

Husband Support on Pregnant Mother's Anxiety in Facing Labor During the Covid-19 Pandemic in Tamanan Kediri 2022

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ABSTRACT

Husband's support is a very important factor in the delivery process, because the husband can foster feelings of confidence and form a strong mentality towards his wife so that anxiety and fear disappear. In addition, cooperation between family and husband in providing good support for pregnant women can also eliminate the worry of pregnant women about the delivery process that will be carried out by pregnant women. The design of this research is correlational analytic. The population in this study were pregnant women in Tamanan Village, Kediri City in May 2022. In this study, the sampling technique used simple random sampling. The research instrument is a questionnaire sheet. The results showed that half (50%) of the respondents who received good husband support experienced mild anxiety, namely as many as 6 respondents, almost all (76.92%) who received sufficient husband support experienced moderate anxiety, namely as many as 20 respondents. Based on the results of statistical tests using the Spearman Rank correlation test (Rho) on the husband's support variable (X) and anxiety level (Y) obtained p value = 0.002 with a confidence level of $\alpha = 0.05$, it can be concluded that $p < \alpha$ then H_0 is rejected and H_1 is accepted, meaning that there is a relationship between husband's support and anxiety levels in third trimester pregnant women. Based on the results of the study, there was an effect of husband's support on the anxiety of pregnant women in the third trimester in facing childbirth during the covid 19 pandemic in Tamanan Village, Kediri City in 2022. Suggestions for research sites to motivate husbands to increase their role psychologically throughout the process experienced by their wives includes pregnancy, childbirth, postpartum to the decision-making process in family planning.

I. Introduction

Covid-19 is a disease that can disturb everyone, including Indonesia. This disease attacks the respiratory tract which was first discovered in Wuhan, China in December 2019 and has spread to various countries, one of which is Indonesia (Alibasjah, r. W., izza, k., & susiloningsih, n. 2016). Based on data from the Maternal and Neonatal Service Program Policy during the 2019 Covid Pandemic, it is known that the number of pregnancy rates has increased significantly, its presentation reaching 72%. This has a very big difference when compared to 54.22% in 2018 (Astria, y., nurbaeti, i., & rosidati, c. 2009). Corona Virus cases in Indonesia according to the Directorate of Family Health in 2020 amounted to 165,887 people with a death toll of 4.3% (Handayani, r. 2012). This case attacks all groups, one of which is pregnant women (Ibi. 2020). This causes pregnant women to experience anxiety and even depression and can



increase the number of deaths. The results of the study show that pregnant women who experience anxiety even to the point of stress are caused by various kinds of problems including economics, family, work, and concerns about pregnancy itself and childbirth (Ifa Nurhasanah. 2021). According to the Ministry of Health (2021), that the Covid-19 Virus was first discovered on March 2, 2020 where out of 1,078,314 positive people suffering from Covid-19, 29,998 people were found to have died and 873,221 people have recovered and 175,095 people are in the recovery period (Kementeriaan Kesehatan, RI. 2020). The results of Yuliani's research, Diki Retno (2020) in Baturaden District, found that 57.5% of third trimester pregnant women experienced anxiety where 40% of them experienced mild to moderate levels of anxiety. The factors that cause anxiety experienced by pregnant women include the risk of being exposed to Covid-19, the quarantine period and the steps adopted during the Covid-19 pandemic which can worsen the mother's thoughts and emotions and can cause symptoms of depression in the pregnant woman (Ifa Nurhasanah. 2021). The above statement is supported by Cella's research (2016), where out of 107,000,000 third trimester pregnant women, it was found that 59% of mothers experienced anxiety in dealing with childbirth during the Covid-19 pandemic. According to Alibasjah et al., (2016), the anxiety of pregnant women in the third trimester is due to the fear of mothers not getting adequate prenatal care during the pandemic so that it can trigger various symptoms and diseases, while according to Siallagan & Lestari (2018), the birth of a baby Prematurity and miscarriage can occur if the mother often experiences anxiety (Mona, N. 2020).

Age, education level, occupation and parity of pregnant women are factors that can affect anxiety in pregnant women. In addition, maternal knowledge, psychology, economics, family support, especially husband's support can also affect anxiety in pregnant women. Pregnant women with the age of 20 years or more than 35 years have a high risk of fetal disorders, so that it can cause anxiety in pregnant women (Siallagan, D., & Lestari, D. 2018). Husband's support is a very important factor in the delivery process, because the husband can foster a feeling of self-confidence and form a strong mentality towards his wife so that anxiety and fear disappear. In addition, cooperation between the family and husband in providing good support to pregnant women can also eliminate the worries of pregnant women about the delivery process that will be carried out by pregnant women (W. Martalisa, W. Budisetyani. 2013).

II. Methods

Design and Samples

The design of this research is correlational analytic. The independent variable in this study is husband's support. The dependent variable in this study is anxiety in third trimester pregnant women in facing childbirth during the covid 19 pandemic. The research instrument is a questionnaire sheet. The population in this study were pregnant women in Tamanan Village, Kediri City in May 2022. In this study, the sampling technique used simple random sampling.

Data Collections

Asking permission from the Head of the Tamanan City of Kediri. After getting permission from the Tamanan Village, Kediri City, then conducting research, the researcher gave an explanation to the prospective respondents about the purpose of the study and if they were willing to become respondents, they were welcome to sign the consent form. The questionnaire sheet was stored by the researcher for data processing, which was carried out after the intervention was completed.

Data Analysis

Statistical test for both variables using Spearman Rho test.

III. Results and Discussion

General Data

Characteristics of respondents based on education level are presented in the following table:

Table 1. Frequency Distribution of Respondent Characteristics Based on Education Level of Third Trimester Pregnant Women

No.	Education	Frequency	Prosentase
1.	College	4	12,5 %
2.	Junior High School	10	31,25%
3.	Primary High School	18	56,25 %
	Total	32	100%

Characteristics of respondents based on education level, most (56.25%) have basic primary high school.

Table 2. Frequency Distribution Based on Respondent Characteristics Occupation of Third Trimester Pregnant Women

No.	Occupation	Frequency	Prosentase
1.	Housewives	20	62,5 %
2.	Farmer/Labour	2	6,25%
3.	Private	8	25 %
4.	Civil Servant	2	6,25%
	Total	32	100%

The characteristics of the respondents based on their occupation are mostly (62.5%) are housewives.

Special Data

Table 3. Frequency Distribution of Respondent Characteristics Based on Husband's Support of Third Trimester Pregnant Women

No.	Husband's Support	Frequency	Prosentase
1.	Good	26	81,25 %
2.	Enough	6	18,75%
3.	Not Enough	0	0 %
	Total	32	100%

Characteristics of respondents based on husband's support almost all (81.25%) are 20-35 years.

Table 4. Frequency Distribution of Respondent Characteristics Based on the Anxiety Level of Third Trimester Primigravida Pregnant Women

No.	Anxiety Level	Frequency	Prosentase
1.	Not Worried	3	9,38 %
2.	Mild Anxiety	8	25%
3.	Moderate Anxiety	21	65,62 %
4.	Severe Anxiety	0	0
	Total	32	100

Characteristics of respondents based on the level of anxiety most (65.62%) experienced moderate anxiety.

Table 5. Cross-tabulation of the relationship between husband's support and anxiety level in third trimester pregnant women

No.	Husband's Support	Anxiety Level								Σ	%
		Not Worried		Mild Anxiety		Moderate Anxiety		Severe Anxiety			
		Σ	%	Σ	%	Σ	%	Σ	%		
1.	Good	2	33,33	3	50	1	16,67	-	-	6	18,75
2.	Enough	1	3,85	5	19,23	20	76,92	-	-	26	81,25

3.	Not	-	-	-	-	-	-	-	-		
	Enough										
	Σ	3	9,38	8	25	21	65,62	-	-	32	100

The results showed that half (50%) of the respondents who received good husband support experienced mild anxiety, namely as many as 6 respondents, almost all (76.92%) who received sufficient husband support experienced moderate anxiety, namely as many as 20 respondents.

Based on the results of statistical tests using the Spearman Rank correlation test (Rho) on the husband's support variable (X) and anxiety level (Y) obtained ρ value = 0.002 with a confidence level of $\alpha = 0.05$, it can be concluded that $\rho < \alpha$ then H_0 is rejected and H_1 is accepted, meaning that there is a relationship between husband's support and anxiety levels in third trimester pregnant women. The strength of the correlation is expressed by the correlation coefficient of 0.523, which means that the level of relationship between husband's support and the level of anxiety in third trimester pregnant women is in the rather low category with the direction of a positive relationship (+), meaning that the less support the husband has, the higher the anxiety level of third trimester pregnant women in dealing with labor.

Pregnancy is the period or time since it is stated that the growth of the fetus in the womb, until the next 38 weeks, which undergoes changes such as physiological and psychological. Pregnancy is very vulnerable to the risk of disability and death which is influenced by nutrition, genetics to stressor levels. Stress levels during pregnancy, especially during the Covid-19 pandemic, are known to have increased significantly by more than 76% and are very risky to the fetus during pregnancy. Pregnancy is one of the sources of stress experienced by women. In general, a woman who finds out that she is pregnant for the first time will feel happy and at the same time anxiety also arises in the woman due to the changes that occur in her and the development of the fetus in her womb. When pregnant, mothers experience significant changes in physiological and psychological functions, the process of adjusting to this new situation often causes anxiety in (Yuliana, A. 2015). According to Manggarsari (2010) in physical changes in pregnant women such as changes in body shape with an increasingly enlarged body, the appearance of acne on the face or peeling facial skin. Psychological changes that occur in pregnant women include anxiety about birth, concentration regarding changes in relationships with partners and friends, and anxiety about financial problems. At the same time, you will also feel anxiety about the birth of a baby and the beginning of a new phase in the life of the mother-to-be, Manggarsari (2010). According to Nurdiana (2012), the anxiety experienced by pregnant women is caused by the increase in the hormone progesterone. In addition to making pregnant women feel anxious, the increase in hormones also causes emotional disturbances and makes pregnant women tired quickly. According to Priyoto (2014), it is not uncommon for pregnancy to bring with it a sense of anxiety that will affect the physical and psychological well-being of both the mother and the fetus, for example resulting in physical disability and a decline in the potential for intelligence and mental emotional aspects. Mother's feelings of anxiety when thinking about the process of giving birth and the condition of the baby to be born do not only occur in the first pregnancy, but also in subsequent pregnancies. Even though pregnant women have experience in dealing with childbirth, anxiety will always be there in Martalisa, 2013 (Yuliana, A. 2015).

A husband is a man who becomes a wife and wife (Indonesian Dictionary, 2003). Gottlieb (2000) states that support consists of information that requires people to believe that they are cared for and loved. Any information from the environment that prepares the subject's perception that he or she is the recipient of positive effects, affirmations or assistance, signifies an expression of support. According to Ritter (2001) support refers to the emotional, instrumental and financial assistance obtained from the network. Support simply refers to interpersonal relationships that protect people against the negative consequences of stress.

Husband's support is defined as assistance provided by someone who is a married couple with an individual (wife) to help the individual in overcoming problems (tension or difficulties). Husband's support refers to social support that is seen by the family as reliable for the family but family members view that a supportive person is always ready to provide help and assistance if needed. The form of husband's support includes emotional support, namely attention that creates feelings of security so that individuals feel cared for and accepted. Included in emotional support is giving encouragement and support, giving attention, acceptance, understanding, having a friend to talk to. Social support includes the existence of free friendships that allow individuals to participate in various activities, for example involving in discussions, giving awards, respect and social activities by family, children and the environment. Instrumental support includes real assistance or physical action given by other people. Assistance includes the provision of time, willingness to deliver, financial assistance, assistance or the provision of goods. Informational support includes communication about opinions or facts that are relevant to individual difficulties such as providing advice, providing input and thoughts, providing guidance and providing entertainment.

Sources of husband's support are obtained from internal family support, such as husband's own motivation or support from siblings and external family support. External family support comes from extended family support. The extended family is the nuclear family and related people who are most commonly members of the orientation family, namely one of the nuclear family friends including relatives, grandparents, aunts, uncles, and cousins. While the nuclear family is a family who married as parents or breadwinners. The nuclear family consists of husband, wife and children (biological or adopted). Husband's support is a process that occurs throughout life. The nature and type of support is different in different stages of the life cycle and all stages of life, husband's support is able to function with various intelligences and senses. As a result this will improve health and adaptation in the family. According to Will in Friedman (2002) concluded that both the buffer effect (husband's support to withstand the main negative effects and anxiety on health) and the main effect of husband's main support directly affect the health outcomes. In fact, the main and buffering effects of husband's support on health and well-being function simultaneously.

Anxiety according to Mandagi is a normal condition that occurs in various circumstances, such as growth, changes and new experiences (Yuliani, D. R., & Aini, F. N. 2020). Anxiety according to Usman in 2016 is a feeling of fear that has no clear cause and is not supported by the existing situation. In addition, according to sodiqoh in 2019, anxiety cannot be avoided from everyday life. Anxiety can be felt by everyone if they experience pressure and deep feelings that cause psychiatric problems and can develop in the long term (Siallagan, D., & Lestari, D. 2018). Anxiety in pregnant women according to Usman in 2016, can arise especially in the third trimester of pregnancy until the time of delivery, during this period pregnant women feel anxious about various things such as normal or abnormal babies being born, pain that will be felt, and so on, so that the more Due to the proximity of the delivery schedule, especially in the first pregnancy, it is natural for feelings of anxiety or fear to arise because of pregnancy, especially when it is added to the burden of thought with the phenomenon of the COVID-19 pandemic (Ibi. 2020). According to Stuart in 2016 there are several factors that affect a person's anxiety including age, gender, occupation, knowledge and education (Yuliana, A. 2015). Anxiety is a feeling of worry as if something bad will happen and feeling uncomfortable as if there is a threat. A mother may feel afraid of pain and physical dangers that will arise at the time of delivery (Yuliana, A. 2015). The fear of childbirth is often experienced by mothers during pregnancy. This anxiety can be experienced by both primiparous and multiparous mothers. A primiparous mother is a woman who gives birth to a baby for the first time. Meanwhile, a multiparous mother is a woman who has given birth to babies several times (Yuliana, A. 2015). In the process of giving birth to a baby, psychological

influences can inhibit and slow down the birth process or it can also accelerate the birth of a baby, so the biological function of reproduction is strongly influenced by the psychological life and emotional life of the woman concerned (Yuliana, A. 2015). Based on studies related to the incidence of prolonged labor, 65% is due to inefficient uterine contractions. According to Old et al (2000), dysfunctional uterine contractions in response to anxiety inhibit uterine activity. The response is part of the psychological component, so it can be stated that psychological factors have an influence on the occurrence of disruptions in the labor process.

IV. Conclusion

Based on the results of the study, there was an effect of husband's support on the anxiety of pregnant women in the third trimester in facing childbirth during the covid 19 pandemic in Tamanan Village, Kediri City in 2022. Suggestions for research sites to motivate husbands to increase their role psychologically throughout the process experienced by their wives includes pregnancy, childbirth, postpartum to the decision-making process in family planning.

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