

The Relationship of Anxiety Level with the Success of the Process in Particular Mothers in the Active Phase I of Primigravida

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ABSTRACT

Anxiety appears in the third trimester (28-40 weeks) starting before delivery. In addition, this third trimester is a high risk of the possibility of premature birth so that it can cause high anxiety in primigravida mothers. One of the factors that need attention is the maternal factor, namely the level of anxiety in the face of childbirth. One of the indicators of anxiety is anxiety, fear and stress. And if not handled, the consequences will have a negative impact which can lead to new problems. This study aims to determine whether there is a relationship between anxiety levels and the smooth delivery of primigravida in partu mothers at Gemarang Health Center, Ngawi Regency. The research design used is cross sectional. The population in this study were all primigravida mothers at Gemarang Health Center, with a total population of 30 primigravida mothers. Samples were taken in this study through inclusion and exclusion criteria with data analysis coding, scoring and tabulating. The results of the study showed that there was a relationship between anxiety in facing childbirth with smooth delivery in primigravida in partu mothers at Gemarang Health Center, Ngawi Regency in 2021 (p value = 0.003). Where there is a relationship between anxiety in facing labor and smooth delivery in primigravida in partu mothers due to an anxious condition, a mother cannot concentrate on the labor process she is facing. This condition at a later stage will reduce power or his so that it will increase the time of delivery because the fetus is not born immediately. On the other hand, when the mother is calm, the mother can gather strength for the physiological process of labor to take place.

I. Introduction

In Indonesia, maternal and infant mortality rates are still high when compared to neighboring ASEAN countries, Indonesia still ranks at the bottom. In fact, currently the standard for the level of health in a country or region is the maternal and infant mortality rates. [1] There is some evidence that there are problems with smooth delivery or not, which can be described as follows : pre-eclampsia (between 3-10% incidence in pregnancy), eclampsia (incidence in pregnancy between 9.8-25.5%) , abortion (the incidence in pregnancy is between 10-15%), postdate (the incidence in pregnancy is between 3.5-14%), ectopic pregnancy (the incidence in pregnancy is between 0-14.6%), antepartum bleeding Among registered deliveries 14%), placenta previa (frequency that occurs in labor between 0.8-5.9%), placental abruption (frequency that occurs in childbirth is between 0.2-2.6%), habitual abortion (the incidence of in pregnancy ranges



from 73%), hyperemesis gravidarum (the incidence that occurs in pregnancy is between 60-0%) In Indonesia, according to the Central Bureau of Statistics, 5% of mothers under five do not experience anxiety in the face of childbirth, 14% mild anxiety, 26% moderate, 45% severe and 10% very severe. [5]

The causes of the occurrence of irregularities in labor can occur in labor including maternal factors, environmental factors, and the ability to help. Factors from the mother include power, passanger, passage, environmental factors are atmosphere, environmental conditions, while those included in the helping factors are tools, ways to help. [3] One of the factors that need attention is the maternal factor, namely the level of anxiety in the face of childbirth. [2] One of the indicators of anxiety is anxiety, fear and stress. And if not handled, the consequences will have a negative impact which can lead to new problems. [4] With the approaching delivery schedule, especially in the first delivery, it is natural for feelings of anxiety or fear to arise. [7] From the description of the problem above, there are still many mothers who feel anxious in facing childbirth, to find a way out that can be done through maternal, helper, and environmental factors. [6] In order for delivery to occur smoothly, the mother strives to reduce the level of anxiety. In addition, the role of health workers is also needed to reduce the level of anxiety in patients, one of which is by providing support and providing motivation to mothers. [8]

Based on the above background, the researchers are interested in conducting a study entitled "The Relationship between Anxiety Levels with Process in Inpartu Mothers in First Stage of Primigravida Active Phase at Gemarang Health Center, Ngawi Regency".

II. Method

A. Design and Samples

The Research Design Used Is Cross Sectional. The Independent Variable In This Study Was The Level Of Anxiety Of Primigravida Mothers In Facing Childbirth. While The Dependent Variable In This Study Process In Primigravida Inpartu Mothers. The Research Instrument Is In The Form Of Observation Sheets. The Sample In This Study Were 30 Inpartu Mothers In Primigravida's Active Phase I Phase At Gemarang Community Health Center Ngawi.

B. Data Analysis

Statistical tests for both variables used *Chi-square* test All tests were performed using SPSS.

III. Results and Discussion

The results of this study indicate that there is a relationship between anxiety and primigravida inpartu mothers

Table 1. Cross Table of the Relationship between Anxiety and primigravida inpartu mothers at Gemarang Ngawi Health Center

NO	ANXIETY	SMOOTH LABOR				TOTAL	%
		Not smooth	%	Fluent	%		
1	No Anxiety	0	0	2	100	2	100
2	light	0	0,0	6	100,0	6	100
3	currently	11	78,6	3	21,4	14	100
4	heavy	6	75	2	25	8	100
TOTAL		17	57	13	43,3	30	100
CHI-SQUARE WITH P VALUE = 0.003 < 0.05							

The results showed that there was a relationship between anxiety in facing labor and smooth delivery in primigravida inpartu mothers at Gemarang Health Center, Ngawi Regency in 2021 (p value = 0.003). A mother who is about to give birth needs power, passenger, passage, helper and soul (psyche) to support the smooth delivery process. Therefore, when the delivery process takes place, the psychological condition of the mother must be good, the atmosphere is calm and not anxious.

It was found that there was a relationship between anxiety in facing labor and smooth delivery in primigravida inpartu mothers due to an anxious condition, a mother could not concentrate on the labor process she was facing. This condition at a later stage will reduce power or his so that it will increase the time of delivery because the fetus is not born immediately. [15] On the other hand, when the mother is calm, the mother can gather strength for the physiological process of labor to take place. Strength or power becomes a source of strength for his so that the fourth stage can take place quickly.

IV. Conclusion

Almost half of the respondents have anxiety facing childbirth with less category, namely 25 respondents (48.1%) of a total of 30 respondents. Most of the respondents had a smooth delivery including the non-smooth category, namely 17 respondents (56.7%) out of a total of 30 respondents. There is a relationship between anxiety facing labor and smooth delivery in primigravida inpartu mothers at Gemarang Health Center, Ngawi Regency (p value = 0.003).

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