FACTORS ASSOCIATED WITH ANXIETY LEVEL OF TRIMESTER III PRIMIGRAVIDA PREGNANT WOMEN IN MENUR HEALTH CENTER SURABAYA

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Published by Fakultas Kesehatan Masyarakat Universitas Airlangga

ABSTRACT

Pregnancy and childbirth are normal things experienced by women, but this still has a high risk and burden women. The purpose of this study is to determine the associated factors of anxiety level among pregnant women in the early third trimester in the Surabaya City Health Service Center Menu. This research is an observational study, which means that it is carried out by conducting field observations with a cross-sectional design and taking samples with a convenient sampling technique of 44 people. Our findings show that the anxiety level in pregnant women with mild levels of primigravida in the first 3 months was reported among 19 people (43.2%) and an average high anxiety level of up to 25 people (56.8%). The analysis was carried out in two dimensions using the Chi-Square test which showed a p value of 0.002. Thus the relationship between the husband's support and anxiety in the third trimester of pregnancy at the Surabaya City Health Service Center is closely related. Therefore, it is suggested that a husband to provide full support to his wife in the third-trimester primigravida because this can reduce anxiety.

INTRODUCTION

Pregnancy and childbirth are a normal and natural process that will be passed by every woman. But this also has a high level of anxiety and cycles or processes that also cause a burden for a woman. Seen from a theoretical point of view, the process of pregnancy starts with a fetus until it becomes a baby and is born. The gestation period is generally...
starting from the first day of the last menstrual period, which is usually 280 days, i.e. forty weeks or about nine months and seven days. This is the time usually passed by pregnant women.

There is a theory about the modification of a woman during her pregnancy, in which women transition from adolescence and eventually turn into adults in handling their new roles (1). As for pregnancy, pregnant women often have a vulnerability to feeling anxiety, which in this case is especially true for those who have primary or early pregnancies. This is especially important before the birth procedure. Trimester anxiety is 0.33 in the seventh month of pregnancy and before transport, when the mother begins to accept patterns of trauma, reports pain, or even dies through childbirth (1). That is because the beginning method is something new that she's going to revel in (2). Being pregnant for the first time for a mother-to-be is a new journey that experiences physical and psychological changes resulting in various psychological problems. A woman pregnant for the first time is called a primigravida. One of the psychological problems that affect pregnancy is discord. Anxiety emerges as a mental detail affecting being pregnant.

Fear comes from the Latin word meaning difficulty and suffering, and anxiety, meaning suffocation (3). Fear is embarrassment or fears that something will take place for no obvious purpose, and this is related to emotions of helplessness and lack of confidence in keeping with fear as a characteristic of the ego that makes people aware of the probability of a threat so that they can plan an effective adjustment.

As reported by Freud anxiety, in this case, is divided into three types, namely: a) neurotic anxiety, which is due to an unknown risk in a person; b) ethical anxiety which is rooted in the struggle that exists between the ego and the superego; and the last c) real anxiety, meaning that the feeling of being uncomfortable and present is not unique (4). The stressors in being pregnant are age, the know-how of birth, parity, academic stage, employment, and prenatal care (5).

Immoderate anxiety could harm the thoughts and frame and might even purpose bodily illnesses (6). The effects of stress can be divided into numerous signs, including a) mood swings; b) cognitive signs and symptoms, that is, the anxiety where unpleasant things can happen c) motor symptoms, that is, those who enjoy anxiety often experience stress and fear.

Based on reports related to the mortality rate of pregnant women during childbirth in East Java Province, it tends to decrease from 2011 to 2015. Added to this, the mortality rate in 2011 was 104.3/100,000 live births. Then in 2012, it was 97.43/100,000. In 2013 it reached 97.39/100,000. Then in 2014, it reached 93.53/100,000, and in 2015 it reached 89.6/100,000 of the live birth rate. However, the increase MMR in Surabaya in 2016 was 87.72/100,000 live births, while MMR in Surabaya in 2017 was 79.4/100,000 (7).

One of the biggest MMR contributors in East Java Province is the City of Surabaya. These achievements include 119.15/100,000 live births in 2013 or equivalent to 49 people, 90.19/100,000 live births in 2014, or equivalent to 39 people, then in 2015 with 87.35 maternal deaths per 100,000 live births, or 38 people. Furthermore in 2016, in MMR in Surabaya, there were 85.72/100,000 live births or equivalent to 37 people. Then in 2017 the MMR was 79.40/100,000 live births or a total of 34 maternal deaths. If seen from the data above, there has been a decrease in the number of deaths in Surabaya in the last five years, but this still places the city of Surabaya second as a contributor to the Maternal Mortality Rate (MMR) in East Java.

Pregnancy is a period that is prone to psychological problems for woman. The anxiety experienced by pregnant woman
could affect the fetus she is carrying. Birth later than the usual gestational age is also one of the causes of the high maternal mortality rate, especially in Indonesia. Anxiety due to the condition of the mother who is not psychologically ready to give birth is also a factor in the occurrence of prolonged labor, which is one of the causes of death (8). A study shows that depression and anxiety at the beginning of pregnancy are associated with the risk that can result in death for a pregnant mother, namely preeclampsia (9). Globally, 80% of pregnant women's deaths are directly classified as the cause of maternal death, which is caused by bleeding (25%) usually postpartum bleeding, hyperanxiety in pregnant women (12%), jammed partus (8%), abortion (13%) (9), and for other reasons (22%).

Husbands own a sizeable position in figuring out the mother's fitness fame. The husband's help can be a great motivation for a mother to review her pregnancy (10). That's because, in the family, one of the husband's duties is to keep his wife safe after birth, showing his love and guarantees awareness of a healthy diet, promotes a healthy diet, enough sleep, and makes sure that it is appropriate, and present in the shape of reward, or instrumental assistance in the form of assistance in caring for children. Helps that husbands must do for pregnant women includes encouraging, helping to alleviate various problems that occur, and giving rewards (11).

Primigravida anxiety can arise due to the fact childbirth is taken into consideration as a horrifying, painful, and greater traumatic activity than some other occasions in lifestyles. The effectiveness of the Antepartum Organizational Orientation reduces the level of anxiety in primigravida when dealing with childbirth (12).

The presence of pre-maternity groups is useful as a comparison to indicate the condition of pregnant women who are in less danger of experiencing anxiety due to getting counseling. Counseling in the pre-maternity group is an effort to assist to solve client problems (pregnant women) through counseling interviews conducted in the third trimester using the principles of group dynamics, to help provide feedback and learning experiences (12). The purpose of counseling is as an anxiety reliever, healing emotional disorders, to achieve happiness and satisfaction, self-actualization, and elimination of maladaptive behavior through the learning of adaptive behavior patterns.

Information from Surabaya Metropolitan Health Workplace in 2018 confirmed that Hospital Menur is the sanatorium with the best price for maternity treatment. This is the motivation behind the researchers' desire for undertaking studies within the Menur Hospital to obtain more advisory information. This observation turned into a study of the correlation between the husband's help and the stage of anxiety of the third trimester primigravida pregnant women within the operating place of Menur sanatorium. In the long run, the prevention of anxiety in pregnant women may be carried out through antenatal care offerings.

METHODS

This research belongs to the type of observational research due to the fact the data were acquired with no remedy at the item of studies or at the variables to be studied. Primarily based on the approach of data evaluation, this is an analytical observation as it uses statistical assessments to decide the connection between the husband's guide and anxiety degrees in third trimester pregnant women. Then, this makes use of a go-sectional method in which the study variables are measured in a positive time or duration.

In this study, 44 participants involved were pregnant women whose gestational age was in the third trimester who in this case had undergone treatment at the Menur Medical Center Surabaya in 2019. Samples were taken using layered random sampling, namely by doing calculations using the Lemeshow formula.
The independent variables in this study are the support of the husband and family, and also measured from the economic level. As for the basic variable, this nature lies in the level of anxiety of a pregnant woman who has a gestational age of third trimester primigravida. Besides that, the health status and education level of the mother are also important. The questionnaire was a measuring tool that was carried out in October 2019. The information series method, uses primary data, that was distributed through questionnaires, and secondary data by documentation records that were already available and can be accessed at the Health Office.

The data analysis process in this study was divided into two stages. First, descriptive analysis was used to describe each variable including pregnant women (age, gestational age), husband's support, and level of education. Then bivariate analysis was carried out to see the relationship between the variables studied. The data used is ordinal data, especially the extent to which pregnant women receive support. The test used in analyzing the data is the Chi-Square Test.

**RESULTS**

In this case, three villages are within the reach of the Menur Health Center, namely Pumpungan, Semolowaru, and Nginden Jangungan Villages.

**Characteristics of Pregnant Women**

The characteristics of a woman who experiences pregnancy in the third trimester are presented in the table below where there are 44 pregnant women.

**Characteristics of Husbands**

Several functions can be carried out to observe the pregnancy process at the Metro Health Center, which are described in Table 2.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17-25 years</td>
<td>31</td>
<td>70.5</td>
</tr>
<tr>
<td>26-30 years</td>
<td>12</td>
<td>27.3</td>
</tr>
<tr>
<td>&gt; 30 years</td>
<td>1</td>
<td>2.3</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td>3</td>
<td>6.8</td>
</tr>
<tr>
<td>Junior High School</td>
<td>11</td>
<td>25</td>
</tr>
<tr>
<td>Senior High School</td>
<td>20</td>
<td>45.5</td>
</tr>
<tr>
<td>Undergraduate</td>
<td>10</td>
<td>22.7</td>
</tr>
<tr>
<td><strong>Gestational Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Months</td>
<td>16</td>
<td>36.4</td>
</tr>
<tr>
<td>8 Months</td>
<td>21</td>
<td>47.7</td>
</tr>
<tr>
<td>9 Months</td>
<td>7</td>
<td>15.9</td>
</tr>
<tr>
<td><strong>Health Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Healthy</td>
<td>41</td>
<td>93.2</td>
</tr>
<tr>
<td>Unhealthy</td>
<td>3</td>
<td>6.8</td>
</tr>
<tr>
<td><strong>Pregnancy Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wanted</td>
<td>43</td>
<td>97.7</td>
</tr>
<tr>
<td>Unwanted</td>
<td>1</td>
<td>2.3</td>
</tr>
<tr>
<td><strong>Family support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>43</td>
<td>97.7</td>
</tr>
<tr>
<td>No</td>
<td>1</td>
<td>2.3</td>
</tr>
</tbody>
</table>

*Table 1. Characteristics of Pregnant Women at Menur Health Center (October 2019)*

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Frequency F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-25 years</td>
<td>18</td>
<td>40.9</td>
</tr>
<tr>
<td>26-30 years</td>
<td>23</td>
<td>52.3</td>
</tr>
<tr>
<td>&gt;30 years</td>
<td>3</td>
<td>6.8</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary</td>
<td>4</td>
<td>9.1</td>
</tr>
<tr>
<td>Junior High School</td>
<td>8</td>
<td>18.2</td>
</tr>
<tr>
<td>Senior High School</td>
<td>23</td>
<td>52.3</td>
</tr>
<tr>
<td>Undergraduate</td>
<td>9</td>
<td>20.5</td>
</tr>
</tbody>
</table>

*Table 2. Characteristics of Pregnant Women’s Husbands at the Menur Polyclinic (October 2019)*
**Characteristics** | **F** | **%**
---|---|---
**Occupation**
Civil Servant | 2 | 4.5
Private Company | 22 | 50.0
Entrepreneur | 20 | 45.5
**Financial status**
High | 19 | 43.2
Low | 25 | 56.8
**Husband Support**
High | 19 | 43.2
Low | 25 | 56.8

### Anxiety Level

The level of anxiety in a pregnant woman at the Menur Health Center which is described in Table 3. Results of the study based on Table 3 below, it can be concluded that 56.8% pregnant women in the third trimester of primigravida pregnancy had moderate anxiety and 43.2% had mild anxiety (Table 3).

**Table 3.** Table of Anxiety Levels of Pregnant Women during the Third Trimester of Pregnancy at Menur Health Center (October 2019)

<table>
<thead>
<tr>
<th>Anxiety Level</th>
<th><strong>f</strong></th>
<th><strong>%</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild</td>
<td>19</td>
<td>43.2</td>
</tr>
<tr>
<td>Moderate</td>
<td>25</td>
<td>56.8</td>
</tr>
</tbody>
</table>

Table 4 documented associated factors for anxiety level using Chi-Square test. There was a significant relationship between the age of pregnant women and the anxiety level of the third trimester of primigravida pregnant women. In addition, level of education, type of work, gestational age, financial status and getting husband Support (Table 4).

**Table 4.** The Relationship between the Characteristics of a Pregnant Woman and her Level of Anxiety

<table>
<thead>
<tr>
<th>Variable</th>
<th>Level of Anxiety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of Pregnant Woman</td>
<td>0.492</td>
</tr>
<tr>
<td>Level of Education</td>
<td>0.628</td>
</tr>
<tr>
<td>Type of work</td>
<td>0.661</td>
</tr>
<tr>
<td>Gestational Age</td>
<td>0.658</td>
</tr>
<tr>
<td>Financial status</td>
<td>0.707</td>
</tr>
<tr>
<td>Husband Support</td>
<td>0.415</td>
</tr>
</tbody>
</table>

### DISCUSSION

Age has major influence on the psychological status. The older someone is, the more their emotional adulthood and capability to face a variety of problems. A pregnant girl at the age of 35 begins to show the aging process, which includes the arrival of numerous illnesses (13). The age of the mother at the time of pregnancy is related to organs that are related to psychological conditions, especially a readiness to accept the pregnancy. Young age at pregnancy is one of the high risks for pregnancies in women who are <20 years old. Pregnancy at this age falls into one of the 4T categories (Too Young, Too Many (children), Too Close (birth spacing) and Too Old), which is too young (14).

### Education Level

The majority of women participants (45.5%) attended additional courses. If someone is better prepared, they can gather additional information and consider that health is essential (15). A mother's level of education is an indicator that strongly influences pregnancy. Education can affect a person's perspective on the new information he receives (16). So it can be concluded that the higher the level of education of a person, the easier it is for someone to receive the information obtained. Low training can
preclude one's improvement toward the popularity of newly added data and values.

**Occupation**

Most of the pregnant women are housewives as much as 34.1%. Work is an important thing that must be prioritized because it's greatly associated with earnings that may be used to satisfy the wishes of lifestyles. Pregnant women who have job do not have unfastened time to do health assessments and much more to test their health when pregnant (17).

**Gestational Age**

Maximum of the third trimester primigravida. The women participants are at the eight-month of pregnancy (32-36 weeks) and showed that 53.3% (out of 45 pregnant women respondents) feel anxious before giving birth.

**Health Status of Pregnant Women**

The health status of a pregnant woman can be known by conducting a pregnancy examination at health services. The aim is to know and control the pregnancy of a pregnant woman, increase awareness, and maintain the physical and mental health of a pregnant woman, and pregnancy at an early age requires attention because it is feared that there may be abnormalities or complications that may occur during pregnancy. So that the health condition is influenced by the level of anxiety of pregnant women, if the mentality of pregnant women is not good, health will not be achieved (18).

**Pregnancy Status**

Pregnancy in pregnant women in the third trimester in the working area of the Menur Health Center in the metropolis of Surabaya is a pregnancy that is the choice of pregnant women in general. A pregnancy that is carried out intentionally can have a tremendous impact on the situation of the fetus, besides the physical and mental adaptations that arise in the woman and her partner. Things to prepare in pregnancy are such as managing your diet during pregnancy (19).

**Family Support**

In general, all pregnant women during the third trimester of primigravida at the Menur Health Center received medical assistance at home during their pregnancy. Family support includes information, tools, appreciation, and emotional support. Emotional support includes providing advice and information about pregnancy fitness. Early pregnancy women in the last trimester of Menur Health Center receive support at home while they are pregnant such as information, tools, providers, and spiritual help for one's own family. Emotional support is expressed by family acceptance or understanding, concern, attention, praise, support, and acceptance of complaints. Instrumental support includes direct assistance, namely financial assistance, facility assistance, manpower assistance, and various other facilities provided directly when pregnant women need assistance (20).

Informational support is in the form of seeking information related to pregnancy care, checking pregnancy, not to be too tired from work, and advising pregnant women, examination services that provide both positive and negative according to the actual situation (21).

**Economic Level**

Enough monetary reputation or own family earnings is crucial when women being pregnant because of the charges required throughout and after being pregnant. Pregnant women need a sufficient family financial system due to the fact being pregnant calls for unique budgets including ANC expenses, and nutritious meals for mothers and the fetus. Maternity garments, the price of shipping, and important needs for children under five with low economic conditions tend to be extra annoying (22).
**Husband’s Support**

A husband is a partner and also a life partner of a wife (father of children), who has all the main duties and functions as the head of the family in one family. In this case, the husband is needed not only as a breadwinner but also to assist in various regulations.

Husband's assistance is a form of social interplay wherein there may be mutual giving and receiving actual help. It's also good enough to reduce the anxiety of pregnant women. This is in agreement with the results of research which states that anxiety in first trimester of pregnancies can be reduced if they get consolation from families and husbands in the face of childbirth (23).

**Anxiety Level**

The pregnant woman within the operating location of the Menur Health Center in Surabaya city becomes involved approximately the transport system which might result in dating. Those issues consist of whether their child might be born generally, whether they and the baby might be able to undergo the pregnancy to shipping accurately, and fear about the child's weight. If the mother does not assist properly, it may be unfavorable to them and the growing child.

**Association between aternal Age and Anxiety Levels in Early Pregnancy in the Third Trimester**

The age of 20-34 years is a healthful period to get pregnant and be secure in pregnancy. Similarly, at that age, the mother’s mental situation is better prepared to stand being pregnant. This is in line with a study that stated that women aged 20-35 years are bodily geared up because their reproductive organs are flawlessly shaped (24). In comparison with women who are under 20 years old, their reproductive organs are in a developmental degree so that the complexity is heavier.

Meanwhile, women who are >35 years old are mostly classified as high-risk pregnancies for congenital abnormalities and complications of childbirth. Headaches experienced by pregnant women at risky ages can cause or even grow anxiety in pregnant women (25).

**Association between Education Level and Anxiety Level in Women Three Months Pregnant Between Primigravida**

The effects of statistical checks denoted that there may be a hyperlink to the various training by using pregnant women and the anxiety stage. If their understanding stage is excessive, it's going to reduce their anxiety. Knowledge in this case can be obtained through formal and informal agencies that can slightly expand the view of pregnant women related to matters concerning the condition of pregnancy. The training stage emerges as a social detail affecting human conduct. Moreover, it renders an impact on a person in responding to matters coming from outside.

In reality, anxiety can affect everyone and everywhere. Nearly all pregnant women experience anxiety, both those with lower education and those with better education. Someone with excessive training does now not always have excessive understanding, and vice versa.

**Association between Work Level and Anxiety Level in Early Pregnancy in the Third Trimester**

Paintings can divert emotions that advantage pregnant women because of time-consuming sports so that pregnant women are cognizant of their paintings. Pregnant women who have jobs can be put in a network that allows them to grow in order to know about their pregnancy and can upgrade to the family level to fulfill their wishes during and after childbirth. Light activities or exercises that are carried out by pregnant women will assist with being pregnant. Pregnant women who do light activities are tested to reduce the risk of preterm labor.
Association between Gestational Age and Anxiety Levels in Early Pregnancy in the Third Trimester

Pregnant women of eight months will experience relaxation in going through the exertions technique because there are matters that want to be organized during childbirth such as baby's clothes, transportation costs, and equipment for the baby. In maternal gestational age in the third trimester at eight months of age, the mother will experience a high incidence of physical changes, namely the enlarged abdomen and the moving fetus within the womb, making the mother no longer think about her own situation; however, additionally the situation of the possible mother's baby as for being overweight in pregnant women, it can cause discomfort and a feeling of fear, which at the time of delivery is carried out alone and there is a fear that arises that the child to be born will experience a disability at birth or can be said to have an abnormality (26).

The Relationship between the Economic Level and the Level of Anxiety in Pregnant Women in the Third Trimester of Pregnancy

The decrease in the monthly earnings of pregnant women is visible from the earnings beneath the UMK Surabaya, that's Rp. 3,296,212.50, the better the extent of anxiety they enjoy. This has additionally been confirmed through the effects of statistical checks. Good enough financial reputation or own family profits makes pregnant women greater organized to stand their being pregnant due to the costs needed for the duration of and after pregnancy (22). In the meantime, a low financial stage can intrude on the psychological situation of the mother and the extent of anxiety will grow. Pregnant women want a good enough own family financial system because at some stage in the pregnant system it calls for a unique price range including costs for accomplishing health tests, assembly of dietary wishes for the mother and fetus, maternity garments, shipping charges, and the needs of the child at early. From the results of the Chi-Square statistical test, it is known that the p value 0.000 < (0.05) means that there is a significant relationship between the economic level of pregnant women and the level of anxiety.

The Relationship between the Support of the Husband and the Level of Anxiety in Pregnant Women of the Second Quarter

Third-trimester primigravida pregnant women with mild stages of anxiety were getting more support from their husband as compared to those with moderate anxiety. This indicates that the guidance of the husband is important for the mother being pregnant so that it could reduce their anxiety. Husband's guide serves as a key for mothers in keeping pleasant feelings in the course of pregnancy. If a pregnant mother does not get a source of strength from a husband, it can cause problems when controlling her pressures and needs, and this can lead to turmoil and inner anxiety in a pregnant woman (27).

The Relationship Among Own Family Guide and the Extent of Anxiety in Primiparous Women during the Third Trimester of Pregnancy

The results of the study showed that all pregnant women in the operating environment of the Surabaya City Health Center received full support from their families. So that this research is under the theory by Friedman (28). The opinion that owns family guide is the mindset, motion, and popularity of the own family in the direction of the unwell. One of the roles and functions of the family is to provide an effective function that is useful for providing fulfillment of the psychosocial needs of family members, which in this case is a form of giving affection.

Based on the results of the Chi-Square analysis, p value = 0.246 > 0.05, which means that there is no significant
The relationship between family support and the level of anxiety of a pregnant woman.

The Relationship between Pregnancy Reputation and Anxiety Stages in Pregnant Women during the First Trimester of Pregnancy

Most pregnant women with preferred pregnancies were less anxious. In addition, they are more psychologically ready in comparison to people who are with undesirable pregnancies.

Women with undesirable pregnancies are more unprepared, have problems, and have pressure in going through pregnancy and childbirth (29).

The results of the Chi-Square analysis showed p value = 0.246 > 0.05, which means that there is no significant relationship between pregnancy status and anxiety levels.

The Relationship between Health Reputation and Anxiety Stages in Pregnant Women during the First Three Months of Being Pregnant

Healthy pregnant women assume that a healthy body is right for being pregnant. The ones who've got a suitable health reputation tend to sense security for themselves and the fetus they're carrying. But, pregnant women with poor health may suffer anxiety. They're involved that the fetus she is carrying will even reveal bad effects from her body situation. A healthy physical health reputation can cause a good psychological situation.

Consequently, pregnant women can control bad emotional adjustments in the course of being pregnant because a healthy body can cause a healthy mentality. Psychic factors in the face of childbirth become a factor that greatly affects the smoothness of the birth process. Calmness and psychological readiness in primigravida will help facilitate the process of childbirth. Whereas when pregnant women experience anxiety and stress, then indirectly the brain will work and secrete a corticotrophin-releasing hormone (CHR) (12).

CONCLUSIONS AND SUGGESTIONS

Conclusion

Based on the results of this study, it is said that the stress level of pregnant women is life, education, profession, age, health reputation, own family, and husband's assistance so that 25 people or 56.8% of pregnant women assist as low as 19 people or as much as 43.2% of pregnant women help excessively. This affects their stress level and a total of 25 (56.8%) pregnant women experienced mild stress and 19 (43.2%) pregnant women experienced low stress.

The Chi-Square test shows the result of the p value of 0.002 with a fairly large level of 5% (0.05) which indicates a relationship between husband and primigravida pregnant women in the third trimester.

Suggestion

A husband should offer more help to women who are pregnant in the third trimester when their better half is unhappy, be given each wife's recommendation as appropriate, help their other half with family chores, and take the inside encouragement their higher parts to check their health evenly. As a higher share, they complain about their health.

This observation is optimistically implemented as a reference for further studies and it can make the health training pleasant in enforcing midwifery to take care of pregnant women so that they pay greater interest to their physical and mental health. In addition, training programs for fathers containing knowledge about maternal pregnancy to the stage of childbirth and afterward can be one of the applicative solutions that can be done to make it easier for fathers to provide psychological support to pregnant women.
ACKNOWLEDGEMENT

The authors would like to thank the lecturers for assisting in writing this paper, co-authors for support and important explanations and also the journal team for publishing this paper.

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