

## A study to assess the fear related to pregnancy among primigravida mothers attending at maternity clinic at Indore

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**Abstract:** *Being a parent is one of the happiest movements in a life. For most of mother it is a most important role to play ever. The experience of pregnancy is a time of transition in women's life, but for many women, this period of transition can have emotional difficulty. Some women may struggle with feeling of fear, loneliness, sadness, anxiety and unhappiness. The fear related to pregnancy is most common in all primigravida mothers due to lack of experience and upcoming responsibility. A descriptive survey design was used for the present study. The sample consisted of 60 primigravida mother who met the inclusion criteria and were selected by using stratified random sampling technique. Data was collected by using rating scale. Data was analyzed by using descriptive statistics, unpaired 't' test, Karl Pearson correlation co-efficient and chi-square. The study result showed that the primigravida mothers had higher (53.3%) severe form of fear related to pregnancy. The third trimester mothers had higher (60.6 ±69.98) mean and standard deviation while second trimester mother had (55.0±64.95) mean and standard deviation of fear related to pregnancy. Hence, there is significant difference between fear related to pregnancy among second and third trimester primigravida mother was a true difference and not chance difference. There is a significant association between age ( $\chi^2 = 4.31187$  at  $df p < 0.05$ ) and education ( $\chi^2 = 3.9629$  at  $df p < 0.05$ ). However, the  $\chi^2$  value for other variable like occupation, type of family, were found to be not significant, at 0.05 level. Fear related to pregnancy is most common in all primigravida mothers, because lack of knowledge and experience of upcoming responsibilities. The primigravida should be encouraged to adopt fear reducing measures to avoid further obstetrical complication.*

**Key words:** *Fear related pregnancy, primigravida mothers, second trimester, third trimester.*

### 1. INTRODUCTION:

Being a parent is one of the happiest movement in a life. For most of the mothers it is also an important role to play ever, the experience of pregnancy is a time of transition in life women's, but for many women, this period of transition can have emotional difficulty. Some women may struggle with feeling of fear, loneliness sadness, anxiety, and unhappiness. Today, up to 70% of pregnant women experiencing some of these feelings and approximately 20% of mother experience depression and which they requires additional support and counselling.<sup>1</sup> Pregnancy is also a personal experience that elicits a wide range of responses from very positive to negative ones which is due to complexity of this process<sup>2</sup>.

Pregnancy and childbirth is a physiological phenomenon as it predisposes women to several health hazards. The aim of preventive medicine is to ensure that throughout pregnancy and puerperium, every mother should have good health and every pregnancy may ultimately result in healthy mother and healthy baby<sup>3</sup>. Fear of childbirth (FOC) or what has been historically referred to as tokophobia, a phobic state where a woman avoids childbirth despite desperately wanting a baby<sup>4</sup>.

Several studies have been performed on the causes of anxiety in pregnancy among which we can refer to sociocultural issues, financial, healthcare, psychological and physical problems arising from pregnancy, parenting challenges, maternal and fetal well-being and fear of delivery, particularly vaginal delivery<sup>5</sup>.

Motherhood is a distinct bio-psychosocial process that transforms and broadens the role of a woman into that of a mother. This period is filled with many intense and diverse feelings encompassing excitement, expectancy, anxiety and fear, especially among the first time pregnant women. Pregnancy results inevitable, if gradual, alteration in physiological process and structure of the body. The way a particular woman reacts to changes of pregnancy is often influenced by her emotional make up, her sociological and cultural background and even her willingness to accept or reject pregnancy and its implications. It is well accepted that only a healthy mother can give birth to a healthy baby. Health includes not only physical health but also psychosocial well being<sup>6</sup>. Fear of childbirth is also known as fear of vaginal delivery. Almost every pregnant woman is at least a little bit nervous about delivery, which is a normal reaction to an unknown situation<sup>7</sup>.

### 2. STATEMENT OF THE PROBLEM:

A study to assess the fear related to pregnancy among primigravida mothers attending at maternity clinic at Indore.

### 3. OBJECTIVES OF THE STUDY:

- To assess the extent of fear related to pregnancy among primigravida mother.
- To compare the fear related to pregnancy in second and third trimester of primigravida mother.
- To find the association between levels of fear related to pregnancy and demographic variables like age, educational status and type of family.

#### Assumptions

- Pregnant mothers have fear related to pregnancy.
- Extreme fear related to pregnancy in second and third trimester of pregnancy may lead to complication like emergency caesarean section, pre-term labour etc.
- Primigravida mother have more fear related to pregnancy, since it is their first experience

#### Hypotheses

To achieve the stated objectives the following hypotheses are formulated and will be tested at 0.05 level of significance

H<sub>1</sub>: There will be a significant relationship between the fear related to pregnancy in second and third trimester primigravida mothers.

H<sub>2</sub>: There will be significant association between the fear related to pregnancy and demographic variables.

### 4. METHODOLOGY

A descriptive survey research is an applied form of research that involves finding out how well a program, practice, procedure or policy is working. The main goal is to assess the success of a program. The research design adopted for the study was Non experimental descriptive survey design. The study was conducted in a selected hospital Index Medical College Hospital and Research Center, Indore, is well known for its nursing and medical care. The hospital has a maternity and gynaecology ward with a full –fledged labour room as well as neonatal intensive care unit attached. The population in this study comprised of second and third trimester of primigravida mothers who fulfill the sampling criteria. Stratified random sampling technique was used to select the sample. The primigravida mothers were grouped in to two strata, as a second trimester mother in one stratum and third trimester mothers in other stratum. Then the list of second and third trimester mothers was collected from out patient department register, who comes for antenatal check up in the month of data collection. From the group of second and third trimester primigravid mothers, 30 second trimester and 30 third trimester primigravida mothers were selected through proportionate stratified random sampling technique, who meet the inclusion criteria. The reliability of tool was established by using Split-half technique, which measures the co-efficient of internal consistency. The correlation was computed using Karl Pearson’s co-efficient of correlation formula. The reliability of rating scale was found to be 0.859 which indicated that the tool was reliable.

### 5. RESULTS:

**Table 1: Mean, standard deviation, mean percentage score of fear related to pregnancy among second and third trimester mothers**

N<sub>1</sub>=30, N<sub>2</sub>=30

Group	Mean	SD	Mean percentage	t value
II trimester	55.0	54.95	61.11%	2.552
III trimester	60.6	69.98	67.3%	

[Table value ‘t’<sub>(58)</sub> =1.96 at p >0.05)

Data in the above table depicts that the highest mean percentage fear score (61.11%) obtained is in second trimester mothers and lowest mean percentage fear score (67.3%) is in third trimester mothers. The t-value was computed by using unpaired t-test test and there is significant difference of fear related to pregnancy among second and third trimester of mothers. The calculated t-value (t<sub>(58)</sub> =2.552, P<0.05) is more than table value. Hence, rejecting null hypothesis and accepting research hypothesis, that there is difference between fear related to pregnancy among second and third trimester primigravida mothers was a true difference and not chance difference.

**Table 2: Frequency and percentage distribution of level of fear related to pregnancy among second and third trimester mothers with regards to labour process area**

N=60

Sl. No.	Group	f	Level of fear		
			Mild	Moderate	Severe
1	Second trimester	30	0%	0%	100%
2	Third trimester	30	0%	0%	100%

The data in table 6 show that second and third trimester mothers had (100%) severe fear related to labour process.

**Table 13: chi-square values showing association between fear related to pregnancy score and demographic variables**

N=60

Variables	≤ M	> M	Chi-square value	Inference
<b>Age</b>				
18-25yrs	19	12	4.31	S
26-35yrs	10	19		
<b>Education</b>				
Educated	27	20	3.9629	S
Illiterate	3	9		
<b>Type of family</b>				
Nuclear	18	14	0.57683	NS
Joint	13	10		
<b>Occupation</b>				
House wife	20	18	0.020	NS
Sedentary and non sedentary	12	10		

$X^2=3.84$ , at 1 df.  $p<0.05$

The data presented in table 13 shows that chi-square value computed between level of fear related to pregnancy score and demographic variables like age, education were found to be significant at 0.05 level of significance while occupation, type of family found to be not significant.

## 6. NURSING IMPLICATIONS:

### Nursing practice

Nurses play a vital and major role in health care delivery system. Measures to present psychological problems, including stress, and fear have to be strengthened by emphasizing health education and awareness programmes.

Nurses working in hospitals as well as community should be equipped with the knowledge of taking care of pregnant mother especially in primigravida mother. Early identification and intervention prevents obstetrical complication.

Giving birth is profoundly beautiful experience. It permanently shapes women, her child, partner and the family life. But pregnancy and giving birth are also fragile processes that require more than just medical care. The most common cause for fear related to pregnancy among primigravida women are the false information and bad experience heard by other regarding labour process and pain.

### Nursing education

At present health care delivery system gives more emphasis on preventive rather than curative aspect. The study also implies that health personnel have to be aware of the various methods of stress control and prevention other than giving medicines. The curriculum should be prepared in such a way that the nursing students should be oriented to different modalities of treatment in dealing with psychological problems in clients. And also this concept needs to be highlighted and should be reinforced clinical and community services.

### Nursing administration

Current day health care delivery system demand quality health care. It requires the nurse administrators to have insight of the problems of special population, and should update their knowledge about it. Nurse administrators can play key role in conducting special antenatal classes for the mother who are suffering from severe fear related to pregnancy. Conducting the in service education for the staff regarding antenatal and intrapartum care to update their knowledge. Workshops, conferences discussions may be conducted in collaboration with other allied health sciences to make nurses more aware about the situation; periodic survey should be conducted to evaluate the programs.

### Nursing Research

More emphasis should be laid on research in psychological health along with physical health of primigravida mother. More studies could be conducted on psychological and emotional problem of mothers during pregnancy and what coping strategies they are adopting to reduce fear related to pregnancy. The present study is a just initial attempt to assess the level of fear related to pregnancy and it will encourage and motivate health personnel to do many more research studies. The researcher can conduct study to identify different causes and objects of fear related to pregnancy impact of fear related to pregnancy and outcome of labour.

## **7. CONCLUSION:**

The findings of the study concluded that primigravida mothers will have higher level of fear related to pregnancy. Especially third trimester mother will have more fear than the second trimester of mother, and this shows that the primigravida mothers need psychological support and antenatal teaching programme will helps to reduce fear related to pregnancy.

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