ORIGINAL ARTICLE

Perspective of Primigravida Mother's Experience in Their Birthing Process Utilising HypnoBirthing

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ABSTRACT

Introduction: Child birth can be an enjoyable process for all birthing women. Use of HypnoBirthing®Mongan during birthing process induces the women to be relaxed and minimises her fear. The aim of the research is to explore the perspective of primigravida mother's experience in their birthing process utilising hypnobirthing. **Methods:** A qualitative study involving 10 participants were carried out in a private hospital in Malaysia. Purposive sampling was used. Women using HypnoBirthing during birthing were interviewed for 40 minutes using semi structured, face to face method. Analysed using thematic analysis. **Results:** Three main themes were identified namely: 'physical and emotional effect of pain', 'behaviour response to pain' and 'maternal and newborn wellbeing'. Physical and emotional effect of pain has four subthemes where else the other has two subthemes. **Conculsion:** Women using Hypnobirthing enjoyed the birthing process and immediate bonding with the newborn.
Malaysian Journal of Medicine and Health Sciences (2023) 19(4):61-67. doi:10.47836/mjmhs19.4.11

Keywords: HypnoBirthing, Alternative therapy, Labour pain, Birthing experience, Birthing satisfaction

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INTRODUCTION

Childbirth is generally perceived as a painful event in a women's life however women consider the process as joyful and memorable event in their life and family. Most women fear the pain during the process of labour and tend to seek chemical pain killers to relief the pain. This is probably due to the exaggerated portrayal of the event by media and literature as well as stories depicting negative outcomes narrated by friends and relatives (1, 2). Thompson et al. highlighted in a systematic review; woman chose pharmacological method of pain relief especially Epidural due to the fear (3). However, it was stated in the same review that women prefer to have a pain and drug free birthing process where they will be in control of the situation and have a calm birth.

According to Dr Grantly Dick Read (1933), fear appears to be the main cause for women to experience pain during childbirth process (4). Marie Mongan, the founder of HypnoBirthing®Mongan method, developed her ideas from Dr Grantly's idea and found ways of eliminating fear from birthing women (4). She found that light touch massage or deep pelvic pressure helps women in the early stage of labor and also during the transition period. She further emphasizes that giving positive affirmation on pregnancy including birthing results in positive outcomes during the birthing process. A relaxation technique in the form of CD called 'listen to the rainbow', promotes visualization as a mean to hasten the process of birthing. The three deep breathing techniques during the three phases of labour is also considered effective. Other technique recommended during birthing include the use of 'birthing ball', change of different birthing position and aromatherapy. She later discovered 'hynotherapy' as an effective alternative technique and published her book in 1989 (4). Hypnotherapy comes from the Greek word 'hypno' which means sleep and therefore it is to induce sleep during childbirth

Fear of childbirth also can hinder the women's process of birthing and their birthing preference (2). According to Dr. Grantly's theory, fear can cause stress and intensify the labour pain (4). Furthermore, Thomson et al. emphasized women prefer to have a relaxed state of birthing with more self-confidence and being in control

during the birthing phase (4). This can be achieved using HypnoBirthing®Mongan method as relaxation can reduce fear which indirectly affect's the pain.

Even though HypnoBirthing method were used since late 1950s but very few researches was carried out pertaining to this topic (5, 6, 3). Furthermore, people rarely heard of HypnoBirthing in Asian countries even though it is being practiced for a long time. Very few hospitals have adopted the method and allow their patients to undergo hypnobirthing. The approach is still in its infancy and it is a safe alternative method. However, there is considerable lack of awareness regarding the method among women especially prospective mothers.

The aim of the study is to explore primigravida mother's perspective on their birthing experience using HypnoBirthing. This can give an in-depth understanding on usage of HypnoBirthing during the birthing process.

MATERIALS AND METHODS

Qualitative data were collected as part of a mixed method which was carried out after the quantitative phase. Semi structured interview was conducted with 5 participants who used HypnoBirthing®Mongan method from January 2016 till February 2017, to explore their experiences on usage of this method in their birthing outcome.

The study was carried out in a private hospital in Kuala Lumpur, Malaysia. The hospital consists of 200 beds with multiple disciplines. The population around this hospital is around 800,000 people. During the period of the study there were around nine midwives working in the labour room and two midwives work per shift together with one staff nurse, as the organisation uses the mixed skill workforce. This hospital provides a comprehensive obstetric and midwifery service. Ethical approval was obtained from a private University and this hospital's ethical committee prior to initiating the study. All potential participants were given oral and written information about the study.

The participants selected for the study are primigravida mothers from the age between 20 to 40 years old without any significant obstetric problems. Participant below age of 20 years and above 40 years old were excluded from the study. Mothers with multiple pregnancy and with mental health problem were also excluded. Written consent was obtained from willing participants prior to participation in the study.

The study adopted a purposive sampling technique. Mothers who have completed their 1st trimester who have successfully participated in the HypnoBirthing®Mongan classes and has demonstrated commitment to the practice of the technique. The participants attended classes for six continuous weeks for two and half hours. The HypnoBirthing®Mongan classes include health education on food, exercise and techniques that they can utilise during the birthing process. The participants were also taught on the importance of applying perineal massage and 'J' breathing technique while breathing down the baby. The first 5 participants who used HypnoBirthing, regardless the result was positive or negative, were recruited for the study and as way to exclude selection bias (7). The participants were interviewed in their room with due consideration for privacy and confidentiality within 48 hours of delivery to exclude recall biasness (7).

A face to face semi structured interview was conducted focusing on four main questions and prompt by asking '*why*' and '*how*'. The main questions were on '*What was your feelings on your childbirth process?', 'Can you describe the discomfort you experienced during the childbirth process?', 'How did you feel using the HypnoBirthing method?' and 'Can you explain about your birthing experience?*'. The interview lasted for 40 minutes and were audiotaped with participants' permission. The audio recording helped the interveiewer to observe the participant to take field notes on their expression and maintain appropriate eye contact (8). Interview was transcribed verbatim and analysed using the six steps to thematic analysis (9).

The interview was conducted in English as in Malaysia is a multilingual country whereby most of the citizen have fair command of English. Data saturation was achieved by the 4th participant as all the participants were repeating same information for the research questions but in different words. Furthermore, during analysis there were no new themes emerged.

The study was approved by MAHSA UNIVERSITY Ethical Committee, Postgraduate and Strategic Development No. MAHSA/NURP23-1/C44 (30) and Ethical Committee of Pantai Hospital Cheras.

RESULTS

All the participants were in the age group of 30 to 34 years old. Around 60% were Chinese and balance 20% were Indian and Malay respectively. The same percentage were for Buddhism, Hinduism and Islam. 40% were degree and post graduate respectively, and the balance were diploma holder. 80% of the participant were employed for wages and 20% were housewife.

Analysis of the interview revealed three main themes which are 'physical and emotional effect of pain', 'behaviour response to pain', 'maternal and newborn wellbeing'. The summary of the main themes and the subthemes are shown in Table I.

Theme 1: Physical and emotional effect of pain

The participants expressed their joy in using

Table I: Main themes and subthemes derived from qualitative data analysis

Main themes	Subthemes
Physical and emotional effect of pain	Perception of pain Pain tolerance Overwhelming responses Partner's support
Behaviour response to pain	Level of satisfaction Methods used to relief pain
Maternal and newborn well being	Neonatal outcomes Maternal outcomes

HypnoBirthing during birthing process. It was expressed with specific words, tolerance of pain, response felt by the participants and their partner's support.

As for perception of pain the participants used clear expression on their physical and emotional state. They believed that their mind ruled their body and it includes words that they used during their pregnancy and in the childbirth process. They added that the soothing words used has set the pace of their birthing process. Though some of participants described pain as discomfort, most of them verbalised contraction as surge and wave rather than pain.

'I was only having slight discomfort ……' (H1)
'…. used the word discomfort…..not to use words such as pain, delivery and contraction...use words such as surge, wave and birthing.' (H2)
'….had a calm birthing' (H3)
'…..felt each surge like a beautiful ocean wave….. beautiful patterns of waves.' (H3)
'I was okay with the surge…..' (H4)

The participants expressed their pain tolerance from the time of admission to the labour room till their birthing process and after using HypnoBirthing. They were able to tolerate their birthing pain, ambulate, laugh and talk throughout the birthing process and some were in this stage seconds before giving birth.

'… tightening of the abdomen …. slept on and off…. able to walk around…..still chat with my husband.' (H1)
'…. okay in the beginning still chatting…..laughing away…..funny replies made me laugh and set my mood…..frowning a bit as the surge was stronger.' (H3)
'….. okay with the surge…..only time felt overwhelmed … during crowning…..shocked to have that feeling….. more shocked and unexpected than pain.' (H4)
'…. I was 10 cm …. able to smile and walk around….. was laughing and walking…..did not feel anything except the tightening.' (H5)

As for overwhelming response they all have positive views and feelings as they attended the fear release session. This was done during the class and one of the HypnoBirthing methods. They believed that their positive approach and belief helped them to achieve the calm birthing.

'Fear release therapy helped …. release my fear about labour. Thinking about positive birthing process helped me too.' (H1)
'…… fear release session and the positive thoughts …. helped me to have a positive view on my birthing from the beginning.' (H2)
'…. fear release session …. good ….. free me from my fear.' (H3)
'I did not want to hear or think anything negative about the birthing. Thinking about good and joyful birthing moments and that was what I had. Fear release session …. was good.' (H5)

They relished the whole process. The word used were positive such as 'enjoyment moment', 'good', 'will be using for the subsequent pregnancy' and 'good memories'. HypnoBirthing was viewed by them as a positive birthing sensation and they were happy with drug-free method. Furthermore, they wanted to introduce this method to their friends.

'….. enjoyment moments …..' (H1)
'will use this for my next pregnancy …..' (H2)
'… enjoyed every moment of the process…... thank god I choose this method.' (H3)
'…. was in control all the time…..feeling good with drug free method.' (H2)
'…..most of the time I was relaxed….. felt in control of the situation and also myself.' (H4)
'I am happy to have chosen it…..know what was happening to me and around me…..I liked that…..had calm birthing.' (H5)

Theme 2: Behavioural response to pain

People may behave in an unusual way and say or do something they are not proud about later, due to pain. However, good pain management able to remove these unwanted behaviours. It is believed that birthing pain is one of the terrible pains a person can go through. However, the participants in this study stated that they had a happy and calm experience. Some felt that the birthing process was peaceful and tranquil.

'…. an enjoyment moment for me …. happy and relaxed…..no regret…..use this the next time…..will recommend this to my friends.' (H1)
'Good as far as I can remember….want to try again….. use this for my next pregnancy ….' (H2)
'…..was a calm birthing. …. enjoyed every moment …. . most of the time I was relaxed….. felt in control of the situation and also myself.' (H4)

As for the methods used to relief pain, the participants expressed variety of ways used to achieve this throughout the process. The participants' felt HypnoBirthing

was like a pandora's box as they are able to pick and use variety of methods which was helpful at various period of birthing. One of the methods was the fear release technique used in HypnoBirthing which helps in eliminating the fear during birthing process. This technique was implemented once or twice during pregnancy according to the participants need.

'Fear release therapy helped me to release my fear about labour during the pregnancy …..always thinking of having positive birthing process…. .feel more positive and enjoy pregnancy…. use positive affirmations during pregnancy….. love being pregnant …. love to have more children.' (H1)
'The fear release …… positive thoughts I had on birthing…...' (H2)

Another method was listening to rainbow relaxation and self hypnosis which helped them to relax during the birthing process and divert their mind from pain. In addition, some of the participants used other methods to divert their mind such as aroma therapy and adjustment of the room lighting. Most of the participants used this method during the first phase of birthing phase.

'… used to practice self hypnosis …. listening to the rainbow relaxation CD. (H1)
'….. listening to my current favourite track and …. Marie Mongan's calming voice in the rainbow relaxation CD…… allowed to eat and drink throughout the process …. helped me a lot…..felt it gave me energy to go through the birthing.' (H3)
'…. practiced self hypnosis with my husband …. listening to the rainbow relaxation music at home.' (H4)
'…..dimmed my room light …. helpful to divert my mind.' (H3)
'…..applied some essential oil around my tummy, waist, back and palm…..used Lavender to inhale…..' (H4)
'…..applied Lavender essential oil and put it in my pendent to inhale…..continued with my work …. switch off the room light so my mind can rest…..walking around…..during surge I just rest my head at the wall and do my breathing.' (H5)

At some point, during the birthing process, the participants used visualisation which enhanced the dilation of the cervix.

'Used visualisation …. feel my inner muscles relaxing and opening…..eating and drinking throughout the process.' (H1)
'….. use visualization of the rose bud opening helped in fastening the process…..' (H4)

Some participants changed their methods during the transition phase of the birthing process. They used deep pelvic massage and change of position to ease the pain further.

'…..used deep pelvic massage at the later stage…..went on all fours …. felt that position was good….. with this position my husband still can apply the pressure at my pelvic' (H1)
'…..watch TV one hour before the birthing …..thinking a butterfly came …. that was the time the baby came out….. feel relaxed, calm and quiet.' (H2)
'…. I was around 9 cm… apply deep pelvic pressure …. was helpful at this time.' (H3)
'…. lied down in dorsal position…..in between of the surge …. chatting with my husband…..still chatting with my husband till …. 9 cm…..towards the end, changing …. to all fours was good…..had the deep pelvic massage.' (H4)

When the participnts were in the second stage of the birthing process, they did not use the conventional way of pushing. Instead, the participants used 'J' breathing technique which helps to relax the perineum.

'…..use J breathing ……breath in push, my breath to the throat and stomach and through the vagina…..can feel my perineum was relaxed.' (H2)
'…..went on all fours and started to breathe down….. breathe from my nose and brought the oxygen to my stomach to bring my baby out.' (H3)
'….doing J breathing continuously…..started to do when I had surges.' (H4)
'…. doing 'J' breathing at home …. the practice … helpful during my birthing' (H3)

Participants further stated they used perineal massage to reduce the discomfort during crowning.

'perineum massage …. helpful. ….. see the baby's head …. not feeling any pressure at the vagina.' (H1)
… did perineal massage after 36 week … useful when baby's head was coming down …'(H3)

Theme 3: Maternal and newborn wellbeing
There were two subthemes derived from the main theme. One of the subthemes was maternal outcome. The participants felt contented for sustaining skin nick or first-degree tear rather than having three-degree tear during the birthing.

'…..I just had a nick …… does not require suturing.' (H1)
'……. slight grazing of skin at the perineum part and it will heal…..does not require suturing.' (H3)
'…..no tear but just slight grazing that does not require suturing.' (H4)

After the birthing process they felt a calming effect which helped their babies to be calm too. One of the participants had a glow in her face while explaining her experience with happy tears.

'…. whole birthing process was calm. …. my baby was

calm after delivery.' (H1)
'… feel like crying …… think about my birthing process I was excited and ……' (facial expression was glowing)
'…… talking with the doctor when …… suturing me. I learnt to be more positive.' (H2)
'….. HypnoBirthing has effect on my baby too as my baby also looked very relaxed.' (H2)
'It was such a calm and quiet birthing not much of noise in the room.' (H5)

Participants were surprised as they were able to rest during the process which was feared by many. Furthermore, the participants also expressed that they were able to converse and laugh with their friend and spouse during this period.

'…… not as scary as I thought…..most of the time even though I was alert but I was able to sleep very well. I will recommend to my friends.' (H2)
'It was memorable time for me and my husband. Surprising I slept on and off…..it was not as what we see in the TV or as I imagined…..' (H3)
'I rested for a while but I know what was taking place during the birthing and enjoyed it.' (H4)

Neonatal outcome was described as breastfeeding and bonding between parents and newborn, which was beneficial. They were able to initiate bonding and breastfeed soon after the delivery. They stated this was done while the nurse was drying the baby on top of them and covered the baby with a dry blanket.

'…… breast feed immediately after delivery.' (H2)
'…..put my baby on my stomach and I started to breast feed my baby immediately…..cleaning my baby to make him dry while I was feeding…..' (H3)
'They gave me my baby to hold…..all the while I was lying down with my baby.' (H4)
'…..just put the baby on me…..holding the baby and was feeling amazed…….. My husband also very happy and he was also touching the baby.....started to breast feed and the nurse was drying the baby and just put a warm blanket on my baby' (H5)

DISCUSSION

The aim of the study is to explore the views of primigravids on their experience in using HypnoBirthing method during the birthing process. The findings revealed a few themes.

The findings reveal that women had an empowering experience during the birthing process whereby almost all the women had enjoyed their birthing process and described their pain as discomfort. This shows that their pain during the birthing was lower or not felt by them. So, the gate control theory has worked for the participants whereby usage of HypnoBirthing techniques had travelled faster than the pain fibres and closed the gate (10). Thus, the women utilising HypnoBirthing only felt slight discomfort and had an enjoyable and beautiful moment even when they were 10 cm dilated. This was highlighted in an experimental pilot study conducted in Malaysia whereby the pain level of women using HypnoBirthing was lower than those using pharmacological therapy (5). A few other studies using alternative therapy too showed that the birthing pain experienced by birthing women were lower (11, 12) and tolerable (13, 6). This study shows that the women's ability to control their pain during birthing process emotionally and physically were incredible.

Furthermore, all the participants in the present study felt that the presences of either their husband or friend helped them and reinforced their self-confidence. In fact, all the participants verbalised the support by their partners helped them in findings ways of using HypnoBirthing techniques during their birthing as they reminded the participants on their breathing or other techniques and encouraged them which further helped in the pain management. According to Chan et al, good interpersonal relationship and constant support by the partners can reduce fear and increase the women's birth satisfaction (14, 15). Hence, the partners contributed by giving the participants emotional and physical support and information or advice when they needed it. This could have further made the participants to have sweet memories on their birthing process. Moreover, this can be supported by some experimental studies which showed that the birthing women had less pain (11,12) or fear (13, 5) during the birthing process by using HypnoBirthing techniques.

All the participants' behaviour to pain were similar whereby they talked about their level of satisfaction and methods used as relief pain were varied but were positive. The women felt they were in charge of themselves and the decision was theirs on choosing a method that they were comfortable. Mostly, they were able to feel the whole process and remember it clearly. All the participants felt happy with no regrets and wanted to use it again and recommend to their friends. Werner et al. in a RCT done in Denmark and Catsaros & Wendland in a systematic review highlighted that woman using Hypnotherapy based intervention were satisfied with the pain relief method and the child birth process (16, 17). Furthermore, they felt confident about themselves and their ability to endure the birthing process.

The participants in the present study verbalised they used different techniques at different time of birthing. One vital method was attending a fear release session and opting not to listen to other people's birth related stories. This could be the reason the participants were able to have good remarks on their birthing experiences. Catsaros & Wendland mentioned women felt they were in control of themselves and the situation by using hypnosis-based techniques (14). This can occur when

a person generally lacks fear or anxiety and the fear releasing session could have worked to the birthing women's benefit. The participants in the present study mentioned they used self-hypnosis, listening to rainbow relaxation CD, visualisation, positive affirmations and calm breathing during the initial phase of birthing which similarly enhanced their birthing process. Kappas highlighted that visualisation help to activate the neurons in the brain to act in similar way in real life (18). Mongan stated that visualisation help in the dilation of the cervix if done correctly (4).

Whereas some used deep pelvic massage, different position, breathing and pushing techniques during the third stage of birthing process. Some of them had found that by practising perineal massage at 36 weeks it was helpful during the crowning.

This was highlighted in a RCT done in Australia (19) among 176 nulliparous and also among 30 participants in a pilot quasi-experimental in Malaysia (5) whereby these women had good pain management compared to those receiving standard care and IM Pethidine. Moreover, the breathing down technique the participants used made them to feel relaxed during the birth of their child.

Wellbeing of maternal and newborn outcome was another theme in the present study. Most of the participants from this study mentioned regarding the tear the sustained during the birthing process. According to the participants they sustained either skin nick or first-degree tear. They further explained that their breathing and pushing technique taught in HypnoBirthing contributed to this together with the perineal massage they practised. This is parallel to experimental study done in Australia (19) and Malaysia (5) showed that the perineal outcome of the participants using these similar methods was better than the control group that used the standard pushing techniques used in hospitals

Furthermore, most of the participants expressed that they did not feel that much of pain during the crowning due to the perineal massage that was started after 36 weeks. It was noted that the perineal massage helps during the crowning whereby the birthing women do not feel the pain (4).

Neonatal wellbeing was highlight by the immediate establishment of bonding and breastfeeding. According to Barnes et al. usage of complimentary therapied during pregnancy and birthing process has been found to be beneficial for the newborns especially in the initiation of breastfeeding and bonding (20). Moreover, one of the participants mentioned that the baby looked relaxed after the birthing as the process itself was calm and quiet. This could be due to the absence of raised voices giving instruction to the birthing women on methods of pushing. As in HypnoBirthing the birthing women are allowed to push using 'J' breathing and when they feel like pushing ensured the environment in the birthing room was tranquil and conducive for both mother and the baby (4).

There are a few limitations to the study as the present study was a part of a mix-method research and the qualitative phase was done after the quantitative phase. Hence the sample size were only five participants which is relatively small. However, the data saturation was reached by the fourth participant as their answers were relatively same. Furthermore, the interview was conducted within 48 hours of birth which could eliminate recall bias and can be one the strength in this study.

CONCLUSION

The study hence concluded that use of HypnoBirthing during childbirth process was effective in helping primigravida women in their pain management and in empowering them with their decision in using HypnoBirthing. There was no interference from the midwives unless necessary but at the same time it was beneficial for the birthing women. Study should be done to include HypnoBirthing in midwifery education as this can be useful for them to further educate pregnant couples to practice alternative therapy for birthing. Hypnobirthing techniques can be recommended to be incorporated in nursing and midwifery as complementary therapy. Further research should include the husbands or partners feeling to be involved in the birthing process and feelings of birthing women comparing women using complimentary therapy and pharmacological therapy.

ACKNOWLEDGEMENTS

We would like to thank Dr Tan Ee Ping for introducing HypnoBirthing as alternative therapy for birthing.

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