

# HYPNOBIRTHING: A SYSTEMATIC REVIEW OF RELAXATION TECHNIQUES IN REDUCING PRENATAL ANXIETY

## *Hypnobirthing: Tinjauan Sistematis Tentang Teknik Relaksasi dalam Mengurangi Kecemasan Prenatal*

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### ABSTRACT

**Background:** Anxiety during pregnancy can worsen the health of both mother and fetus if not treated appropriately. **Purpose:** This study aims to analyze the benefits of hypnobirthing in reducing anxiety in pregnant women. **Methods:** This study used a systematic review design using the PICO (Population, Intervention, Comparison, Outcome) framework. The search strategy was conducted through electronic databases including PubMed, ScienceDirect, and Google Scholar, with a focus on articles published in the last five years (2021–2025). Keywords used in searches include "hypnobirthing" and "anxiety". **Results:** The majority of the studies reviewed showed that hypnobirthing techniques effectively lowered pregnant women's anxiety levels, improved relaxation, and contributed to better pain management during childbirth. **Conclusion:** Hypnobirthing has the potential to be an effective non-pharmacological intervention in supporting the mental health of pregnant women and helping to achieve a calmer and more controlled childbirth experience.

**Keywords:** hypnobirthing, anxiety, pregnant women, childbirth

### ABSTRAK

**Latar belakang:** Kecemasan selama kehamilan dapat memperburuk kesehatan ibu maupun janin apabila tidak ditangani dengan tepat. **Tujuan:** Penelitian ini bertujuan untuk menganalisis manfaat hypnobirthing dalam mengurangi kecemasan pada ibu hamil. **Metode:** Penelitian ini menggunakan desain tinjauan sistematis menggunakan kerangka kerja PICO (Population, Intervention, Comparison, Outcome). Strategi pencarian dilakukan melalui database elektronik termasuk PubMed, ScienceDirect, dan Google Scholar, dengan fokus pada artikel yang diterbitkan dalam lima tahun terakhir (2021–2025). Kata kunci yang digunakan dalam pencarian termasuk "hypnobirthing" and "anxiety". **Hasil:** Mayoritas studi yang ditinjau menunjukkan bahwa teknik hipnobirthing secara efektif menurunkan tingkat kecemasan ibu hamil, meningkatkan relaksasi, dan berkontribusi pada manajemen nyeri yang lebih baik selama persalinan. **Kesimpulan:** Hypnobirthing berpotensi menjadi intervensi non-farmakologis yang efektif dalam mendukung kesehatan mental ibu hamil dan membantu tercapainya pengalaman persalinan yang lebih tenang serta terkontrol.

**Kata Kunci:** hypnobirthing, kecemasan, ibu hamil, persalinan

## INTRODUCTION

During pregnancy, mothers experience psychological adaptations and changes, including the social transformation, such as changes in roles. They became parent, which can influence their emotional well-being and readiness for childbirth. However, in the process of adaptation, many pregnant women find it difficult or even unable to adjust to the changes that occur during pregnancy, due to concerns about unwanted things, decreased physical appearance, or the possibility of an abnormal baby being born. Hence, maintaining health during pregnancy is not limited only to physical conditions but must also include attention to psychosocial aspects to support optimal pregnancy and childbirth processes (WHO, 2019).

Globally, around 10% of pregnant women and 13% of women who have just given birth experience mental disorders and even depression. The prevalence is even higher in developing countries, with 15.6% occurring during pregnancy and 19.8% after childbirth (Sari & Martha, 2022). The lowest prevalence of postpartum depression is found in Malaysia at 4.4%, while the highest is reported in Thailand at 57.7%. According to the 2018 Basic Health Research, the prevalence of postpartum depression in Indonesia is 5.4% (Abdullah *et al.*, 2025). In severe conditions, the distress experienced by the mother can be so extreme that it leads to the risk of suicide. In addition, mothers who experience these problems often find it difficult to fulfill their roles optimally, which in turn can adversely affect the development of their children. Mental health issues in mothers can be treated. Proper treatment can be done by well-trained non-specialized health workers (Hermina & Wiarajaya, 2015).

The prenatal and postnatal periods are one of the at-risk population groups in Indonesia, accounting for about 22.2% of the

total population. One of the priority issues in this group is baby blues syndrome. Thus, government policies, legislation, and the role of social organizations need to be focused on efforts to prevent mental health disorders and improve overall well-being (Basrowi *et al.*, 2024).

Psychological well-being is an important element for improving one's mental health as it contributes to emotional functioning and positive feelings. Psychological well-being also affects physical condition, cognitive function, and promotes better immune and hormonal systems compared to individuals with low psychological well-being. Psychological well-being reflects a person's psychological state based on their fulfillment of positive psychological functions. Some prevention and implementation of therapy for people experiencing mental health problems is very useful to do (Winarni, 2023). Hypnobirthing is one method that has drawn more attention due to its potential to improve psychological well-being, especially in pregnant women. Hypnobirthing is a mind-body approach that combines relaxation techniques, guided imagery, and self-hypnosis to reduce stress, anxiety, and fear during childbirth, thereby promoting more positive emotional and psychological outcomes (Noorlinda & Sartika, 2025).

According to the biopsychosocial model, maternal well-being requires a holistic approach. However, existing studies on hypnobirthing have mostly focused on physiological outcomes, with limited emphasis on anxiety reduction. This review aims to address this discrepancy by focusing on the mental health dimension.

Specifically, hypnobirthing involves the practice of self-hypnosis based on positive affirmations and suggestions directed to the subconscious mind. This approach helps mothers to understand and

release the fear–tension–pain syndrome, which is often the cause of discomfort and pain during childbirth. As a result, mothers experience greater calmness, allowing them to enjoy pregnancy and face childbirth in a more peaceful and confident state (Andarwulan, 2021).

Observational reports have indicated that approximately 84% of mothers who practiced hypnobirthing experienced spontaneous childbirth without surgical procedures or instrumental assistance such as vacuum or forceps (Bloom & Birth, 2023). However, randomized controlled trials have shown that the primary benefit of hypnobirthing lies in reducing anxiety before labor, rather than increasing the rate of spontaneous delivery (Smith *et al.*, 2015). WHO has acknowledged hypnotherapy is alternative therapy that is not commonly used in Western medicine. The American Society of Clinical Hypnosis and the Indonesian Medical Hypnotherapy Association are two examples of the numerous professional organizations that teach and practice hypnotherapy, even in some nations (Syafitri & Mardha, 2021).

Hypnobirthing was first patented by Marie F. Mongan, M.Ed, M.Hy, a certified hypnotherapy and hypnoanesthesia expert from New Hampshire, United States. She combined the practice of self-hypnosis and the process of natural childbirth. In Indonesia, hypnobirthing is not widely known. In 2003, a midwife, Lanny Kuswandi, explored the field of hypnotherapy and got certified in the Mongan Method of hypnobirthing through Peter Jackson in Australia. Besides that, she and Dr. Erwin Kusuma, Sp.KJ developed the hypnobirthing method to be more relevant and easier to apply in the cultural context and needs of the Indonesian people (Wahid *et al.*, 2023).

Through four basic hypnobirthing techniques ranging from muscle relaxation, breath relaxation, facial relaxation, mind relaxation (Winarni *et al.*, 2023), and visualization exercises and communicating with the fetus, which are carried out regularly and concentrated can help the body relax so that the body releases endorphins, which function as pain control and control feelings of stress (Widiawati, 2019). A study showed that women who do the hypnobirthing method during pregnancy will be much calmer and more comfortable and pain will be reduced by 70% during childbirth (Astuti, 2019).

Although hypnobirthing has been studied, most evidence comes from small trials or narrative reviews that do not give a complete picture. The psychological effects of hypnobirthing, particularly in relation to maternal well-being and in environments like Indonesia, have not yet been thoroughly reviewed in a systematic review. As a result, this study is unique. It systematically gathers and evaluates previous studies to give academics, policymakers, and healthcare professionals a more solid scientific foundation.

The uniqueness of this research lies in its effort to synthesize various scientific findings on hypnobirthing, which have been previously examined but not systematically reviewed to provide a strong scientific foundation.

The high prevalence of mental health problems among pregnant and postpartum women, particularly in developing countries, highlights the need for effective strategies to enhance psychological well-being. This is crucial because maternal mental health not only affects the mother's quality of life but also influences pregnancy outcomes, with potential risks such as preterm birth, low birth weight, and suboptimal fetal growth (Sari, 2022), and has long-term implications for child development and overall family health.

Maternal anxiety during pregnancy and childbirth is a common psychological problem that can negatively affect both the mother and the baby. Although hypnobirthing has been studied as a potential method to reduce anxiety and improve maternal well-being, the evidence remains scattered and inconsistent. This lack of synthesis makes it difficult for healthcare providers to draw strong conclusions about its effectiveness and to use it as a reliable intervention. Therefore, this study aims to systematically review the scientific evidence on the effectiveness of hypnobirthing in enhancing maternal psychological well-being during pregnancy and birth preparation.

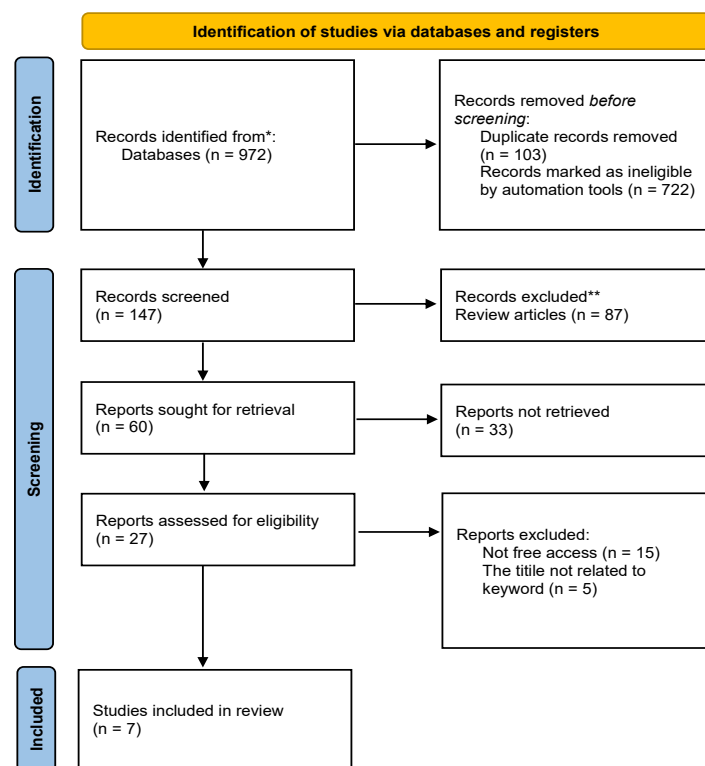
## METHOD

### Literature Search Strategy

This study employed a systematic literature review methodology following the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines.

The literature search was conducted using three indexed databases: PubMed, ScienceDirect, and Google Scholar, selected for their coverage of core literature in medicine, psychology, and health sciences relevant to hypnobirthing and prenatal anxiety. The search strategy followed the PICO framework (Population: pregnant women; Intervention: hypnobirthing methods; Comparison: hypnobirthing methods compared to standard antenatal care without hypnobirthing, Outcome: reducing anxiety in pregnant women). The search strategy was tailored for each database. In PubMed and ScienceDirect, the keywords

were combined using Boolean operators, with the following query applied to the TITLE, ABSTRACT, and KEYWORD fields: “hypnobirthing” AND “anxiety”. For Google Scholar, the search was performed using the exact phrases “hypnobirthing” anxiety and “hypnobirthing” AND “anxiety” to maximize retrieval of relevant articles. Articles were included if they were published between 2021 and 2025, available in full text, written in English or Indonesian, designed as observational or experimental studies, and discussed at least two of the three core components: hypnobirthing, anxiety, and pregnancy. Excluded were narrative reviews, case reports, articles without full-text access, and studies that did not explicitly examine the impact of hypnobirthing on anxiety. A total of 972 records were identified through database searching. After removing 103 duplicate records and excluding 722 records marked as ineligible by automation tools, 147 records remained for screening. During the title and abstract screening, 87 records were excluded as they were review articles, leaving 59 records for full-text retrieval. Of these, 32 reports could not be retrieved in full text. Consequently, 27 full-text reports were assessed for eligibility. At this stage, 20 reports were excluded, including 15 due to lack of free access and 5 that were not relevant to the study keywords. Then, 7 studies met the inclusion criteria and were included in the systematic review. Data from the included studies were extracted into a table encompassing authors, year of publication, study design, methods, and main outcomes related to anxiety in pregnant women. Analysis was conducted narratively due to heterogeneity in study design, interventions, and outcomes.



**Figure 1.** A Prisma Flow Diagram (Preferred Reporting Items for Systematic Review and Meta-Analysis)

## RESULT

Of the seven studies reviewed, six quantitatively reported significant reductions

in maternal anxiety following hypnobirthing interventions, while one qualitative study highlighted positive maternal experiences.

**Table 1.** Results of research article review

Title	Author and Year of Publication	Method
Women's experiences with hypnobirth - A qualitative study	Uldal T, Østmoen MS, Dahl B, Røseth I. (2023)	This study is a phenomenological study with nine in-depth interviews. The sample was five primigravida and four multigravida women aged 25–36 years.
Hypnobirthing Training for First-Time Mothers: Pain, Anxiety, and Postpartum Wellbeing	Yaqoob H, Ju I X-D, Jamshaid S. (2024)	The study design was a randomized controlled trial, involving 50 pregnant women from 33 weeks of gestation until childbirth. Depression was measured using the Edinburgh Postnatal Depression Scale (EPDS) and anxiety was measured using Templer's Death Anxiety Scale (DAS).
Effectiveness of Hypnobirthing Relaxation in Lowering Anxiety Levels in Primigravida Pregnant Women in Trimester III	A Asrida, Saad R, Rahayu (2023)	The study employed a quasi-experimental design with 30 pregnant women as participants. Anxiety levels were measured using a Numerical Rating Scale (NRS, 0–10), where 0 indicated no anxiety and 10 indicated the highest level of anxiety.



**Continuation of Table 1.** Results of research article review

Title	Author and Year of Publication	Method
Effectiveness of Hypnobirthing in Reducing Anxiety Level among Pregnant Women During Childbirth: A Quasi Experimental Study in Tertiary Care Hospital of Islamabad	Zartasha, Naz, S., Khatoon, Z., Karim, S., Atiq, M., Khattak, I. U. (2024)	The study used a quasi-experimental design with a sample of 30 primigravida women, whose gestational ages ranged from 32 to 38 weeks. Anxiety levels were assessed using the Hospital Anxiety and Depression Scale (HADS) administered.
The Effect of Hypnobirthing Relaxation on Reducing Anxiety Levels in Pregnant Women Trimester III	Handayani Y, Anggraeni E, Kustin, Faronita F (2024)	The study employed a one-group pre-test post-test design with a sample of 47 pregnant women.
Hypnobirthing Relaxation Influences Maternal Anxiety, Maternal Labor Pain, and APGAR Score in Newborns	Rosalinna R, Kurniarum A, Sari LP. (2024)	The study employed a quasi-experimental design with a sample of 30 pregnant women. Anxiety was assessed using the Hamilton Anxiety Rating Scale (HARS).
Decrease Anxiety in The Third Trimester of Pregnancy: Impact on Hypnobirthing	Sari LP, Rosalinna (2021)	This study used a pre-experimental design involving 60 pregnant women. Anxiety was measured using the State-Trait Anxiety Inventory (STAI), which assesses both state and trait anxiety.

A review of seven studies showed that, in spite of variations in measuring methods, age ranges, and research environments, hypnobirthing was consistently successful in lowering mother anxiety, especially among women in the third trimester. According to research done in Norway using in-depth interviews with pregnant women between the ages of 25 and 36, relaxation techniques gave them greater confidence to face their fears of childbirth, which improved their coping strategies and produced better results (Uldal, 2023). In China, Yaqoob *et al.* (2024) found significant differences between experimental and control groups of women aged 15–30 years during the first stage of labor ( $p = 0.001$ ), with the experimental group showing lower death anxiety, milder pain and fear, and a reduced risk of postpartum depression one week after vaginal delivery. Similar findings were reported in Makassar, Indonesia, among women aged 15–30 years that the experimental group experienced lower death anxiety, reduced pain and fear, and a

decreased risk of postpartum depression (A *et al.*, 2023). In Pakistan, Zartasha *et al.* (2024) reported that hypnobirthing significantly reduced anxiety levels among women aged <25 and 25–35 years, with 67% of participants in the experimental group achieving normal anxiety levels ( $p < 0.001$ ), while no significant change was observed in the control group ( $p = 0.314$ ). In Jember, Indonesia, Handayani *et al.* (2024) showed that women aged 17–25 years who received hypnobirthing relaxation experienced notable reductions in anxiety, with 28.1% reporting none, 34.4% mild, 34.4% moderate, and only 3.1% severe anxiety ( $p = 0.001$ ). Likewise, Sari & Rosalinna (2021) in Klaten found significant reductions in anxiety among women aged 20–25 years and >35 years ( $p < 0.001$ ), while Rosalinna *et al.* (2024) in Surakarta demonstrated that anxiety significantly decreased in the experimental group ( $p < 0.001$ ), with no significant change in the control group ( $p = 0.05$ ).

The instruments used to assess anxiety varied across the studies. These included qualitative in-depth interviews (Uldal, 2023), the Edinburgh Postnatal Depression Scale (EPDS) combined with Templer's Death Anxiety Scale (DAS) (Yaqoob *et al.*, 2024), the Numerical Rating Scale (NRS) (A *et al.*, 2023), the Hospital Anxiety and Depression Scale (HADS) (Zartasha *et al.*, 2024), categorical pre-post-test classifications of anxiety levels (Handayani *et al.*, 2024), the State-Trait Anxiety Inventory (STAI) (Sari & Rosalinna, 2021), and the Hamilton Anxiety Rating Scale (HARS) (Rosalinna *et al.*, 2024). Despite these methodological variations, the studies consistently reported positive outcomes, thereby reinforcing the evidence that hypnobirthing effectively alleviates maternal anxiety.

Hypnobirthing interventions were used in the evaluated research in a variety of ways, for varying lengths of time, and at various frequencies. These included regular home-based practices and structured sessions led by qualified facilitators. Some used single 30-minute sessions, while others used several meetings lasting 30 to 40 minutes spread out over several weeks. All therapies consistently led to significant reductions in maternal anxiety, notwithstanding these differences.

## DISCUSSION

Several studies have emphasized the psychological benefits of hypnobirthing, particularly in strengthening maternal coping mechanisms during labor. In this review, all included studies reported positive benefits, and none found a lack of effect.

According to Uldal *et al.* (2023), hypnobirthing techniques can enhance maternal self-confidence and foster a sense of emotional security, thereby contributing to psychological resilience and helping mothers

remain more relaxed during labor. In line with these findings Zartasha *et al.* (2024) reported that the reduction of childbirth-related anxiety was greater in the experimental group than in the control group, reinforcing the effectiveness of hypnobirthing not only in alleviating psychological symptoms but also in enhancing pain tolerance during labor.

Several studies have shown that there is a significant decrease in anxiety in pregnant women in the third trimester after receiving the intervention. These findings show that hypnobirthing relaxation techniques contribute to relieving anxiety during pregnancy (Sari & Rosalinna, 2021; Handayani *et al.*, 2024; A *et al.*, 2023). Relaxation techniques, including guided imagery, controlled breathing, and positive affirmations can facilitate the release of endorphins, contributing to reduced anxiety and pain perception during labor (Rosalinna *et al.*, 2024). Another study of first-time mothers showed a significant difference in death anxiety post-test scores between the experimental and control groups during the first stage of labor. The results showed that women in the experimental group had lower levels of death anxiety than those in the control group. Due to their hypnobirthing training, the women demonstrated effective anxiety management during labor. Pregnant women who engaged in hypnobirthing for childbirth experienced less pain and fear during the process, as well as shorter labor duration and early breastfeeding periods. Hypnobirthing has several positive effects in reducing the level of fear during childbirth (either normal or spontaneous labor) (Yaqoob *et al.*, 2024).

One of the included studies (Uldal *et al.*, 2023) highlighted the important role of the partner or family in the labor process and the mother's experience of pain. It is very important for the mother and her husband to

understand the neurohormonal processes involved in labor, as stress can reduce the beneficial effects of oxytocin. Therefore, mothers need support to overcome feelings of anxiety. A supportive husband pays great attention to his wife's condition during pregnancy and actively participates in ensuring the health of both the mother and fetus. Husband support during pregnancy and childbirth involves helping to ease the wife's discomfort, offering emotional attention, accompanying her to medical check-ups, fostering a bond with the unborn baby, providing guidance or making decisions, and assisting the wife in finding information about pregnancy and childbirth, such as hypnobirthing classes. Greater support from the husband can enhance the mother's enthusiasm and confidence in going through pregnancy and labor (Syafitri & Mardha, 2021).

Since hypnobirthing does not need the use of pharmacological medicines, no negative side effects have been documented to yet (Winarni *et al.*, 2023). Furthermore, it is advised that hypnobirthing be performed at least twice a day for 10 to 15 minutes per session in order to maximize its efficacy in lowering maternal anxiety and to support a secure and trauma-free pregnant experience (Maulida & Wahyuni, 2020). The findings suggest that hypnobirthing can serve as an effective, non-pharmacological method to reduce prenatal anxiety and support maternal mental well-being. Evidence showed that it effectively reduced maternal anxiety during labor (Imannura *et al.*, 2016) and improved childbirth self-efficacy, mental well-being, and reduced fear of labor (Tabib *et al.*, 2025). However, given the limited number and heterogeneity of studies reviewed, these conclusions should be interpreted with caution. The heterogeneity mainly arises from differences in study design, measurement instruments, participants' age,

as well as variations in the type and frequency of hypnobirthing interventions.

This study gathers evidence regarding hypnobirthing and presents a more comprehensive picture of its advantages in lowering pregnant women's anxiety. The small number of included studies and the variation in study design, sample size, and measuring methods, however, are limitations of this review. The findings are restricted by the inclusion of both qualitative and quantitative data, as well as the lack of standardized anxiety scales. Furthermore, the results might have been impacted by publication bias and the exclusion of non-English/Indonesian literature.

## CONCLUSION AND SUGGESTION

The findings of this systematic review suggest that hypnobirthing might have a positive impact on maternal psychological outcomes, particularly in reducing prenatal anxiety and perceived labor pain. Several reviewed studies, including qualitative findings, reported enhanced emotional preparedness, reduced fear, and improved ability to apply relaxation techniques among women undergoing hypnobirthing. These results are consistent with previous studies that emphasize the role of hypnobirthing in improving maternal mental health and pain management during labor. In light of these findings, integrating hypnobirthing into maternal health education programs in Indonesia may offer potential benefits; however, further context-specific evaluation is needed to assess its feasibility, effectiveness, and scalability before broader implementation.

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## AUTHOR CONTRIBUTION

Yona Wia Sartika Sari contributed to the preparation of the manuscript through writing, data collection and analysis, literature review, and reference management. Risva Aprina Fitri Lestari supported the study by reviewing the data and providing constructive feedback on the manuscript. Dessy Pratiwi and Ikrimah Nafilata were responsible for the review.

## CONFLICT OF INTEREST

The authors declare there are no conflicts of interest.

## DECLARATION OF ARTIFICIAL INTELLIGENCE (AI)

The author(s) affirm that no artificial intelligence (AI) tools, services, or technologies were employed in the creation, editing, or refinement of this manuscript. All content presented is the result of the independent intellectual efforts of the author(s), ensuring originality and integrity.

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