

LITERATURE REVIEW: THE RELATIONSHIP OF HUSBAND'S SUPPORT ON ANXIETY DURING THE LABOR PROCESS

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ABSTRACT

Approaching the birthing process, pregnant women experience various feelings, including anxiety. To reduce anxiety during childbirth is the presence of a maternal companion such as a husband. The husband's presence during the birthing process can have a positive effect on childbirth, namely reducing morbidity, reducing pain, shortening labor and reducing the number of births with operations such as caesarean section. Objective: To analyze research articles related to the relationship between husband's support and anxiety during the birth process. This study uses a literature study method, searching for articles using 6 electronic based articles, namely Google Scholar, Semantic Scholar, Pubmed, Garuda, Elsevier, Research Gate. With the keywords husband's support, anxiety, childbirth and husbands support, anxiety, childbirth process. Accredited Journal, full paper, published from 2017-2021. The results of the analysis of 11 articles showed the same result that there was a relationship between husband's support and anxiety during the birth process. This is indicated by the higher the husband's support, the lower the anxiety level of the mother giving birth. The conclusion of the article analysis results shows that there is a significant influence between the relationship between husband's support and anxiety during the birth process. So it is necessary to provide education regarding the importance of husband's support during the wife's birthing process.

Keywords : *Husband's Support, Anxiety, Childbirth Process*

INTRODUCTION

Indonesia has a high maternal mortality rate (MMR) compared to other countries Association of Southeast Asian Nations (ASEAN) others are 305/100,000 Live Births (KH) and Infant Mortality Rate (IMR) 22.23/1000 (KH) (Directorate of Family Health, 2016). According to the Indonesian Ministry of Health (2019), the largest MMR occurs during childbirth, 49.4% (Ministry of Health of the Republic of Indonesia, 2019). According to Riskesdas (2018) the percentage of neonatal deaths caused by asphyxia (51%), LBW (42.9%), SC (18.9%), Premature (33.3,%). The MMR reduction target is determined through three models Average Reduction Rate (ARR) or the average decrease in maternal mortality. The three models are the first models Calculate Average Annual Profit, second Calculate Average Investment, third Use ARR Formula. Of the three models, the Ministry of Health uses the second model with an average reduction of 5.5% per year as the performance target. Based on this model, it is estimated that in 2030 the MMR in Indonesia will fall to 131 per 100,000 live births (Riskesdas, 2018).

World Health Organization (WHO) tahun 2017 argues that indicators One way of measuring the welfare of a nation is the magnitude of the death or morbidity rate. The higher the death and morbidity rate, the lower the welfare of a nation. Mortality and morbidity rates also indicate the level of health and high welfare of the community and indicate the quality of public health services. WHO estimates that 15,000 of the approximately 4.5 million women giving birth in Indonesia experience complications that cause death.

Based on data WHO (2017) it is known that the maternal mortality rate is very high, namely 295,000 women died during and after pregnancy and childbirth in 2017, the vast majority of these deaths (94%) occurred in low resource settings, and most of them could

have been prevented. Every day in 2017 around 810 women died from preventable causes. Central Asia, East Asia, Europe and North Africa, overall the maternal mortality ratio in developing countries has decreased to just under 50%.

The results of the 2020 IDHS survey show a significant increase in MMR, namely 16 maternal deaths (91.45/100,000 KH), while the number of maternal deaths until August 2020 namely 27 maternal deaths (227.22/100,000 KH) (Ministry of Health of the Republic of Indonesia, 2016). However, according to the Indonesian Ministry of Health in 2017, in general there was a decline in maternal deaths during the 1991-2015 period (Indonesian Ministry of Health, 2017). According to the Indonesian Ministry of Health in 2019, in general there was a decrease in maternal deaths from 390 to 305 per 100,000 live births. Even though there is a decreasing trend (MMR), it has not succeeded in achieving the MDGs target (Millenium Development Goals) that must be achieved is 102 per 100,000 live births in 2015. The results of the 2015 Inter-Census Population Survey (SUPAS) show that (MMR) is three times higher than the MDGs target (Ministry of Health of the Republic of Indonesia 2019).

The results of reports from the Health and Nutrition Section of the Public Health Sector show that the number of maternal deaths (pregnancy, childbirth and postpartum) in Jambi Province in 2020 was 62 cases with a total of 64,365 live births. If the projected maternal mortality rate in Jambi Province in 2020 is 96 per 100,000 live births. The highest number of maternal deaths was in Tebo Regency (11 cases) while Sungai Banyak City had the lowest deaths with one maternal death (Jambi Province Profile, 2020).

Anxiety is a distraction a person's emotional state which is characterized by deep and continuous feelings of fear and worry (Hawari, 2013). To reduce anxiety during childbirth is the presence of a maternal companion such as a husband. The presence of a companion during the birthing process can have a positive effect on childbirth, namely by reducing morbidity, reducing pain, shortening labor, and reducing the rate of surgical births including caesarean section (Corsi, 2016).

Husband's support can be in the form of providing motivation to the wife both morally, materially, physically, psychologically, emotionally, informationally, judgmentally and financially. (Corsi, 2016).

The aim of this research is to analyze research articles related to the relationship between husband's support and anxiety during the birth process.

METHODS

This study uses a literature study method, searching for articles using 6 electronic based articles, namely Google Scholar, Semantic Scholar, Pubmed, Garuda Portal, Elsevier, Researchgate with the keywords Husband's Support, Anxiety and the Childbirth Process. Original article, full text, published from 2017-2022.

RESULTS

The results of the first research conducted by Fitriani, et al in 2020 at Dr. Hospital. M. Yasin Bone with quantitative research methods using a descriptive analytical approach cross sectional. The population in this study was 30 people using a sampling technique Non-Probability Sampling with a sample size of 30 people. Data were analyzed using univariate analysis and bivariate analysis with tests chi-square variables in this study used the HARS scale questionnaire. The research results show Test Chi-Square with Pearson Chi-Square calculated value is obtained $\chi^2=0,003 < \chi^2=0.05$ and this analysis can be interpreted that H_0 is accepted or there is a relationship between husband's assistance and the mother's level of anxiety during the birthing process in the hospital.

The results of the second research carried out by Asiyah, et al in 2021 which was carried out at RSU Prima Medika Tulung Agung, using a cross sectional research method. The population in this study were all 142 primigravida mothers in the Maternity Room at RSU

Prima Medika Tulung Agung using the consecutive sampling with a sample size of 35 people. Data were analyzed using the hierarchical correlation test (Spearman Rho), the variables in this research used the HARS scale questionnaire. With the results of the Spearman Rho statistical test research, it was found that $p\text{-value}=0.000<0.05$ so that there was a relationship between husband's support and anxiety of primigravida mothers with a correlation coefficient value of 0.691, meaning the level of relationship closeness was in the strong category.

The results of the third research carried out by Wulandari, et al in 2021 which was carried out at PMB Tutik Susmiati., S.Tr.Keb, using a correlative research method using a cross sectional approach. The population in the study were all mothers giving birth in October 2020 at PMB Tutik Susmiati., S.Tr.Keb, totaling 30 respondents. The sampling technique was accidental sampling with a sample of 30 people, the data was analyzed univariately with the chi square test with the variable used in the research being a questionnaire. With the results of the research after analyzing husband's assistance with the level of anxiety, it shows a $p\text{ value} = 0.030 = 0.05$, then H_0 is rejected and H_a is accepted. There is a significant relationship between husband's assistance and anxiety of primiparous mothers giving birth.

The results of the fourth research conducted by Selamita, et al in 2021 with quantitative research methods using a cross sectional approach. The population in the study of mothers giving birth was determined according to the inclusion criteria with a total sampling of 193 respondents with a sampling technique using accidental sampling technique with a sample size of the entire population. The data was analyzed statistically using the chi square test with measuring instruments in the study using an anxiety questionnaire Depression Anxiety Scale (DASS). With the results of the chi square test and correlation test, it is obtained that the $p\text{-value}$ is <0.0001 and the R value is 0.563, so it can be concluded that H_0 is rejected. With a sufficient level of strength, the conclusion means that there is a significant relationship between husband's support and the level of anxiety in mothers giving birth.

The results of the fifth research conducted by Nikmah, et al in 2018 were carried out at BPM "M" JL Menur II Surabaya, using observational analytical research methods with a cross sectional approach. The population in the study were all pregnant women in the process of giving birth, a total of 24 primi gravidarum women using a purposive sampling method.

Sampling with a total sample of 24 primi gravidarum mothers, the data was analyzed through a statistical test of contingency coefficient with the measuring instrument in this study using a questionnaire. With the research results after analyzing the questionnaire answer data using an analytical research design with a significance rate of 0.05. Get the result with X^2 calculate (value)=9,189 and $p=0,027$. Then when $p \leq \alpha$ ($0.027 \leq 0.05$) and $2\text{ count} \geq X^2\text{ table}$ ($9,189 \geq 7.82$). So H_0 is rejected, which means The $p\text{ value}$ is 0.027, so $p < \alpha$ (0.05) means there is a relationship between husband's assistance and the anxiety level of primi gravidarum mothers when facing childbirth at BPM "M" JL Menur II Surabaya.

The results of the sixth research conducted by Salehi, et al in 2017 using a randomized control trial research method. The population in the study was 84 primiparous women enrolled in childbirth education classes. The sample amounted to 84. The sampling technique was random, the data was analyzed using convenience sampling using one-way analysis of variance (ANOVA) and the post hoc least significant difference (LSD). The measuring instrument used in the research is a questionnaire. With the research results, the average anxiety score during hospitalization was carried out using the ANOVA test.

One-way indicated significant differences between the three groups ($P<0.001$). Post hoc LSD test showed that the mean anxiety score during hospitalization in the group with husband's assistance was significantly lower compared to the group with assistance ($P<0.001$) and also in the group with assistance was significantly lower compared with the control group ($P=0.02$).

The results of the seventh research conducted by Marcelina, et al in 2019 with the method in this research using a cross-sectional study. The population in the study were all primigravida mothers in four community health centers in Bekasi City with a sample in this study of 126 respondents with a sampling technique using cluster sampling. The data was analyzed using reliability and validity tests with the measuring tool in this study using an anxiety questionnaire. With the results obtained, the lower the satisfaction with husband's support, the greater the mother's anxiety and fear of giving birth, so this is significantly related to fear of giving birth ($p < 0.005$).

Results of the eighth research conducted by Devi, et al in 2018. The method in this research is quantitative with a non-experimental research design. The population in the study was 300 primigravida and multigravida mothers in the city of Pune with the sample used in the research being 300 primigravida and multigravida mothers in the city of Pune using a non-probability purposive sampling technique, data were analyzed using the Karl Pearson correlation coefficient formula ($r = 0.95$). The measuring instrument in this study used an anxiety scale questionnaire. With research results, 60% of primigravida mothers aged 23-27, 20% in the 18-

22 years old, 9.3% are in the group over 33 years old, the majority of respondents' education is 42.6% is secondary school, 34.6% is primary education, 12.6% is graduate, 10% is postgraduate. The majority of mothers support their husbands, namely 83.3%. The anxiety level of most (47.30%) primigravida mothers had a severe anxiety score before delivery, 44.7% of them had moderate anxiety and 8% experienced mild anxiety.

Multigravida mothers Mostly 83% are in the age group 18-22 years, 53.3% are in the 23-27 year group, 34.7% are group 28-32% years old, 3.3% is the group above 33 years. The majority of respondents' education, 48.7%, is primary education, 26% were graduates, 18% were secondary schools, 7.3% were postgraduates. The majority of mothers support their husbands with 5.3% support. The anxiety level of most (47.30%) primigravida mothers had a score of severe anxiety regarding childbirth, 44.7% of them experienced moderate anxiety and 8% experienced mild anxiety. Differences in anxiety levels facing childbirth between primigravida and multigravida with testing Wilcoxon Mann-Whitney U, where the statistical value is sig. (2-tailed) of 0.006 or $p < 0.05$ indicates that there is a difference in anxiety levels between primigravidas and multigravidas.

The results of the ninth research conducted by Erkaya, et al in 2017 with the method in this research being descriptive. The population in this study was all pregnant women (2705) who were treated at the pregnant women's polyclinic within one year at the Trabzon Kanuni training and research hospital with a total sample in this study of 184 participants, the sampling technique used a sampling formula with an unknown universe. Data were analyzed with SPSS 21.0 and using percentage distribution, mean, standard deviation, t test, Mann-Whitney U test, Kruskal-Wallis ANOVA and semen correlation analysis, the measuring tools in this study used the Wijma Delivery Expectations/Experience Questionnaire (W DEQ-A) and the Beck Anxiety Inventory (BAI). The research results showed that a significant positive correlation was determined between the W DEQ-A average score of 63.83 ± 20.13 and average score mean BAI 22.66 ± 13.68 ($r = 0.484$; $p = 0.000 < 0.05$). That is, when the total W-DEQ A score increases, the BAI score also increases. A statistically significant relationship was found between the mean BAI score of pregnant women and the availability of partner support ($p < 0.05$).

The results of the tenth research conducted by Najafi, et al in 2017 with the method in this research being exploratory qualitative. The population in the study of Iranian birth mothers with a sample in this study was 25 respondents with a sampling technique using a purposive sampling method, measuring instruments in the research using questionnaires and semi-structured interviews. The results obtained in this study showed that women believed that their husband's better presence during labor would help reduce anxiety during labor.

DISCUSSION

Respondent characteristics

The results of a study of 10 articles showed that the majority of respondents received good husband support during childbirth. Minimal support in the form of touch and words of praise that make you comfortable and provide reinforcement during the birthing process. Husband's support is a positive response to his pregnant wife so that it has a positive impact on the growth and development of the fetus, the physical and psychological health of the mother. This is in line with one study which states that a husband's support for his wife can cause feelings of happiness within oneself so that there is inner peace and in the end it will be easier to adjust to the pregnancy situation (Yulia, 2021). From the 10 articles, the results showed that the level of anxiety of women giving birth varies from normal or no anxiety, mild anxiety, moderate anxiety, severe anxiety, to very severe anxiety. The level of anxiety in each individual is different, so it requires countermeasures to overcome the anxiety experienced.

From 10 articles, the same results were obtained that there was a relationship between husband's support for anxiety during the birthing process. This is indicated by the higher the husband's support, the lower the level of anxiety of the mother giving birth. Husband's support can increase self-adaptation abilities and psychological peace and feelings of belonging, resulting in more self-confidence and reduced anxiety, because husband's support is a much-needed resource for mothers giving birth. So that pregnant women will be more prepared and happy in facing the birthing process.

The analysis above shows that there is a relationship between husband's support and the anxiety experienced by the mother during childbirth. This is in line with Nurheni's theory (2008) which states that husband's support is very necessary for pregnant women to improve psychological well-being and adjustment, as well as reduce stress and anxiety during pregnancy and improve and maintain physical.

CONCLUSIONS

Based on the articles that have been analyzed, it was found that there is a relationship between the level of anxiety of mothers giving birth and their husband's support during the birth process.

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