

REDUCING MOTHERS' ANXIETY PRE-NORMAL LABOR WITH SOUND HEALING THERAPY

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ABSTRACT

Background : Normal childbirth often causes anxiety that can have a negative impact on the mother's physical and psychological condition.

Purpose: One non-pharmacological effort that is starting to be used to reduce anxiety is sound healing therapy which utilizes soothing sound frequencies to create relaxation.

Methods : This study is a Pre-Experimental study with the one group pretest posttest design. The study was conducted at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City. The study population was 30 people, and all of them were used as samples (total sampling).

Results : Data analysis was carried out univariately and bivariately using paired sample t-test at a 95% confidence level ($\alpha = 0.05$). The results showed that most mothers before normal delivery at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City experienced a decrease in anxiety from the severe category (70.0%; mean $30.13 \pm 6,056$) before therapy to the mild category (43.3%; mean $18.63 \pm 4,860$) after being given sound healing therapy. Statistical testing results showed that sound healing therapy was effective with an intervention duration of 20–40 minutes (a standard 30-minute session), administered twice weekly for four weeks (8 sessions) from 36 weeks of gestation until delivery, reducing maternal anxiety before normal labor.

Conclusion: Midwives are recommended to utilize sound healing therapy as a supportive non-pharmacological method to provide emotional comfort to mothers approaching labor, and further research with larger sample sizes is encouraged to strengthen the scientific evidence.

Keywords: Anxiety, Normal Labor, Sound Healing

Received: January 7th, 2026; Revised: July 2nd, 2026; Accepted: July 3rd, 2026

DOI:<https://doi.org/10.36720/nhjk.v15i1.878>

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BACKGROUND

Normal childbirth is a natural process that every woman experiences on her journey to motherhood. This moment brings joy because of the arrival of a baby, but it also often brings anxiety due to the uncertainty that accompanies it (Sari & Rimandini, 2022). Mothers planning a natural birth often experience anxiety, especially during the third trimester. Anxiety increases as various questions arise, such as whether the delivery will proceed normally, whether the baby will be born safely, and so on (Pratiwi, 2019). Anxiety that arises before labor can affect the mother's physical and mental readiness, and even potentially prolong the labor process (Ujiningtyas, 2019).

Globally, the prevalence of anxiety symptoms in the third trimester of pregnancy is quite high. A meta-analysis involving more than 200,000 women from 34 countries showed that approximately 24.6% of pregnant women experienced anxiety symptoms in the final trimester (Dennis, et al., 2017). This condition not only impacts the psychological aspects but also the physical health of the mother, which can affect the quality of labor and the well-being of the unborn baby.

Prenatal anxiety rates in Indonesia are reportedly quite high. Local research indicates that the prevalence of anxiety in pregnant women during the third trimester reaches 69–73% (Hariyanti, et al., 2021). Anxiety that is not handled properly can cause various symptoms such as difficulty sleeping, stress, excessive fear, and even affect the emotional bond between mother and baby (Hawari, 2021; Varney, 2018). High levels of anxiety are also associated with an increased risk of obstetric complications and a poorer quality of birth experience.

Efforts to address anxiety before childbirth can be undertaken through pharmacological and non-pharmacological approaches. Pharmacological approaches using anti-anxiety medications have limitations due to potential side effects for the mother and fetus (Aizid, 2019). For this reason, a non-pharmacological approach is recommended, one of which is sound therapy or sound healing. Sound healing is a therapy method that uses specific sound vibrations or music to help achieve relaxation, calm the mind, and balance emotional states (Vibrations, 2021). This therapy often utilizes traditional instruments such as singing bowls, gamelan, or natural sounds (Djohan, 2020).

Several studies have reported that music therapy is effective in reducing anxiety levels and improving physiological parameters in mothers before and during labor. A recent meta-analysis showed that music interventions can significantly reduce anxiety scores, blood pressure, and heart rate in laboring mothers compared to a control group (Lin et al., 2019; Pascal et al., 2023). Research by Laska et al. (2020) showed that providing natural sound music therapy had a significant effect on reducing cortisol levels. Imawati's research (2019) also found that after nature music intervention, the proportion of patients with panic anxiety decreased to 0%, and moderate anxiety decreased to 9.5%. Statistical tests showed that nature music therapy was effective in reducing anxiety in preoperative patients.

However, there are several gaps in existing studies. First, most studies were conducted in large hospitals or referral institutions, while empirical evidence regarding the effectiveness of sound healing in midwives' independent practice is still very limited. Second, the use of the term "sound healing" in research is inconsistent; some use instrumental music, murattal, and even nature sounds without clear standards for duration or frequency of therapy. Third,

data on the prevalence of anxiety in pregnant women in Indonesia tends to be based on descriptive surveys without specific interventions, thus providing little insight into the effectiveness of non-pharmacological methods such as sound healing in reducing anxiety. This situation indicates the need for further research with designs that focus more on local settings.

Based on a preliminary survey of 10 mothers who were about to undergo normal labor at Midwife Rusni Dewi's Independent Practice in Padangsidempuan City, it was found that 3 mothers appeared calmer due to their previous childbirth experience and were confident that the delivery process would go smoothly. However, 7 other mothers showed anxiety and nervousness before delivery, especially among first-time mothers or those with previous childbirth experiences who feared possible complications. This condition is in line with the findings of various studies that state that anxiety before normal labor is experienced more by primigravida than multigravida, and can be influenced by lack of experience, fear of pain, and concerns for the safety of both mother and baby. To date, health workers at Midwife Rusni Dewi's Independent Practice have never implemented the method *Sound Healing* based on natural sounds as a non-pharmacological intervention to help reduce maternal anxiety levels before normal delivery.

METHODS

This research is a research *Pre-Experimental* with a one-group pretest-posttest design. The research location was Midwife Rusni Dewi's Independent Practice in Padangsidempuan City. The study population was 30 people, and all of them were used as a sample (total sampling). The sound healing therapy protocol for mothers before normal labor is as follows:

1. Type of Intervention

Sound therapy (*sound healing*) by playing music downloaded from the YouTube channel: Healing Vibration entitled Release Anxiety & Tension | Soft Crystal Singing Bowl Sound Bath | Meditation Music | Sleep Music, from the internet link: <https://www.youtube.com/watch?v=WCuZRbHER0g> with a duration of 1:06:45 seconds which is listened to using headphones / headset.

2. Session Duration

Based on music research evidence *sound healing* therapy, that the effective duration of intervention is 20–40 minutes per session (Lin et al., 2019; Pascal et al., 2023). Of the total video duration (1 hour 6 minutes), each participant was played music for 30 minutes per session as a standard intervention.

3. Frequency

The frequency of activities is 2 times per week, for 4 weeks (8 sessions) starting from 36 weeks of pregnancy until delivery.

The variables measured were maternal anxiety before normal delivery, before and after therapy using a measurement scale from *Hamilton Rating Scale for Anxiety* (HRS-A) (Hawari, 2021). Data analysis was conducted univariately and bivariately using paired sample t-test at 95% confidence level ($\alpha=0.05$).

RESULTS

Respondent Characteristics

No	Respondent Characteristics	Amount	Percentage (%)
1.	Age		
	- ≤ 20 years	0	0.0
	- 21 – 35 years	26	86.7
	- > 35 years	4	13.3
2.	Last education		
	- Elementary (Elementary / Middle School)	3	10.0
	- Middle School (SMA)	22	73.3
	- Higher Education (College)	5	16.7
3.	Work		
	- Work	6	20.0
	- Doesn't work	24	80.0
4.	Delivery to		
	- First	10	3.3
	- Second	16	53.4
	- Third	4	13.3
	- > Fourth	0	0.0

Based on the research results, the characteristics of the respondents can be seen in the following table.

Table 1. Frequency Distribution of Respondent Characteristics (n = 30 people)

The table above shows that the majority of respondents were aged 21–35 years (86.7%), with a small proportion aged >35 years (13.3%). Based on their highest level of education, the majority of respondents had secondary education (high school) (73.3%), while a small proportion had primary education (elementary/junior high school) (10.0%). The majority of respondents were unemployed (80.0%), while those who were employed (20.0%). The majority of respondents were undergoing their second delivery (53.4%), while a small proportion were undergoing their third delivery (13.3%).

Univariate Analysis

Anxiety of Normal Prenatal Mothers (Pretest)

Table 2. Distribution of Anxiety of Mothers Pre-Normal Delivery Before Sound Healing Therapy (Pretest)

No	Anxiety (Pretest)	Amount	Percentage (%)
1.	No Worries	0	0.0
2.	Mild Anxiety	2	6.7
3.	Moderate Anxiety	7	23.3
4.	Severe Anxiety	21	70.0
5.	Very Worried	0	0.0
Total		30	100.0

The table above shows that before the therapy method *sound Healing* (pretest) Most mothers before normal delivery felt anxiety in the severe category (70.0%), a small portion felt anxiety in the mild category (6.7%).

Table 3. Descriptive Data on Maternal Anxiety (Pretest)

Descriptive	Mean	Standard Deviation	Min	Max
Anxiety (Pretest)	30.13	6,056	17	40

The table above shows that descriptively the average value(*mean*)maternal anxiety before normal delivery before sound healing method therapy (pretest) was 30.13, standard deviation was 6.056, lowest score (min) was 17, highest score (max) was 40.

Anxiety of Normal Pre-Delivery Mothers (Posttest)

Table 4. Distribution of Anxiety in Pre-Normal Delivery Mothers After Sound Healing Therapy (Posttest)

No	Anxiety (Posttest)	Amount	Percentage (%)
1.	No Worries	6	20.0
2.	Mild Anxiety	13	43.3
3.	Moderate Anxiety	11	36.7
4.	Severe Anxiety	0	0.0
5.	Very Worried	0	0.0
Total		30	100.0

Table 4. above shows that after administering the therapy method *soundhealing* (posttest) during 8 treatments (2 times a week for 4 weeks) most mothers felt mild anxiety (43.3%), a small number had no anxiety (20.0%).

Table 5. Descriptive Data on Maternal Anxiety Before Normal Delivery (Posttest)

Descriptive	Mean	Standard Deviation	Min	Max
Anxiety (Posttest)	18.63	4,860	9	26

The table above shows that descriptively the average value(*mean*)maternal anxiety before normal delivery after sound healing method therapy (posttest) was 18.63, standard deviation was 4.860, lowest score (min) was 9, highest score (max) was 26.

Bivariate Analysis

Data Normality Test

The normality test is a prerequisite analysis test for hypothesis testing using the T test. The data normality test used is the T test. *Shapiro-Wilk* because the number of samples is < 50 people, the results can be seen in the following table.

Table 6. Results of Data Normality Test Using the Shapiro-Wilk Test

Normal Prenatal Maternal Anxiety	Shapiro-Wilk			Information
	Statistics	df	sig.	
Anxiety (Pretest)	0.968	30	0.494	Normal
Anxiety (Posttest)	0.956	30	0.245	Normal

The table above shows the results of the normality test using the test *Shapiro Wilk* shows that the anxiety of mothers before normal delivery before and after sound healing therapy is normally distributed, because the p value is > 0.05 , namely the anxiety of mothers before normal delivery before sound healing therapy (pretest) is 0.494 and the anxiety of mothers after sound healing therapy (posttest) is 0.245. Based on the results of the data normality test, it can be stated that the data is normally distributed, so the test used is the Paired Sample T-Test.

Paired Sample T-Test

Based on the research results, the difference in maternal anxiety before normal delivery before and after sound healing therapy method in the following table.

Table 7. Paired Sample T-Test Results of Anxiety of Pre-Normal Delivery Mothers Before and After Sound Healing Therapy

Anxiety	Mean	Standard Deviation	p-value	Mark t-count	Mark t-table
<i>Pretest</i>	30.13	6,056	0,000	41,912	1,699
<i>Posttest</i>	18.63	4,860			

The results of the analysis show that the average level of anxiety of mothers before delivery was normal before therapy. *sound healing* was 30.13 with a standard deviation of 6.056, while after the intervention it decreased to 18.63 with a standard deviation of 4.860. The Paired Sample T-Test obtained $p = 0.000 < 0.05$ and a t value = 41.912 which is greater than the t-table (1.699) at $df = 29$, so it was concluded that sound healing therapy had a significant effect in reducing maternal anxiety before normal delivery at the Independent Practice of Midwife Rusni Dewi, Padangsidempuan City.

DISCUSSION

Anxiety of Normal Prenatal Mothers (Pretest)

The results of the study showed that before the therapy method *sound Healing*, it was found that the majority of mothers before normal delivery at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City felt anxiety in the severe category (70.0%), while a small portion felt anxiety in the mild category (6.7%). The results of Suharnah's research (2021) at the Turikale Community Health Center in Maros Regency showed that the frequency distribution of anxiety levels in primigravida pregnant women in the third trimester before classical music therapy was given was mild anxiety (21.7%), moderate anxiety (52.2%), and severe anxiety (26.1%). Sembiring's research (2023) In the Independent Practice of Midwives in Pinondang Hutasoit, it was found that the anxiety level of pregnant women facing childbirth before being given 30 minutes of music therapy had a highest score of 31 and a lowest score of 13, with an average anxiety level of 21.35 (moderate anxiety). Isnaningsih's

research(2020)at BPM Isnaningsih, Gedangan Village, Tuntang District, it was shown that anxiety in the first active phase in mothers giving birth before listening to the Al-Quran recitation mostly experienced moderate anxiety (96.7%) and those who experienced severe anxiety (3.3%).

Anxiety is a subjective response to stress. The characteristics of anxiety are worry, distress, uncertainty, or fear that occur due to a real or perceived threat.(Isaacs, 2021). Anxiety is an emotional response to an assessment that describes a state of worry, restlessness, fear, and restlessness accompanied by various physical complaints.(Stuart & Sundeen, 2017). Furthermore, anxiety can trigger recurring bodily reactions such as an empty stomach, shortness of breath, heart palpitations, profuse sweating, headaches, and the urge to urinate or defecate. These feelings are accompanied by the urge to move to escape the thing you're worried about.(Hawari, 2021).

According to researchers, the results showed that before the sound healing therapy, most mothers in pre-natal care at the Rusni Dewi Midwifery Practice in Padangsidempuan City experienced severe anxiety. The severe anxiety experienced by 70% of mothers before delivery is generally related to uncertainty and major changes in their lives. Mothers feel anxious due to fear of pain, medical complications, or their inability to control the situation. Furthermore, uncertainty about the health of their baby and themselves can also increase anxiety, especially if there are certain medical histories or risk factors that they must consider. Expectations from family, partners, and society in general can add to mothers' mental burden, triggering concerns about their abilities as mothers and potential changes in interpersonal relationships.

Anxiety of Normal Pre-Delivery Mothers (Posttest)

The results of the study showed that after sound healing therapy, the majority of mothers in pre-normal labor at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City experienced mild anxiety (43.3%), while a small proportion did not experience any anxiety (20.0%). Suharnah's research(2021)at Turikale Community Health Center showed that the frequency distribution of anxiety levels in primigravida pregnant women in the third trimester after classical music therapy was given was not anxious (26.1%), mildly anxious (47.8%), and moderately anxious (26.1%). For research by Isnaningsih(2020)In the BPM Isnaningsih Gedangan Village, Tuntang District, it was shown that the anxiety in the first active phase of labor in mothers after listening to the Al-Quran recitation was mostly mild anxiety (96.7%) and moderate anxiety (3.3%). Sembiring's research(2023)In the Independent Practice of Midwife Pinondang Hutasoit, it was found that the level of anxiety of pregnant women in facing childbirth after being given music therapy for 30 minutes in pre-natal patients with the highest value being 16 and the lowest value being 4, and the average value of the anxiety level was known to be 9.39 (mild anxiety).

The WHO defines normal labor as one that begins spontaneously, is low-risk at the beginning of labor, and remains so throughout the labor process. The baby is born spontaneously in a cephalic presentation between 37 and 42 completed weeks of gestation. After delivery, both mother and baby are in good health.(Ujiningtyas, 2019). Normal delivery is a delivery that occurs during a term pregnancy (not premature or postmature), has a spontaneous onset (not induced), is completed after 4 hours and before 24 hours from the time

of onset (not a precipitous labor or prolonged labor), has a fetus (single) with a vertex presentation (top of the head) and occiput in the anterior part of the pelvis, is carried out without artificial assistance (such as forceps), does not include complications (such as heavy bleeding), and includes normal delivery of the placenta (Kasdu, 2020).

According to researchers, the results of the study showed that after the therapy methods sound. In a study of pre-natal care, some mothers at the Rusni Dewi Midwifery Independent Practice in Padangsidempuan City experienced mild anxiety. Sound healing therapy can have a calming effect on the body and mind, reducing stress and anxiety levels. The carefully selected sounds in this therapy can stimulate a relaxation response in the nervous system, reducing muscle tension, and improving overall well-being. Of the 13 mothers who experienced mild anxiety, it was reported that they experienced positive changes in their mood and perception of the labor process, helping them navigate the situation with greater calm and control.

Sound Healing Therapy in Reducing Mother's Anxiety Before Normal Delivery

The results of the study show that there is a difference or decrease in maternal anxiety before normal delivery before and after being given sound healing therapy at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City, with a $p\text{-value} = 0.000 < 0.05$, it was concluded that sound healing therapy had an effect on reducing maternal anxiety before normal delivery. In line with research Imawati (2019) At Sultan Agung Islamic Hospital in Semarang, the results showed that the anxiety levels before the intervention of natural sound music therapy were at the level of panic (23.8%), severe anxiety (33.3%), moderate anxiety (22.8%), mild anxiety (4.8%), and no anxiety (14.3%). After the intervention of natural sound music therapy, there was an increase and decrease. At the level of panic (0%), severe anxiety (33.3%), moderate anxiety (9.5%), mild anxiety (34.1%), and no anxiety (19.0%). The results of statistical tests obtained significant results, that the natural sound music relaxation technique can reduce anxiety levels in pre-operative patients. The results of the research by Laska et al. (2020) At Semarang City Hospital, the results obtained on the difference in cortisol levels obtained results with a $p\text{-value}$ of 0.010 ($p\text{ value} < 0.05$). The conclusion of the study shows that there is an effect of the duration of natural sound music therapy on cortisol levels.

Sound healing A therapy that utilizes music and sound elements to improve physical and emotional health. This therapy works through entrainment, a process that aligns brain waves with soothing sound frequencies. This signals the body to adjust to healthier vibrations, facilitating the natural healing process. (Djohan, 2020) According to Goldman, a pioneer of sound healing, healing occurs through the formula "Frequency + Intention = Healing." The positive intention added to the therapy helps focus the energy, making the results more significant. (Corey, 2019).

The results of this study prove that sound healing therapy can reduce maternal anxiety before normal delivery at the Independent Practice of Midwife Rusni Dewi in Padangsidempuan City due to the calming effect produced by soft and harmonious sounds. These sounds have been shown to stimulate a relaxation response in the nervous system, reduce muscle tension, calm anxious thoughts, and shift the mother's attention from anxiety to more pleasant and positive sensory experiences. The effectiveness of this therapy is also in line with

previous research recommendations stating that the most optimal intervention duration is 20–40 minutes, with a standard of 30 minutes per session, and a frequency of 2 times per week for 4 weeks (8 sessions) from 36 weeks of pregnancy until delivery. Thus, the implementation of this protocol not only helps mothers face labor with more calm and control but also strengthens the emotional bond between mother and unborn baby.

CONCLUSION

The results of this study conclude that sound healing therapy is effective with an intervention duration of 20–40 minutes, namely a standard duration of 30 minutes per session, and a frequency of 2 times per week for 4 weeks (8 sessions) from 36 weeks of pregnancy until delivery can reduce maternal anxiety before normal delivery, indicated by a significant difference in the average anxiety before and after the intervention. The suggestion from this finding is that midwives and health workers can utilize sound healing therapy as a supporting non-pharmacological method in providing emotional comfort for mothers approaching delivery, as well as encouraging further research with larger samples to strengthen scientific evidence.

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