allows the autonomic nerves to react directly to smooth muscles, and internal organs to produce some changes in body systems such as increased heart rate. The sympathetic nervous system stimulates the adrenalin medulla for the release of the hormones epineprin (adrenaline) and non epineprin which has the effect of increasing heart rate and blood pressure (Ulfa, 2017). Researchers concluded that respondents experienced a decrease in anxiety levels after being given music therapy for 10-30 minutes. This study showed that there were differences in anxiety levels before and after the intervention, where the highest pre-test anxiety level score was the moderate anxiety category, then experienced a better decline after the intervention with the most anxiety scores in the mild anxiety category, indicated by the mean value in the post test (16.77) which was lower than the mean value in the pre test (22.67). This is because music therapy can affect the activity of brain work functions through the nervous system and can restore psychic conditions such as emotions, feelings, thoughts, and desires, besides music therapy can also provide a relaxing effect for nerves and tense muscles and music with a gentle rhythm can make the listener's mood better so that the anxiety they feel will decrease.

3. **The Effect of Effective Communication on Anxiety Levels in Welcoming Childbirth**

In this study, it was found that respondents who obtained effective communication in the moderate category with anxiety levels in the moderate category were 8 people (32%). Midwives play a role in reducing the burden felt by clients by being good listeners so that they can find solutions to the problems experienced so that anxiety can be reduced. Effective communication is defined as consciously planned, purposeful communication and activities centered for the recovery of the patient (Uripi et al, 2003 in Sulastri, et al, 2019). Communication is an important aspect that must be possessed by a midwife in carrying out obstetric care for patients, communication applied by an operative midwife to patients who will undergo anesthesia and surgery is a therapeutic communication that has the aim of reducing the patient's fatigue.

Communication becomes the main method of implementing the process of medical and obstetric actions, doctors and nurses require intellectual, technical and interpersonal skills that are reflected in their behavior towards patients. (Pramuningtyas, et al, 2019) The provision of therapeutic communication in this case health education and information will increase patient knowledge, so that from the information obtained it will make the patient calmer, sincere and more prepared so that it will determine the level of anxiety (Pramuningtyas, et al, 2019) The researcher's assumption is that music therapy can distract pregnant women so that it reduces maternal anxiety in welcoming childbirth and effective communication between midwives and pregnant women can motivate pregnant women to dare to face childbirth and reduce anxiety in welcoming childbirth.

VI. **CONCLUSIONS AND SUGGESTIONS**

A. **Conclusion**

This research was conducted to determine the Analysis of the Effect of Music Therapy and Effective Communication on Anxiety Levels in Welcoming Childbirth at BPS Midwife Ermiyati in Sawangan, Depok City in 2022.

Based on the results of research and discussion in the previous chapter, it can be concluded several things as follows:

1. The majority of respondents in this study were >20 years old with a total of 20 people (80 %), the majority of respondents have a high school education with 13 people (52%), the majority of respondents work as housewives with 20 people (80 %), and the majority of respondents are primigravida with 22 people (88 %).
2. The level of anxiety before the intervention experienced by the majority of respondents was moderate anxiety totaling 20 people (80%) who experienced mild anxiety totaling 3 people (12%), and as many as 2 people (8%) who experienced severe anxiety.

3. The anxiety level score in the pre-test measurement was higher than the post-test measurement, indicated by the mean value on the pre-test (22.67) higher than the post test (16.77) which means that there was a decrease in the anxiety level score in respondents before and after the intervention.

4. Terdapat pengaruh terapi musik klasik terhadap penurunan tingkat kecemasan ibu hamil trimester III yang bermakna, uji statistik yang digunakan adalah Wilcoxon Match Pairs Test dengan hasil (p=0,000) lebih kecil dari (<0,05).

5. The researcher's assumption is that music therapy can distract pregnant women so as to reduce maternal anxiety in welcoming childbirth and effective communication between midwives and pregnant women can motivate pregnant women to dare to face childbirth and reduce anxiety in welcoming childbirth.

B. Advice

Based on the results of the research conducted, the researcher can provide the following suggestions:

1. **Share the Research Place**

   Using music therapy and establishing effective communication to lower the mother's anxiety level in welcoming childbirth. And often hold counseling and provide motivation for pregnant women to be mentally and physically prepared to welcome childbirth.

   In addition, it must also often hold counseling about foods that contain nutrients and vitamins to provide physical preparation to welcome childbirth. Gives the impression of being safe, peaceful and peaceful in communicating so that the mother feels calm in the face of her delivery.

2. **For Researchers**

   a. It is hoped that the next researcher will review other variables that have not been studied in this study. To know about other causal factors may have contributed to this incident.

   b. It is hoped that the next researcher will use other methods besides quantitative methods in this research method, namely qualitative methods so that the research deepens deeper information about the importance of childbirth preparation both mentally and physically in pregnant women so that they can be known more comprehensively in this study.

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