

# The effect of hypnobirthing relaxation on the scale Pain in labor during the active phase I

Debby Pratiwi<sup>1</sup>, Dalimawaty Kadir<sup>2</sup>, Julina Br Sembiring<sup>3</sup>

<sup>1,3</sup> Midwifery Department, Faculty of Pharmacy and Health, Institut Kesehatan Helvetia, Medan, Indonesia

<sup>2</sup>Department of Teacher Training and Education, STKIP Asy-Syafi'iyah International, Medan, Indonesia

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## ABSTRACT

The hypnosis method can be carried out from pregnancy to delivery, it can help reduce anxiety and fear levels. Hypnosis techniques can help relax the muscles so that the mother avoids anxiety and can help the mother be more calm in facing labor. Objective: This study was to determine the effect of implementing hypnobirthing on reducing pain during labor at the Wanti Midwife Clinic in Medan in 2022. Methods: This study used a quasi-experimental method with one group pretest and post test without control design. The population is 15 mothers giving birth in September 2022. Data analysis uses univariate and bivariate analysis with paired match pair tests. Results: The results showed that of the 15 respondents, before being given hypnobirthing the majority of respondents experienced severe pain 6 people (40.0%) and the minority reduced unbearable pain 9 people (60.0%). after being given hypnobirthing the majority of respondents experienced moderate pain 14 people (93.3%) and a minority experienced severe pain 1 respondent (6.7%). The average pain before being given hypnobirthing was 2.60. The average pain after being given hypnobirthing was 1.07 with a  $p$ -value of 0.000 ( $<0.05$ ). Conclusion: The conclusion shows that there is an effect of reducing pain before and after hypnobirthing is carried out for mothers giving birth at the Wanti Midwife Clinic. It is recommended that health workers improve their skills (participate in training and seminars) in efforts to assist childbirth using the hypnobirthing method.

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## Corresponding Author:

Debby Pratiwi,

Midwifery Department, Faculty of Pharmacy and Health,

Institut Kesehatan Helvetia, Medan, Indonesia

Jalan Katen Sumarsono no.107 Mean Helvetia kode pos: 20762, Indonesia

Email: [debbypratiwi@helvetia.ac.id](mailto:debbypratiwi@helvetia.ac.id)

## INTRODUCTION

Almost all women feel fear when facing the process of giving birth or delivery. Fear about childbirth occurs because almost everyone states that childbirth or delivery is a moment of life and death for a woman. The fear of women when facing labor makes their whole body tense and prevents their bodies from carrying out their physiological functions to give birth comfortably. As a result, they experience a long labor process and are very painful so they need medical intervention that is not really needed if their bodies can relax (Devi et al., 2018).

Hypnobirthing (relaxation) is a technique in behavior therapy developed by Jacobson and Wolpe. This technique can reduce physiological tension and anxiety. This technique has been used to help mothers-to-be deal with labor pains. Relaxation is a pain control method that provides women with great input (Irianti, 2019).

Pain during childbirth is unique and different for each individual, pain has certain characteristics that are the same or are general in nature. To reduce pain there are several supporting measures that can be given, including: Adjusting the position of mobilization can help the mother to remain comfortable, therefore allowing the birthing mother to choose her own delivery position has many advantages, for example reducing discomfort, reducing perineal trauma, makes it easier to press and relaxation and breathing exercises can help mothers to reduce pain (Ardhiyanti, 2017).

Labor pain is a subjective experience due to changes in organ function that are seen in determining the progress of labor through the birth canal. The level of labor pain is described by the intensity of pain perceived by the mother during labor. The intensity of pain depends on the sensation of the severity of the pain itself (Simatupang & Mangkuji, 2020).

The hypnosis method can be done starting from the time of pregnancy, it can help reduce anxiety and fear levels. The basis of this method is actually well known in one of the non-pharmacological pain management known as guided imagery which is developed with various techniques, one of which is hypnosis (Idris, 2019). Hypnosis techniques can help relax the muscles so that the mother avoids anxiety and can help the mother be calmer in facing labor (Maryunani, 2020).

The intensity of labor pain can be determined by asking the level of intensity or sulking on the pain scale. This is done when the mother cannot describe the pain (Gobel & Kurnaesih, 2020). On a scale of 0-10 (numeric scale), a descriptive scale that describes the intensity of no pain to unbearable pain, a scale with cartoon facial profiles and so on. The average pain intensity of women in labor during the first active phase is described by a VAS scale of 6-7 parallel to the severity intensity on the descriptive scale (Bülez et al., 2018). The World Health Organization (WHO) reports that every year more than 200 million pregnant women, most pregnancies end in the birth of live babies to healthy mothers, even though in some cases birth is not a happy event but becomes a happy period. filled with pain, fear, suffering and even death (Sari & Rimandini, 2014).

The Indonesian Hospital Association Data Center explained that 15% of mothers in Indonesia experienced childbirth complications and 22% stated that deliveries were in North Sumatra Province. The implementation of hypnobirthing had also been carried out by pregnant and giving birth women such as in the city of Medan, Tebing Tinggi, Binjai. As in the research conducted by Yulida Effendi Nasution, Asrul in 2018 with the title the relationship between mother's perceptions of hypnobirthing and pain reduction in normal birth mothers at the Diana Medan clinic with a p value of 0.013 <0.005 there is a relationship between the hypnobirthing method and pain reduction (Nasution & Asrul, 2018). The Indonesian Hospital Association Data Center explained that 15% of mothers in Indonesia experienced childbirth complications and 22% stated that the labor they experienced was a painful labor because they felt severe pain during labor, while 63% did not receive information about the preparations that must be made to reduce pain in labour (Putra, 2018).

The implementation of hypnobirthing currently exists in several clinics in the city of Medan. Such as Medan Johor, Medan Denai, Pulo Brayan, Medan Selayang. Like the research conducted by Intan Kumala Putri in 2017 with the title Effect of hypnobirthing on labor pain in active phase I in-partu mothers at the maternity clinic in Medan Denai. From the results of the research conducted, it can be concluded that the area has implemented hypnobirthing to reduce pain during labor experienced a painful labor because they felt severe pain in labor, while 63% did

not receive information about the preparations that must be made to reduce pain in labor (Putri, 2018).

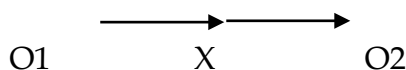
Based on research conducted by Eka Sriwahyuni in 2019 with the title "The Effect of Hypnobirthing Relaxation Techniques on Reducing Pain in the First Stage of Normal Labor", this research was conducted to determine the effect of hypnobirthing relaxation techniques on reducing pain in the first stage of normal labor in primiparas at Rumah Sehat Kasih Bunda Tahun 2019. The result is a p value of  $0.000 < 0.05$  which indicates that there is an influence of the hypnobirthing relaxation technique on normal delivery because there is a decrease in pain in the first stage of normal labor in primiparas after hypnobirthing (Sriwahyuni et al., 2019).

The hypnobirthing method is based on the belief that every woman has the potential to carry out the birthing process naturally, quietly, and comfortably (without pain). Pain reduction techniques in pregnant women must be mastered more by health workers, especially midwives. The results of several studies indicate that therapy hypnobirthing can speed up stage 1 labor. The hypnobirthing method is used for control the mind, include positive suggestions in the mother's mind, so as to provide a feeling of relaxation to the mother and increase the welfare of the mother to be able to encourage the physiological process of childbirth. Currently, many methods of pain management without drugs have been developed based on research results. One of the methods for dealing with labor pain without drugs that can be developed by midwives is the hypnobirthing method of delivery. By providing safe and comfortable non-pharmacological methods of delivery Hypnobirthing techniques can relax the muscles so that the mother avoids anxiety and makes the mother more calm in facing the birth process. The purpose of hypnobirthing is not only giving birth without pain, but the main thing is that the baby is in the womb. In a state of anxiety and the perception that childbirth must be painful, childbirth for pregnant women will actually endanger the safety of the fetus and the mother. Therefore the benefits of the Hypnobirthing birth process are an alternative that can be applied in reducing the number of maternal and fetal deaths as well as creating a sense of comfort and calm in the delivery process.

## RESEARCH METHOD

### Research design

This study uses a quasi-experimental method (Quasi Experiment) with one group pretest and post test without control design which is pretested first before intervention is given to respondents, then after the intervention is carried out a post test is called a quasi experiment with one group pretest and post test without control design because the researcher only intervened in one group without a comparison, and the subject group was observed before the intervention was carried out and then observed again after the intervention. This used a 1 group design for before and after the intervention (one group pre-post test).



O1 : Measuring the respondent's pain before being given treatment

X : Giving treatment in the form of hypnobirthing

O2 : Measuring the respondent's pain after being given treatment

### Research Location and Time

#### a. Location

This research was conducted at the Wanti Midwifery Clinic because this clinic has hypnobirthing methods, has facilities, places and types of labor assistance in accordance with APN (Normal Maternity Care).

#### b. Research Time

This research is carried out from February to September 2022 starting from the literature search, title submission, initial survey, completion and guidance in the preparation of the proposal, proposal seminar, Research, guidance in research, research results seminar.

### Population and Sample

#### a. Population

Population is a research target that relates to a group of subjects, both humans, symptoms, test scores on objects, or events. (23) The population in this study as case subjects are all mothers giving birth in September 2022.

#### b. Sample

The sample is part of the population which is seen as representative of the population. (23) Sampling in this study used accidental sampling where the sample was taken by chance for mothers who gave birth at the Wanti Midwife Clinic in Medan in September 2022 as many as 15 respondents.

### Data collection technique

- a. The type of data collection used in this research is primary data. Where this primary data can be taken directly by starting direct interviews using a measuring instrument in the form of a questionnaire consisting of 10 questions and 10 pain scales regarding the implementation of hypnobirthing to reduce pain in the labor process.(23)
- b. Secondary data is data obtained from the results of documentation by other parties, for example medical records, value recapitulation, patient visit data, and others. (22) The secondary data in this study is data obtained from clinical midwives about the number of mothers who give birth at the Midwife Wanti clinic.
- c. After the data is obtained, it will be tabulated and interpreted through a computer program

### Data analysis technique

The data that has been collected is analyzed using a computer program:

- a. Univariate analysis was used to describe the data carried out on each variable from the research results. Performed to obtain the distribution of births.
- b. After knowing the characteristics of each variable in this study, the analysis was continued at the bivariate level. To determine the effect (correlation) between the independent variables (independent variables) with the dependent variable (the dependent variable). Before carrying out the statistical analysis technique that will be used, first check the validity of the sample, namely the normality test. The data normality test needs to be done to find out whether the sample studied came from a normally distributed population or not. In this study the normality test used was the Shapiro-Wilk test. In this study, the distribution of the data obtained was not normal based on the results of the normality test using the Shapiro-Wilk test. It obtained a sign value  $<0.05$ , which means that the data was not normal, so the test used to assess the average pretest and posttest results used the Wilcoxon test.

## RESULTS AND DISCUSSIONS

Based on the results of the study, it can be seen that the frequency distribution of hypnobirthing pain reduction is shown in the table below:

### Frequency Distribution of Pain Reduction Before (Pretest) hypnobirthing

**Table 1.** Frequency Distribution of Pain Reduction Before (Pretest) hypnobirthing in the Clinic Bidan Wanti in Medan

No	Pain (Pre test)	Frequency (F)	Percentage (%)
1	Severe Pain	6	40.0
2	Unbearable Pain	9	60.0
Reduction of pain (Post test)			
1	Moderate Pain	14	93.3
2	Severe Pain	1	6.7
<b>Amount</b>		15	100.0

The frequency distribution of pain reduction shows that before being given hypnobirthing, the majority of respondents experienced severe pain as many as 6 people (40.0%) and the minority reduced unbearable pain as many as 9 people (60.0%). The frequency distribution shows that after being given hypnobirthing the majority of respondents experienced moderate pain as many as 14 people (93.3%) and a minority experienced severe pain as much as 1 respondent (6.7%).

#### Mean Reduction of Pain Before (Pretest) and After (Postest) Hypnobirthing

**Table 2.** Mean Reduction of Pain Before (Pretest) and After (Postest) Hypnobirthing at the Clinic Bidan Wanti Medan

Feeling Pain	Mean	Standart Deviasi	95% interval of difference	
			Lower	Upper
Pre- test <i>Hypnobirthing</i>	2.60	0.507	2.32	2.88
Post_test <i>Hypnobirthing</i>	1.07	0.258	0.92	1.21

Based on table 2 it can be seen that for the mean value of reducing pain in women giving birth before and after hypnobirthing is done, before hypnobirthing is done the average pain is 2.60 and after hypnobirthing is done the average pain is 1.07.

#### Frequency Distribution of Pain Reduction Before (Pretest) hypnobirthing

**Table 3.** Frequency Distribution of Pain Reduction Before (Pretest) hypnobirthing at the Clinic Bidan Wanti Medan

No	Pain (Pre test)	Frequency (F)	Percentage (%)
1	Severe Pain	6	40.0
2	Unbearable Pain	9	60.0
Reduction of pain (Post test)			
1	Moderate Pain	14	93.3
2	Severe Pain	1	6.7
<b>Amount</b>		15	100.0

Based on table the frequency distribution of pain reduction shows that before being given hypnobirthing the majority of respondents experienced severe pain as many as 6 people (40.0%) and the minority reduced unbearable pain as many as 9 people (60.0%). The frequency distribution shows that after being given hypnobirthing the majority of respondents experienced moderate pain as many as 14 people (93.3%) and a minority experienced severe pain as much as 1 respondent (6.7%).

#### Normality of Data Before (Pretest) and After (Postes) Hypnobirthing

**Table 4.** Normality of Data Before (Pretest) and After (Postes)  
Hypnobirthing was performed at the Clinic Bidan Wanti Medan

Pain (Pretest) and (Posttest)	Statistik	Shapiro Wilk	
		Df	Sig
Pre-test Hypnobirthing	0.630	15	0.000
Post_test Hypnobirthing	0.284	15	0.000

Based on table it is shown that the data is not normally distributed with sig values  $<0.05$  so that the Wilcoxon test requirements are fulfilled. The normality test uses the Shapiro-Wilk because the number of respondents is  $<50$  people.

### Hypnobirthing Implementation Test with Reduction of Pain Before and After Hypnobirthing

**Table 5.** Hypnobirthing Implementation Test with Reduction of Pain Before and After  
Hypnobirthing is Performed in the Clinic Bidan Wanti Medan Tahun 2021.

Pain (Pretest) and (Posttest)		N	Mean Rank	Sum Of Ranks	P-Value
Pre-Test	Negatif Rank	15	8.00	120.00	0.000
Post_test	Positif Ranks	0	0.00	0.00	
	Teis	0			
	Amount	15			

Likewise, the Wilcoxon sample test was used to determine the difference in the average pain reduction before and after hypnobirthing. The mean reduction in pain before and after hypnobirthing was carried out decreased statistically, namely a reduction in pain in mothers giving birth was  $\rho = 0.000$  or less than  $<0.05$ , which means that there was an effect of reducing pain before and after hypnobirthing was carried out.

## Discussion

### The Effect of Pain in Maternity Before (Pretest) and After (Postest) Doing Hypnobirthing

The results of the analysis in table show that the average (mean) pain before is 8.20 and it can be concluded that there is a difference in the average (mean) pain before and after being given hypnobirthing with the Behavior Observation scale after (posttest) giving hypnobirthing having an average 1.07. Based on the results of the Paired Match pair test statistic, it obtained a  $\rho$ -value of 0.000 ( $<0.05$ ) from the results of this study, it can be concluded that there is an effect of implementing hypnobirthing by reducing pain in the delivery process after being given the hypnobirthing therapy method. The test results answered and accepted the initial research hypothesis that there was an effect of implementing hypnobirthing by reducing pain in the labor process.

Hypnobirthing emphasizes the emergence of positive suggestions, feelings of calm, and relaxation that make you comfortable. When conditions are calm and relaxed, the brain will automatically release endorphins which reduce pain and reduce anxiety and give a sense of comfort. However, if you feel panic, fear, or stress during labor, the brain will release substances that block the release of endorphins. The more afraid a person is at the time of giving birth, the greater the pain that will be felt. However, hypnobirthing is able to make the mother relax and not panic so that the pain during childbirth is reduced and the birthing process will run smoothly (Yuni Fitriana, S.ST. & Ari Andriyani, 2019).

The results of this study are in line with research conducted by padoli, Supatmi ningsih with the title of the effect of hypnobirthing in reducing active phase I labor pain in primigravida mothers. The results of the study showed that 12 primigravida mothers did hypnobirthing in the sufficient category, 6 in the good category and 5 in the poor category. 6 people experienced mild pain, 11 people experienced bothersome pain and 6 people experienced severe pain during the first

stage of labor in the active phase of primigravida mothers where mothers who did good hypnobirthing experienced a decrease in pain ( $p=0.002$ ) (Padoli, 2021).

The results of this study are in line with the results of research conducted by Muji Rahayu, et al with the title *Effects of Hypnobirthing on Pain Management during Childbirth at UPT Puskesmas Sukamaju Kab. North Luwu, 2020*. Method: This type of research is a quantitative study with a quasi-experimental method approach, namely an experimental design with the observation method (pain intensity measurement) before and after Hypnobirthing treatment and a control group. Sampling was carried out using the accidental sampling method. The number of samples in the intervention group (Hypnobirthing) was 12 respondents and the control group was 9 respondents. Data analysis methods use univariate and bivariate analysis with the T-Test. Results: The statistical test results obtained a value of 0.000 at an error rate ( $\alpha$ ) of 5% or 0.05 (95% confidence) so that the value  $<\alpha$ . The data showed that there was a significant effect on hypnobirthing treatment on the pain that was overcome during childbirth. The results showed that the average pain intensity in mothers after being given hypnobirthing decreased while the control class experienced an increase. The hypnobirthing method can reduce pain intensity in birthing mothers while in the control group it increases pain (Rahayu, 2020).

The results of this study are not in line with the results of Try Afriyani's research with the title *the effect of hypnobirthing techniques on pain intensity in vaginal delivery in primiparas at the Summime maternity clinic in 2012*. From the results of the chi square statistical test, it was found that there was no effect of hypnobirthing techniques on reducing pain in labor in primiparas. before and after hypnobirthing with a value of  $p = 0.002$ . From the results of this study it can be proven that the effect of hypnobirthing techniques on reducing pain intensity in vaginal delivery in primiparas does not affect the decrease in pain intensity in vaginal delivery (Afriyani, 2018).

The phenomenon is that in several areas of health service practice, not a few mothers who give birth scream and feel confused about the delivery process they are going through, and generally health workers think that this is a normal feeling for every mother who gives birth (Sriwahyuni et al., 2019). Midwives as health service workers, especially in the field of maternal and child health, are one of the important factors in the delivery process as birth attendants. It is a demand that midwives can also become innovators by using the latest methods of caring for mothers, one of which is the hypnobirthing method (Aprilia, 2018).

According to the researchers' assumptions, hypnobirthing has an effect on reducing pain in mothers giving birth, from the results (pretest) of mothers who experience severe pain because mothers are too focused on their pain and cannot control their emotions and mothers who experience unbearable pain because mothers are giving birth for the first time or primiparous mother so that the mother only focuses on the fear and pain she is experiencing. According to the researchers' assumptions, the application of hypnobirthing techniques to the labor process has an effect on the level of labor pain. Mothers who underwent hypnobirthing during labor experienced lower levels of labor pain compared to mothers who did not receive hypnobirthing during labour. This can be from the results of research with the Wilcoxon test where  $p = 0.000$  means that there is an effect of hypnobirthing on labor pain. And with the hypnobirthing method it makes the mother understand more about the birth process she is going through so that it has an impact on the mother being calm in facing the birth process and the pain that is felt becomes controlled so that the pain can be reduced. However, the application of this hypnobirthing technique must be carried out in stages or taught in classes for pregnant women, and taught at least 2 weeks before the mother gives birth, because if when the mother is about to give birth and at the same time we teach the hypnobirthing technique, the results will not be effective so that the results will have no effect. The effect of hypnobirthing on reducing pain based on the results shows that most of the research samples stated that by doing hypnobirthing they felt a reduction in pain. Thus, hypnobirthing can be used as a relaxation technique in reducing pain during labor.

## CONCLUSION

Based on data analysis and discussion of the effect of implementing hypnobirthing by reducing pain during labor at the Wanti Midwife Clinic in 2021, the following conclusions can be drawn: The mean pain before being given hypnobirthing at the Wanti Midwife Clinic was 2.60. The average pain after being given hypnobirthing at the Wanti Midwife Clinic was 1.07. There is an effect of reducing pain after hypnobirthing with an average p value of 0.000. This means that there is an influence between the level of pain before and after hypnobirthing is carried out for mothers giving birth at the Wanti Midwife Clinic. research opportunities on hypnobirthing are increasingly increasing because many pregnant women do not know about hypnobirthing and not all midwife clinics have the infrastructure to carry out hypnobirthing so that hypnobirthing experts and researchers are in line to continue to conduct research on birthing mothers so that later pregnant women are not worried during the process labor

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