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Anxiety Among Pregnant Women During Covid-19 Pandemic

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Article Information	Abstract
	Coronavirus disease 2019 (COVID-19) is a public health emergency of international concern and poses a threat to the mental health of pregnant women. There were 536 pregnant women exposed to Covid-19 in the April 2020-April 2021 period. As many as 20 percent of them died. The purpose of this study was to determine the correlation between social support and anxiety among pregnant women during the Covid-19 pandemic in Pare District, Kediri, East Java. The study was conducted from 9 to 21 March 2021. The data collection was on demographic data, anxiety, social support to COVID-19 of women with established medical records in the Community Health Center of Pare, District. Anxiety was assessed by the Pregnancy-Related Anxiety Questionnaire-revised (PRAQ-R2) questionnaire, social support was assessed by the Social Support Questionnaire. This study had 37 participants with most of them 20-30 years old. During the period of prevention and control of the epidemic, all the pregnant women adopted protective measures, such as wearing masks, washing hands frequently, and staying at home. The results of Social Support most pregnant (89.2) were in the high category and anxiety in pregnant the majority (64.9%) in the medium category. Analysis using the Spearman rank test, the results of p-value = 0.000 (< 0.05). The strength of the correlation between variables was indicated by the value of r = 0.570. Pregnant women's anxiety was affected by the readiness of pregnant women to face childbirth, knowledge of pregnant women, and level of education. It is hoped that pregnant women can manage their anxiety during the Covid-19 pandemic improving the quality of correlations with husbands and family members.

INTRODUCTION

Indonesia and other countries are currently experiencing a non-natural disaster, namely the presence of a new infectious disease known as covid-19. Pregnant women are one of the vulnerable groups at risk of being infected with COVID-19 because during pregnancy physiological changes occur which result in a decrease in immune immunity and can cause serious impacts for pregnant women. Risk factors for anxiety disorders in pregnant women are also influenced by the COVID-19 pandemic. Social support is related to the Covid-19 pandemic in pregnant women who experience anxiety. In providing social support, the role of families and health workers in pregnant women can reduce anxiety (Dwiky, M.T, 2020).

Currently there is a covid-19 pandemic that has been carried out regarding covid-19 related to pregnancy focusing on the physical effects of the pandemic on infected mothers and their transmission. Pregnant women are a group that is prone to psychological disorders including anxiety disorders. Increased anxiety in pregnant women is a risk factor that occurs with a pandemic such as (Bender et al., 2020). Maternal mental health during the COVID-19 pandemic can also pose risks to both physical health and psychological health in the short and long term (Kotabagi et al., 2020).

The National Health Commission of China (NHC) revealed that from the place where COVID-19 first met in Wuhan-China, it identified 118 pregnant women with COVID-19 from 50 hospitals across the city of Wuhan from December 8, 2019 to March 20, 2020. Based on China's clinical Guidance for covid-19 Pneumonia Diagnosis and Treatment, of the 118 cases of covid-19 found, there were 84 (71%) pregnant women whose PCR test results showed a positive SARS-CoV-2 and 34 (29%) the rest showed an infiltrate on the lungs on a CT scan. This data shows that the number of pregnant women with COVID-19 contributed 0.24% of the number of Covid-19 cases at that time. As many as 75 (64%) pregnant women with COVID-19 are in the third trimester (Kurnia., M, R & Rahman A., N, 2020).

According to research conducted by Wang et.al., anxiety symptoms increased above the threshold score based on a previous pre-COVID-19 cohort study that assessed symptoms in pregnant women with similar demographic profiles. In a survey conducted on the Chinese population, 29% reported experiencing moderate to severe anxiety at the start of the COVID-19 outbreak. The psychological impact of the outbreak is a concern for pregnant women with an increase in symptoms of anxiety in the group of pregnant women. Using a comparison of anxiety data during pregnancy with meta-analysis, it is generally reported that the prevalence is 18-25% and the prevalence of the US general population is 16%, there is an increase in anxiety (Dwiky.M, 2020). In Indonesia, information about COVID-19 is still very limited, including data on pregnant women who have been confirmed positive for COVID-19, but it is not yet conclusive (Pradana et al., 2020).

The results of a preliminary study conducted on 10 pregnant women showed that 8 people experienced anxiety, 2 people did not experience anxiety, which was carried out by researchers through interviews and sending a general question questionnaire format with google form at Bendo Health Center, 5 respondents in the second trimester, 2 respondents in the third trimester where 8 respondents said they were anxious about childbirth and worried about the condition of the baby. In particular, concerns about pain during contractions and during the delivery process often occur in mothers with their first pregnancy because they do not have childbirth experience. Anxiety in pregnant women is also affected by the Covid-19 pandemic due to fear of adverse effects on the condition of pregnancy, childbirth, the condition of the baby, and delivery procedures during the COVID-19 pandemic.

The COVID-19 pandemic in risk groups including pregnant women can cause various changes. There are not many reports or literacy reports that report in detail the correlation between pandemic conditions and the implementation of screening for pregnant women can affect the mother's mental state (Bender et al., 2020). An increase in the anxiety of pregnant women in the era of the covid-19 pandemic is due to the lack of knowledge of pregnant women about COVID-19 and how to prevent it (Aritonang, et al, 2020). The symptoms of increased anxiety in this group of high-pregnancy women suggest that the psychological impact of the outbreak is of particular concern to expectant mothers.

The COVID-19 pandemic has an impact on pregnant women with feelings of concern about something that happens to them and their children, resulting in anxiety disorders. Anxiety experienced by pregnant women can reduce the immunity of

pregnant women so that they can be more susceptible to infection with COVID-19 (Aritonang, et al, 2020). The current COVID-19 pandemic has increased negative feelings in the form of worrying about being ignored by supportive people, as well as worrying about the separation of the baby after birth and increasing feelings of fear or anxiety in the postpartum period. The results are mixed on the mental health of pregnant women due to this pandemic (Dwiky, M.T, 2020).

Social support is a condition that has benefits for individuals obtained from others who pay attention to, serve and love (Darwin, 2014). Social support refers to material and spiritual support between individuals so that their social needs can be met (Zhang et al., 2020). Social support includes subjective and objective support indicating the role of belonging and protection in anxiety during pregnancy (Gumusoy et al., 2020).

Social support plays a role in the mental health of pregnant women in the face of the COVID-19 pandemic (Ahorsuet al., 2020). Social support that can be done such as giving a statement which focuses on the individual, gives an award, gives a positive statement, enthusiasm, attention, and is in the form of psychic and physical (Smet, in Parama & Pande, 2018). This is necessary to deal with situations that cause anxiety more than usual, especially in pregnant women. Researchers are interested in examining the correlation between social support and anxiety in pregnant women during the COVID-19 pandemic at the Bendo Health Center, Pare District.

METHODS

This study used a cross-sectional approach, with data measuring the dependent and independent variables only once at a time and no follow-up. The population in this study were pregnant women in the working area of the Bendo Health Center, Pare District. The sample in this study was pregnant women during the Covid-19 pandemic in the working area of the Bendo Health Center. The inclusion criteria in this study are: 1) Pregnant women who carry out examinations at the Bendo Health Center, Pare District, 2) Pregnant women who are accompanied by their husbands/mothers/brothers/other relatives, 3) Pregnant women who are willing to take part in the study and proven by informed consent. The sampling thechnique used purposive sampling with a sample of 37 pregnant women. The independent variable in this study was social support. The instrument used a Social Support Questionnaire that has been tested for validity. The dependent variable in this study was pregnant women. The instrument of this study used a Pregnancy-Related Anxiety Questionnaire-Revised (PRAQ-R2) questionnaire (Huizink. *et.al.,* 2019). Data analysis was carried out analytically with the Spearman rank correlation test to find out how far the independent variable is related to the dependent variable with a significance level of 0.05, in the statistical test using SPSS. The preliminary study was conducted on 11-18 January 2021. The study was conducted at the Bendo Health Center, Pare District, on 9-17 March 2021.

RESULTS

Table 1: Characteristics of Respondents in Bendo Health Center, Pare District, on 9-17 March 2021

Characteristics of Respondents	Number	Percentage
Age		
1. 20-30 years old	29	78,4
2. 30-35 years old	5	13,5
3. > 35 years old	3	8,1
Trimester		
1. Trimester I (1-13 week)	12	32,4
2. Trimester II (14-27 week)	9	24,3
3. Trimester III (28-41 week)	16	43,2
Parity		
1. First	19	51,4
2. Second	12	32,4
3. Third	4	10,8
4. Fourth/more	2	5,4

Education		
1. Elementary School	3	8,1
2. Junior High School	8	21,6
3. High School	15	40,5
4. University	11	29,7
Have your ever confirmed covid-19?		
Yes	2	5,4
No	35	94,6
Implementation of the health protocol during the covid-19 (wear mask, hand wash, social distance)		
Yes	37	100,0
No	0	0
Who takes mother to Antenatal Care?		
1. Husband	22	59,5
2. Mother	2	5,4
3. Family	10	27,0
4. Other relatives	3	8,1
Feel Anxiety during pregnancy check-up during the covid-19 pandemic		
Yes	32	86,5
No	5	13,5
Mother readiness during childbirth the covid-19 pandemic		
Yes	37	100,0
No	0	0
Do you know the delivery procedure during the covid-19 pandemic?		
Yes	30	86,5
No	7	18,9
Correlations (family/friends/relatives) during the covid-19 pandemic		
Good	32	86,5
Pretty good	2	13,5
Where is the meeting place with family/friends/relatives during the covid-19 pandemic?		
House	33	89,2
Shop/cafe	2	5,4
Another place	2	5,4
Mother's sleep pattern during the covid-19 pandemic		
Sleep as usual	12	32,4
Wake up often	16	43,2
Hard to sleep	9	24,3
Do you know any information about covid-19?		
Yes	36	97,3
No	1	2,7
In the neighborhood where there are many confirmed covid-19		
Yes	4	10,8
No	33	89,2
Know the ANC procedure during the covid-19 pandemic		
Yes	32	86,5
No	5	13,5
Mother routinely checks ANC during the covid-19 pandemic		
Yes	35	86,5
No	2	13,5
Did you take classes for pregnant women during the covid-19		

pandemic?		
Yes	1	2,7
No	36	97,3
Are you bothered by physical activity restrictions during the covid-19 pandemic?		
Yes	24	64,9
No	13	35,1
During the covid-19 pandemic, did you experience financial difficulties?		
Yes	3	8,1
No	34	91,9

Table 2: Cross Tabulation Between Social Support and Anxiety Among Pregnant the Bendo Health Center, Pare District, on 9-17 March 2021

			Anxiety			Total	
			Severe	**Moderate**	**Mild**		
Social Support	Medium	Count	1	3	0	4	
		% of Total	2.7%	8.1%	0%	10.8%	
	High	Count	7	21	5	33	
		% of Total	18.9%	56.8%	13.5%	89.2%	
Total		Count	8	24	5	37	
		% of Total	21.6%	64.9%	13.5%	100.0%	
			P Value: 0,570 (α > 0,05)				

Based on the study, it shows that most of the social support for pregnant women is in the high category (89.2%). Measurement of anxiety in pregnant women, most of the anxiety in pregnant women with the moderate category is 64.9%. Based on the results of statistical tests, it shows that there is no correlation between social support and the anxiety of pregnant women during the pandemic

DISCUSSION
Identifying social support for pregnant women during the COVID-19 pandemic

According to Sarafino (2013) that social support has several aspects, namely emotional support, assessment support, instrumental support, and information support. Social support is basically needed by individuals. The form of social support is in the form of emotional support with a sense of security, love, encouragement, reducing feelings of hopelessness that affect growth and development (Zuhrotunida & Sudiharto. A, 2017). This is in accordance with study conducted where emotional support is the highest support among other supports (80%). The support provided provides peace of mind for pregnant women, making it easier for them to be in a pregnancy situation. Pregnant women feel that the people around them listen to their complaints, understand the circumstances that will experience childbirth, care about the health of pregnant women, and care when pregnant women are sad.

Social support obtained in life such as this assessment support can be in the form of understanding the condition of pregnant women, providing support for taking medication, giving praise for work results, and appreciating the sacrifices of having conceived. According to Zuhrotunida & Sudiharto.A (2017) assessment support provides support in the form of support, recognition, appreciation, and attention so that it can lead to self-confidence. From the results of the study support assessment (61%). Pregnant women who get good appreciation from people around them increase their self-confidence during pregnancy. Positive assessments obtained by pregnant women perceive the changes that occur during pregnancy can be well received.

Social support that is given directly to individuals in the form of material, energy, facilities is included in the instrumental support that individuals get from their lives from the environment and family such as husbands, parents, friends, friends, which make individuals feel cared

for (Kiswanto,. HM, 2019). From the results of study on instrumental support (73%). It was found that pregnant women were ready to give birth during the covid-19 pandemic (100%), the one who delivers the most pregnancy checkup are their husbands (37.8%). It also makes pregnant women routinely do prenatal check-ups (86.5%). When pregnant women carry out antenatal care at health services, support in the form of delivering routine pregnancy checks is a valuable assistance for pregnant women. Social support involves meaningful social correlations, so that it can have a positive influence on the recipient. The social support obtained shows that a person feels loved, valued, cared for, and involved in every communication.

Social support can be in the form of information support by providing information, advice, and guidance to pregnant women to solve the problems they face (Zuhrotunida & Sudiharto.A, 2017). From the results of study support information (79%). Pregnant women apply health protocols such as wearing masks, washing hands, and maintaining distance (100%), knowing delivery procedures during the covid-19 pandemic (86.5%), knowing information about covid-19 (97.3%) and knowing procedures ANC during the covid-19 pandemic (86.5%). Information obtained by pregnant women from their husbands/family/friends/medical personnel in the form of information about childbirth, signs of delivery, accompanying consultations with health workers, and recommending pregnancy check-ups. With this information, pregnant women increase their knowledge, insight, and way of thinking. Information about pregnancy is very important for pregnant women, this is influenced by the need to improve the welfare of pregnant women.

Social support is influenced by various aspects that can have a positive impact on pregnant women during the COVID-19 pandemic. From the results of the study, the correlation between pregnant women and family/friends/relatives during the COVID-19 pandemic was good (86.5%) and having meetings at home (89.2%). The results of previous research conducted by Sulistyorini (2007) showed high support (70.4%) (Kiswanto, H, M 2019). This is because pregnant women can establish good correlations with people around them using today's sophisticated mass media. So that the mother's social support remains high during the COVID-19 pandemic.

Identifying anxiety in pregnant women during the covid-19 pandemic

Anxiety is one of the problems experienced by pregnant women during the COVID-19 pandemic. Anxiety can be in the form of anxiety about childbirth and worry about the baby's condition. The results of the study conducted by pregnant women showed anxiety at the Bendo Health Center, Pare District from moderate to severe scale (86.5%). In line with research conducted by Diki RY and Faria NA, the anxiety that occurs in pregnant women during the covid-19 pandemic in Baturraden district is from moderate to severe (75%) (Ifa, 2020). This is because the mother is too worried about the condition of the pregnancy, the condition of the fetus will be infected by the corona virus disease, the threat of spread and the impact of covid-19.

Anxiety in pregnant women can be influenced by several factors, including maternal age, gestational age, parity, and level of education. According to Janiwarty & Pieter (2013), the factors that influence anxiety are usually related to the period of pregnancy, childbirth, and the condition of the baby. Anxiety is also influenced by the presence of the hormone's estrogen, progesterone, and gonadotropins. There are hormonal changes that change the neurotransmitter, a nerve that gives signals to the brain to regulate the emotions of pregnant women. From the results of the study, most of the mothers were 20-30 years old (78.4%), third trimester of pregnancy (43.2), first child parity (51.4%), with an average high school education (40.5%). It was also found that pregnant women aged >35 years experienced severe anxiety (5.4%), third trimester (13.5%), first child parity (13.5%). Pregnant women aged >35 years are a group at risk for perinatal death because they are more likely to have miscarriages, stillbirths, or disabilities, and maternal deaths (Meyclin, et al, 2013).

This is in line with the research conducted by Hendri 2019 on third trimester primigravida mothers that the majority experienced moderate to severe anxiety (56.7%) (Kiswanto, H. M, 2019). Pregnant women in the third trimester with a history of pregnancy with their first child experience increased anxiety, influenced by the upcoming delivery and the first experience of childbirth. A person feels afraid of the pain and danger that arises when carrying out childbirth. This is also influenced by the education of pregnant

women because it affects the way of thinking, managing information and making decisions.

Anxiety of pregnant women can be influenced by the non-participation of pregnant women in government programs that have been implemented. During the covid-19 pandemic, several health facilities provided a class program for pregnant women. From the results of study conducted, most of them did not take classes for pregnant women (97.3%). Maternity class activities that are beneficial for pregnant women are facilitated by officers to prepare for a safe and comfortable delivery. Classes for pregnant women can increase knowledge, skills, and awareness to improve the health of mothers and babies (Fita & Astuti, 2020). Low participation of pregnant women can increase anxiety in facing childbirth. Pregnant women who did not attend classes for pregnant women were not known for certain by the researchers because further studies were not carried out.

Research by M. Chasson, et al in 2020 said that economic status and concerns about the pandemic had an effect on anxiety in pregnant women (Ifa, 2020). This is in accordance with research conducted on several pregnant women who experienced financial difficulties during the COVID-19 pandemic (8.1%). Due to changes in the work experienced by the family, work resulted in some families experiencing unemployment. Concerns about the pandemic can be in the form of having been confirmed positive for COVID-19 (5.4%) and the surrounding environment (10.8%). Research conducted with positive SARS-CoV-2 test results (12.5%) of feelings of sadness, depression, or hopelessness felt at least half a day in the last 2 weeks (Bender, et al., 2020). Another study conducted in Canada 129 pregnant women who were quarantined experienced stress (31%). During quarantine, pregnant women are not allowed to meet their families. According to WHO (2020) the spread of the corona virus is very fast and it is easy for individuals to get infected. The condition of the COVID-19 pandemic, which cannot be ascertained when it will end, has made mothers experience sleep disturbances by frequently waking up (43.2%). This experience has made pregnant women feel anxious about the consequences of having been confirmed positive for COVID-19. Because this is what makes pregnant women worry and worry about the safety and the baby.

According to Poon et al 2020, physical activity is also associated with anxiety levels in pregnant women. The COVID-19 pandemic has resulted in the closure of parks, beaches and gyms. So the government issued a policy on maintaining physical distance and contact or social restrictions. This is in accordance with research conducted by pregnant women who feel disturbed by restrictions on physical activity during the COVID-19 pandemic (64.9%). Pregnant women should do physical activity at home. Doing physical activities only at home, of course, affects feelings of pleasure, mood, thoughts, so that pregnant women can still feel anxiety about the condition of the Covid-19 pandemic that has not ended.

Anxiety in pregnant women is also caused by concerns about the COVID-19 pandemic (Lebel et al, 2020). Pregnant women who did prenatal check-ups during the COVID-19 pandemic felt anxious (86.5%). This is influenced by not knowing the delivery procedure during the covid-19 pandemic (18.9%). This ignorance also creates anxiety in pregnant women. The results of study from Putri (2021) which examines the correlation between knowledge and fear of pregnant mothers around pregnancy in the pandemy of covid-19, showed a significant negative correlation of -0.635 between knowledge and anxiety levels of pregnant women ahead of childbirth. This study is in line with research conducted by Corbett et al in 2020 which showed that (50.7%) pregnant women often felt anxious about their health during this pandemic. The COVID-19 pandemic has limited access to public services, including maternal and neonatal health services, which can make pregnant women feel worried about contracting it and there are recommendations for postponing pregnancy check-ups. This is also influenced by childbirth procedures that have changed during the COVID-19 pandemic. With the delivery procedure that requires a rapid-test examination and using established health protocols, the mother feels excessive anxiety. During the COVID-19 pandemic, pregnant women still carry out routine pregnancy checks by complying with the established protocol. In minimizing the transmission of the virus, several efforts have been made, such as providing health services, by telephone consultation to minimize exposure to the coronavirus.

Analyzing the correlation between social support and anxiety in pregnant women during the COVID-19 pandemic

Social support received can make individuals feel calm, cared for, and self-confident. Social support in the form of emotional support, appreciation support, instrumental support, informative support (Sarafino in Winda, 2013). The higher the social support provided, the lower the level of anxiety felt by pregnant women. Social support also increases knowledge, self-confidence, confidence in decision-making (Sherman, L.e, 2013). This is different from research that has been done where high social support (89.2%) still experience moderate anxiety (64.9%). The reason is that pregnant women are one of the vulnerable groups and are at risk of contracting COVID-19. It is also influenced by anxiety factors related to the condition of the welfare of the mother and fetus, a sense of security and comfort during pregnancy.

Social support during the COVID-19 pandemic, according to Bender et al., (2020) during this pandemic, the limited activities of pregnant women have an impact on the lack of social and family support. This is different from research where social support with family/friend/friend correlations during the covid-19 pandemic in pregnant women remains good (78.4%). This is influenced by where pregnant women still get social support from the people around them by using the existing mass media. And while doing social activities, pregnant women still hold meetings at home. Meeting at home to avoid unwanted crowds in order to quickly break the chain of the spread of COVID-19.

During the COVID-19 pandemic, it's time to support each other. Social support is very important in every process of life that is passed. Social support can be used as a coping strategy. Social support can be obtained from individuals, partners, friends, co-workers, and family. The positive effects of good social support can have a direct impact on health and well-being because of the comfort, sense of having a purpose in life. Social support can reduce various forms of stress, improve coping mechanisms and quality of life (Hauken, M.A, 2020). Social support can reduce the adverse effects of stressful conditions to prevent anxiety problems for individuals. The higher a person's social support obtained by pregnant women, the more positive impact they will have on pregnant women, especially during the COVID-19 pandemic.

High social support is not enough for pregnant women not to experience anxiety during this COVID-19 pandemic. The results of the analysis of social support are emotional support (80%), appraisal support (61%), instrumental support (73%), and informational support (79%). Most of the results of the analysis carried out were high social support obtained by pregnant women. Many factors make pregnant women continue to experience anxiety, including anxiety during pregnancy check-ups during the COVID-19 pandemic (86.5%), having been confirmed by COVID-19 (5.4%), not attending classes for pregnant women during the COVID-19 pandemic. -19 (97.3%), knowledge of procedures during the COVID-19 pandemic (18.9%), and physical activity restrictions (64.9%). This is in line with a study conducted reporting that pregnant women during the COVID-19 pandemic experienced anxiety reaching (63-68%). It is also possible that anxiety will still occur due to the increasing number of Covid-19 and the speed of transmission, and the death rate that continues to increase. Pregnant women need to make adjustments to current conditions. These changes affect physical changes and hormone function can affect the emotional instability of pregnant women. The need for development efforts on dealing with anxiety experienced by pregnant women during the COVID-19 pandemic.

CONCLUSION

This study shows that there is no correlation between social support and maternal anxiety. Anxiety still occurs and can be influenced by other factors outside of pregnancy, among others, mothers feel anxious because the number of COVID-19 is still increasing and the transmission is so fast, and the death rate continues to increase. For that, pregnant women need to make adjustments to current conditions. These changes affect physical changes and hormone function can affect the emotional instability of pregnant women. The need for development efforts on dealing with anxiety experienced by pregnant women during the COVID-19 pandemic such us by several things including participating in Hypnobirthing, pregnancy classes, increasing family support (Suwetty, 2021; Huriatul 2022; Daryanti, dkk.,2022).

SUGGESTION

Stress is still felt by pregnant women during the pandemic, as evidenced by the statistically insignificant correlation between social support and stress reduction in pregnant women. The need for development efforts on dealing with anxiety experienced by pregnant women during the COVID-19 pandemic such us by several things including participating in Hypnobirthing, pregnancy classes.

CONFLICTS OF INTEREST

There is no conflict of interest in this study project. All components can work well according to their respective duties and can work as a good team.

AUTHOR CONTRIBUTIONS

The lead author verifies critical thinking critical thinking based on the phenomenon that occurs which is the gap between the gap between the ideal space and the real events that occur. Then the lead author starts designing and drafting the conceptual framework of the study, determining the theoretical concept and study hypothesis of the research hypothesis, drafting the article, conducting the analysis, displaying the data, making critical revisions to the manuscript writing, making the manuscript writing, making the final approval of the version to be published is also part of the final approval of the version to be published is also part of the lead author. Statistical tests are performed by biostatisticians.

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