Qur’anic Bibliotherapy Intervention in Pregnant Women Experiencing Anxiety During the COVID-19 Pandemic in Indonesia: A Qualitative Exploratory Study

Inggriane Puspita Dewi1, Ariani Fatmawati1, Popy Siti Aisyah1, Sri Lestari Linawati2

1Department of Nursing, Universitas ‘Aisyiyah Bandung, Bandung, Indonesia; 2Department of Physiotherapy, Universitas ‘Aisyiyah Yogyakarta, Yogyakarta, Indonesia

Abstract

BACKGROUND: The disease caused by coronavirus-19 (COVID-19) has been stated as a global epidemic by the WHO. The COVID-19 pandemic adds many risk factors to maternal mental health during the perinatal period. The impact of anxiety during pregnancy is adverse obstetric consequences such as premature birth, inadequate antenatal care, requests for elective cesarean delivery, low APGAR scores of infants, and postpartum depression. Nursing interventions to overcome anxiety can be done through spiritual and religious intervention approaches. One of the spiritual interventions for the Muslim population to improve religious coping is Qur’anic Bibliotherapy (QB) as Islamic bibliotherapy.

AIM: This study aimed to explore the use of QB interventions for pregnant women experiencing anxiety during the COVID-19 pandemic.

METHODS: A qualitative exploratory study was conducted to explore the experience of the intervention given to the informant. The qualitative samples were ten respondents with moderate-to-severe anxiety levels. The anxiety instrument used was the Zung Anxiety Scale.

RESULTS: The themes obtained from in-depth interviews with semi-structured interviews were recognizing the benefits of QB for pregnant women in the COVID-19 pandemic.

CONCLUSIONS: QB encourages informants’ positive thinking, feeling, spiritual, and attitude patterns. QB can be used as a complementary Islamic intervention for health workers, especially nurses, in providing nursing care to Muslim patients.

Introduction

The COVID-19 pandemic has spread to almost all of the world, so the WHO declared that this COVID-19 case is a global problem and is included in a world disaster [1]. Disaster conditions can result in bad risks to pregnant women, such as anxiety symptoms [2] and even depression [3]. This anxiety is due to worrying about fetal development, babies born with disabilities, fetal death, and social stigma [4], [5], [6]. The stress of pregnant women during the COVID-19 pandemic occurs more often in the first trimester of pregnancy [7]. Still, pregnant women in the second and third trimesters have higher anxiety levels because of feelings before delivery [8].

The impact caused by anxiety in pregnant women due to world disasters is the risk of premature birth, low birth weight, and infant health problems and may have long-term effects on their offspring [9], [10]. Anxiety in pregnant women during the COVID-19 pandemic can also be due to the effects of restrictions, isolation, fear of visiting health services for childbirth, and limited access to information about COVID-19 for pregnant women [11].

A spiritual approach can prevent anxiety in pregnant women and overcome it through intervention. Religion, religious activities, spirituality, faith, prayer, religious community, and worship related to religion reduced anxiety, this effect was observed in healthy individuals and various patient populations [12]. In addition, faith-based interventions help deal with stress. A cohort study in a Muslim population found that positive religious coping was inversely related to symptoms of depression and had a history of psychological disorders [13], while the study in 2020 compared anxiety scores to death in samples with negative and positive religious coping. The study results showed that individuals with negative religious coping have a higher anxiety score than those with positive religious coping [14].

Spiritual intervention to reduce anxiety for pregnant women is Qur’anic therapy as Islamic bibliotherapy. A similar study used Qur’anic therapy to increase religious coping of hemodialysis patients [15].
and improve the mental health and well-being of psychology of lesbian prisoners [16], [17]. Interventions using bibliotherapy through guided reading with therapeutic results in mind become evidence that bibliotherapy can be used to enhance therapy [18], promote good mental and emotional health [19], reduce anxiety and sadness [20], can help identify spiritual needs [21], create a new frame of perception of the situation at hand through fiction and non-fiction reading, thereby encouraging new meanings of life [22].

This study explored the experience of pregnant women with anxiety during the COVID-19 pandemic after being given Qur’anic bibliotherapy (QB) intervention through semi-structured interviews. This study is expected to benefit the development of nursing science, mainly Islamic complementary interventions.

Methods

Qualitative exploratory research was done in this study to explore the results of intervention QB in pregnant women experiencing anxiety during the COVID-19 pandemic. The population of this study was pregnant women during the COVID-19 pandemic with a purposive sampling technique. The total sampling was ten people who met the inclusion criteria: pregnant women in the 1st to 3rd trimesters, experienced moderate to severe anxiety, were able to read, were Muslim, had participated in the QB intervention for three sessions, while the exclusion criteria were: mothers with panic anxiety level categories were sick and did not complete the intervention.

The study’s informants’ recruitment procedure was taking informants who have participated in the Qur’anic Bibliotherapy (QB) intervention for as many as three sessions. Each intervention session lasted about 1 h, divided into 10 min of opening (problem identification phase), 15 min of reading sessions according to the topic (presentation session), and 30 min of discussion session (catharsis and insight sessions, namely identifying steps to solve problems and finding problem solutions from reflections on verses or hadiths found), 5 min of conclusion sessions (follow-up phase, which is planning constructive action to solve the problem), the gap between sessions was 2 days from the previous session. The theme of each meeting was different, namely:

1. The first session: A reflection of Surah Al-Baqarah verses 26-27 on the COVID-19 pandemic, and in the perspective of the respondent’s experience
2. The second session: A reflection of Surah al-Mukminin verses 12–14 about the process of human creation in the Qur’an, as well as hadiths on the virtues of pregnant and lactating women
3. The third session: A reflection of Surah Al-Qoshos verse 7 and QS Fushilat verse 30, about the provision of being a mother in educating their children in future.

The research team created the bibliotherapy Qur’anic book as a form of creative and interactive bibliotherapy called creative because it is presented in fiction. Still, it contains Islamic values sourced from the Qur’an and hadith in interactive bibliotherapy. The intervention was given by a nurse who had attended bibliotherapy training, guided interactive discussions to help informants integrate feelings and cognitive responses to selected verses of the Qur’an and hadith. At the same time, the researcher team observed the activities of the QB intervention.

Data collection procedures in qualitative research are carried out in-depth interviews with semi-structured interviews, allowing the researcher’s flexibility to explore informants' answers [23], [24]. The interview lasted about 30 min, and none of the informants refused to participate or withdrew from the discussion. Interviews were conducted by the research team. The interviews were led by Focus Group Discussion. Semi-structured interview guidelines included questions: (1) What did you talk about in the problem identification session in the QB intervention? (2) What did you think and feel about the QB intervention during the discussion session on my theme and the COVID-19 pandemic? (3) What attitude commitment did you get in the follow-up session on the QB intervention? (4) What benefits can you get from QB intervention? Interviews were done with seven informants through the Zoom meeting application and WhatsApp video calls, while three informants conducted direct interviews.

This qualitative data analysis was carried out through the steps mentioned [24], [25]: (1) data analysis was begun with transcription of interview data. (2) Small meaningful units called “codes” were identified. (3) The codes were then grouped to form the main categories. (4) Based on the relationship between the primary categories, they were then grouped into secondary categories. (5) The themes were identified, and (6) The themes were interpreted to make meaning from the data.

Validity of qualitative data

The validity of this qualitative research data: (1) Credibility was maintained through the use of semi-structured interview guides. Then, the research team read the interview transcript file several times, conducted data analysis independently, printed interviews, presented it to external observers who are experts in qualitative research, and checked the similarity of extracted themes and clusters of themes with those removed by observers. There was 90% agreement in coding and theme extraction between researcher and observer. (2) Reliability and confirmability were maintained by providing a thorough guide to the
research team by collecting data on interview guides and developing a trial record to relate raw and coded data to themes and subthemes. (3) The suitability of the sample size was determined by the saturation of the theme with a description of the data-saturated with inclusion and exclusion criteria, and the dropout has been determined. (4) Transferability was ensured by presenting sufficient raw data here to allow the reader to assess the theme and assess its transferability to other situations. At the end of each interview, the informants were informed that the transcripts would be sent to them for member checking after transcribed data (member check). Ten women consented to the interview, stating that a member check was not required.

**Ethical considerations**

Research ethics was carried out by the research ethics committee of the Universitas’ Aisyiyah Bandung Number: 19/KEP. 01/UNISA-BANDUNG/V/2021. Informed consent was given to the informant before the research, and the confidentiality of the informant’s identity was maintained.

**Results**

The in-depth interviews with semi-structured interviews sessions were conducted in three groups for ten informants. The first group consisted of three people, the second group three people, and the last four people. The total informants in this study were ten people whose level of anxiety had been measured before and after the QB intervention and were willing to be interviewed. The measuring instrument used is the Zung Self-Rating Anxiety Scale. Informant data are shown in Table 1.

<table>
<thead>
<tr>
<th>Gravida Score/anxious level</th>
<th>Before QB</th>
<th>After QB</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informant Informant's age years</td>
<td>Gestational age (weeks)</td>
<td>46 (moderate) 38 (light)</td>
</tr>
<tr>
<td>P1 40 32 3</td>
<td>46 (moderate) 38 (light)</td>
<td></td>
</tr>
<tr>
<td>P2 24 22 1</td>
<td>51 (moderate) 38 (light)</td>
<td></td>
</tr>
<tr>
<td>P3 33 28 3</td>
<td>62 (severe) 47 (moderate)</td>
<td></td>
</tr>
<tr>
<td>P4 24 9 1</td>
<td>45 (moderate) 32 (light)</td>
<td></td>
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<tr>
<td>P5 37 16 4</td>
<td>61 (severe) 45 (moderate)</td>
<td></td>
</tr>
<tr>
<td>P6 27 21 1</td>
<td>46 (moderate) 38 (light)</td>
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<tr>
<td>P7 29 20 2</td>
<td>51 (moderate) 40 (light)</td>
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<td>P8 24 11 1</td>
<td>46 (moderate) 33 (light)</td>
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<tr>
<td>P9 25 35 3</td>
<td>51 (moderate) 35 (light)</td>
<td></td>
</tr>
<tr>
<td>P10 28 21 2</td>
<td>60 (severe) 39 (light)</td>
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The selection of qualitative participants was based on an anxiety score, starting with moderate-to-severe scores. The demographics of the participants in this survey were that almost 60% of them were in their second semester (12–28 weeks). Before receiving the QB, most participants experienced moderate anxiety (70%), and 30% had severe anxiety. After the intervention, the majority of the participants had minimal anxiety (80%).

The results of the interviews were then written in interview transcripts; then, the researchers condensed facts (reduction), coding, and interpretation to find the categories of qualitative research results. The researcher drew themes based on classes in the next step and then analyzed the existing pieces. The articles and subthemes are shown in Table 2.

**Recognizing COVID-19 and its impact**

Informants said that in the problem identification session, they recognized physical symptoms (what to think, feel and experience during this COVID-19 pandemic).

**Perception of disease**

“...covid is a dangerous disease” (l₁)
“...never knew what kind of covid it was” (l₂)
“...corona is also a creature of Allah’s creation” (l₃).

**Symptoms experienced**, expressed by informants 2, 3, 4 and 7
“... loss of smell...” (l₄₁), “... suffocation” (l₄₂).

**The impact of the COVID-19 pandemic**

The informants said they felt worried, anxious, afraid of the risk of the fetus being deformed and separated from social support psychologically and spiritually, as expressed by the informants.

“... worry or anxiety, someone has had a miscarriage” (l₅₁).
“I’m afraid because many people have died because of COVID, especially when they say that pregnant women are more at risk” (l₅₂)
“Worry about the risk to the baby; the baby will be disabled because of a viral infection” (l₅₃), “... terrified, the neighbors who died felt overthinking...” (l₅₄): “Anxiety, experience racing thought” (l₅₅), “Scared, makes me horrified, likes to imagine various things, being hospitalized and finally died” (l₅₆), “being far from husband and family, must conduct self-isolate” (l₅₇).
Behavior during the COVID-19 pandemic in pregnant women

The informant said that the actions taken during the COVID-19 pandemic included (1) keeping a distance, (2) performing a healthy lifestyle, (3) seeking social support, (4) seeking busyness and being indifferent, (5) fostering spiritual belief and worship.

"...Like I’m very protective, I don’t want to interact with the outside" (I), "... isolate individually" (I), "... rarely go out of the house" (I), "... if you don’t have to – need to leave the house I won’t go out" (I), "... just stay alone" (I).

"... Healthy food also keeps a healthy lifestyle like that..." (I), "... be more careful in maintaining health..." (I).

"... I prefer to talk to my husband, so it makes me calm..." (I)

"... In the afternoon usually because I take care of the first one, I don’t think about it a bit..." (I),

"... I don’t think about it anymore..." (I).

"... grateful to her still young pregnant..." (I),

"... not so negative..." (I), "... pray the same prayer anyway..." (I), "... remembrance wrote the same sholawat, istighfar..." (I).

Encouragement of resilience to the COVID-19 pandemic in pregnant women

The informant also said that during the book reading and discussion sessions, many impressions could foster new patterns of thought, feeling, and behavior to encourage adaptation and new commitments (resilience) to the COVID-19 pandemic situation based on the verses of the Qur’an and stories read in the book. This theme includes a change in mindset; this can be seen in the informant’s perception of the COVID-19 disease in the problem identification session to have a view of COVID-19 as part of God’s plan and destiny, according to the theme in QS Al-Baqarah verses 26–27, which the informant reflects on the Covid-19 pandemic situation, fictitious stories about pregnant women during the Covid-19 pandemic, as well as the virtues of pregnant women, breastfeeding to childbirth according to the Qur’an and hadith.

A spiritual perspective on the COVID-19 pandemic

"... just be sure that what God has given you, yes, there must be a certain purpose for us" (I), "... Allah is the Creator, including creating diseases or viruses or even the smallest creatures" (I), "... all God’s power is in His hands..." (I), "... God can cure various diseases (I), "... believe in God’s help" (I),

"... we will be better off if its fate..." (I), "... this pandemic incident has many lessons, a clean lifestyle, support from people who have been or have not been affected, there is a sense of concern" (I), "... good at accepting reality" (I), 

"... don’t worry about what happens to us" (I).

A new perspective on pregnant women

"... I didn’t enjoy being pregnant before, so oh I know after reading that there is a lesson that we are born as women, very noble because we can feel pregnant, give birth, take care of a child" (I).

"We have to make an effort, do a healthy lifestyle" (I), "... women should be able to think positively that this pregnancy is sustenance and a gift from Allah" (I), "... what I imagine is the reward, the reward is a lot...."

Spiritual beliefs and attitudes

"... grateful to be allowed to be pregnant..." (I), "so the motivation for me, learn to accept conditions, must be grateful..." (I), "... will not feel any loss huh" (I).

Feelings of love-empathy

"... should be able to make me strong to take care of my family and me, make me also love my mother more" (I), "... love my mother more, and be more patient in taking care of my children" (I).

Role as a parent

The third theme of the QB book is about preparing to become a mother, through a story lifted from QS Al-Qoshos verses 7–10 about the mother of the prophet Musa (as) in caring for and protecting her child.

Encouragement to be a good parent

The informant stated that being a good parent requires knowledge and continuous learning.

"... we must know about taking care of our children so our parenting will not go wrongly..." (I), "... learn a lot to be a parent..." (I), "becoming a parent is not easy, right? It needs patience, faith and enough knowledge" (I), "... learn to be a good parent..." (I).

Attitude in parenting

The informant stated that the attitude that parents must have in the upbringing of their children is to have spiritual beliefs, pay attention to the characteristics of children, teach etiquette to respect parents, and be present in every moment of child development.
“... ask God for help regarding child care...” (l_1),
“... believe in Allah’s help if we have difficulty
in taking care of our children...” (l_2), “... protect
our children and always believe in Allah” (l_3),
“... closer to Allah, ask for His protection and
pray a lot...” (l_4)
“... I can be more patient in taking care of
the children...” (l_5), “... give prayers and
attention...” (l_6), “... I am more patient in taking
care of my children...” (l_7), “... many pray in
educating children” (l_8),
“... an effort to educate children well, you
can’t generalize the ability or development
of children, you don’t have to rely on other
people” (l_9), “… the characteristics of children
are different, so the way to treat them is also
different...” (l_10), “... children have the same
fate in their way, right?” (l_11),
“... teaching to our children about how to be
filial to parents...” (l_12)
“... whatever the behavior of parents, it can
be imitated by children, so we must learn to
maintain our attitudes...” (l_13),
“... accompany their growth and development
and pray a lot...” (l_14)

Benefits of bibliotherapy qur’anic intervention

In the follow-up session, according to the
informants, they gave strength to meaning, and
motivation added insight. They fostered spiritual and
emotional sensitivity as a coping strategy in dealing
with the COVID-19 pandemic.

“... it means a lot as a mother later (l_1), “... create motivation for later because the mothers
don’t know anything...” (l_2), “... like a place to
vent...” (l_3), “... strengthens me for this third
pregnancy...” (l_4), “... spirit...” (l_5), “... increase
the spirit of educating children...” (l_6),
“... there are a lot of explanations that I think will
be useful for later... (l_7), “... a lot of knowledge
and experience...” (l_8), “... add insight...” (l_9),
“... calmer...” (l_10), “... more relaxed...” (l_11), “... very impressed...” (l_12), “... so feel free...” (l_13),
“... my heart is touched...” (l_14), “... my feelings
become more sincere...” (l_15), “... believe in
Allah’s mercy...” (l_16).

Discussion

Recognizing COVID-19 and its impact

The results of the qualitative research showed
that at the problem identification stage, during this
stage, the informants learned from the experiences of
the characters in the book, then reflected on the affairs
of the characters into their own experiences so that the
informants became able to recognize physical symptoms,
what they think and feel during the pandemic. According
to the informants, some who have experienced COVID-
19 have shortness of breath and loss of smell [26].
These symptoms are commonly experienced by people
with COVID-19 [27], [28]. Severe symptoms can pose
a threat of death and usually occur in individuals with
comorbidities such as diabetes mellitus, active smokers,
and male sex [29].

The informants’ behavior during the COVID-19
pandemic is to maintain a healthy lifestyle, distance,
and social interaction. However, they still need social
support from the people closest to them and perform
worship activities. Restriction of social movement
is one of the factors causing increased anxiety in
pregnant women [31], if stress and fear of pregnant
women are not prevented/overcome, it can lead to
adverse obstetric consequences such as premature
birth, inadequate antenatal care, requests for elective
cesarean delivery, low infants’ APGAR scores, and

Encouragement of resilience to the
COVID-19 pandemic in pregnant women

The provision of the QB intervention in this study
had a positive effect on decreasing the anxiety scores
of pregnant women. This technique is an adaptation
of bibliotherapy, namely the intentional use of reading
to improve mental and emotional health [18], [19], but the
values contained in reading are sourced from the Qur’an
and hadith [32]. Bibliotherapy is currently recognized as
part of Cognitive Behavioral Therapy/CBT [20].
stage in bibliotherapy is a process of catharsis, which is about the release of tension or purification of emotion, interconnectedness feelings, and experiences that occurred during the identification phase; if the process is already happening, usually people will find insight or find a solution and create the behavior in overcoming their problem [22], [33], [34], [35], [36].

The mechanism for reducing anxiety levels after being given a QB intervention revealed by the informant was during the reading and discussion sessions. The themes in this QB reading build perceptions about the COVID-19 pandemic in the Al-Qur’an paradigm; in the discussion session, the informants found a new meaning that gave spiritual strength to the COVID-19 pandemic situation, which is God’s destiny, believes that God will provide a solution, can accept reality because they believe in future of God, the pandemic situation also brings the wisdom of caring for others. The informant’s expression was in line with the interpretation of Al-Baqarah verses 26–27, according to Sayyid Qutb, that God can create creatures smaller than mosquitoes [37]. This example of God will raise an attitude of opening the eyes of the heart (tabshir) and means of spiritual enlightenment (tanwir) for believers. In contrast, for the wicked people, the example of God only adds to the damage to themselves and their environment.

The second theme about the virtues of pregnant women, giving birth and breastfeeding according to the Qur’an and hadith, provides new perspectives and insights about pregnant women because the contents of the reading provide a lot of information about the verses of the Qur’an and hadiths that God promises rewards for pregnant women who are patient in their pregnancy to the care of their children. In addition to new insights, the themes also encourage motorists to be more enthusiastic in caring for and educating their children, as well as growing love and empathy for their mothers and spiritual awareness that God loves women very much so that the themes also raise an attitude of sincerity, patience, gratitude, and calmer.

As presented in the previous paragraph, reading therapy is part of CBT. The content of reading from creative bibliotherapy as given to informants can build new patterns of thinking, feelings, and attitudes (reframing) toward the situation at hand to be more positive because individuals analyze their feelings, thoughts, and behavior in the framework of experience according to reading in books [20]. Stories could affect human emotions, and books can be a model for self-development because they affect emotions [34]. Bibliotherapy can also be a medium for individuals to find their spiritual needs [21].

Role as a parent
The third theme in the QB book is preparing to become a mother. The contents of the reading are lessons from the story of the journey of the mother of the Prophet Musa (as) in caring for and protecting her child with a firm belief in the help of God. Besides, the reading theme was taken based on the presentation [38] about the science behind how parents influence children’s development which is presented in the form of a story by the author from the results of interviews with informants, a theme appears towards parenthood which encourages positive motivation for informants to (1) learn to be good parents in the form of a commitment to continuously study knowledge as a parent and get closer to Allah SWT during child care, (2) care for their children in the form of a commitment to always pay attention to the characteristics of different children, set an example of a good attitude as a parent, and always be present at every moment child development. The results of this study prove that the goals of bibliotherapy can be achieved well. The primary purpose of bibliotherapy is to help someone gain understanding, insight, and self-development through reading, reflection, and taking action [34].

Impact of bibliotherapy Qur’anic intervention
The contents of the readings provided Islamic spiritual values because they are based on the Qur’an, hadith, and Islamic stories, so this QB not only builds patterns of thought, feelings (emotions), and behavior but also influences spiritual beliefs and attitudes such as believing in the power of God, always being close to Him, rising an attitude of accepting reality, being patient, sincere, grateful, and a calm soul.

The informant recognized this as something that could reduce his anxiety. Abilash and Jothimani stated that bibliotherapy could be a solution to overcome emotional problems such as anxiety, stress, and even depression [30]. In addition, Qur’anic Therapy as Islamic bibliotherapy can also improve religious coping [15], positive religious coping can improve mental health [13], the better a person’s religious coping, the lower the risk of anxiety and depression in that individual [39]. Reading the Qur’an as Islamic bibliotherapy can improve mental health [16].

Limitation of this study
The limitation of this study was that no follow-up was carried out regularly (3 months, 6 months, 1 year) or after the informants delivered their babies. For future researchers, a similar study can be conducted again with a larger sample size and regular follow-up to ensure the consistency of the study’s results.

In addition to network problems that frequently disconnect, qualitative data retrieval using zoom media and WhatsApp video calls is less effective in observing the behavior and expressions of participants during the interview process, but this is overcome by shortening the interview time in the next session.
Conclusions

QB encourages informants’ positive thinking, feeling, spiritual, and attitude patterns. QB can be used as an Islamic complementary intervention for health workers, especially nurses, in providing nursing care to Muslim patients.

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