JNK

JURNAL NERS DAN KEBIDANAN
(JOURNAL OF NERS AND MIDWIFERY)
http://jnk.phb.ac.id/index.php/jnk

The Correlation of Anxiety and Behavior of Preventing the Transmission of the Covid-19 Virus in Pregnant Women

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Article Information

History Article:
Received, 15/02/2022
Accepted, 22/08/2022
Published, 25/08/2022

Keywords:
anxiety, behavior, pregnant women, covid-19 pandemic

Abstract

Indonesia is being the COVID-19 pandemic, where the number of patient deaths has increased. Some reports mention side effects on the fetus in the form of preterm delivery, fetal distress but there is no evidence that COVID-19 infection can pass the transplacental route to the baby. The purpose of this study was to determine the correlation between the level of anxiety and the behavior of preventing transmission of the Covid-19 virus in pregnant women at the Jaya Kusuma Husada Clinic, Kepanjen Malang. This study used descriptive-analytic research with a cross-sectional study design. The population was pregnant women at the Jaya Kusuma Husada Clinic, Kepanjen on January 2021 with a sample of pregnant women using purposive sampling technique with a total of 53 pregnant women as respondents. The independent variable in this study was anxiety. The dependent variable in this study was the behavior of preventing the transmission of the Covid-19 virus. Data collection techniques using a questionnaire. The results of the Spearman Rank statistical test obtained a p-value of 0.090 (sig< 0.050), which meant that there was a negative correlation between the level of anxiety and the health behavior of pregnant women in the COVID-19 pandemic. The COVID-19 pandemic has caused increased anxiety among pregnant women. Anxiety about the risk of contracting COVID-19 encourages pregnant women to take steps to prevent transmission of COVID-19. Pregnant women and the public are expected to follow health protocols to prevent the transmission of COVID-19 for themselves, their families and the surrounding community.

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Email : viandika04@gmail.com
P-ISSN : 2355-052X
E-ISSN : 2548-3811
DOI: 10.26699/jnk.v9i2.ART.p227-231
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INTRODUCTION

On December 12, 2019, a new type of coronavirus was identified in the Hubei Province of Wuhan in China. On February 11, 2020, the International Committee named the taxonomy of the virus as severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The disease caused by SARS-CoV-2 was named COVID-19 by the World Health Organization (WHO) on January 30, 2020, WHO declared the COVID-19 outbreak a global health emergency and subsequently called it a pandemic on March 11, 2020 (Zang, et al, 2020). According to WHO on April 6, 2020, the number of patients in the world infected with COVID-19 cases was 1,278,523. Of the 1.2 million positive cases of corona, 69,757 (5.46%) patients have died and 266,732 (20.9%) have recovered. Meanwhile in Indonesia, the latest data on the number of positive cases of the corona virus (COVID-19) still shows an increase of 2,491 cases. The death rate of COVID-19 patients also continued to increase, with 209 people (8.39%) and 192 people (7.70%) recovering. This shows that Indonesia is still experiencing an increase in the number of deaths and patient recovery rates (Nasution, 2021).

From the research of Durankus, et al (2020) showed that pregnant women experienced higher levels of anxiety and depression than usual. This finding is supported by WHO which reports that about 10% of pregnant women experience mental disorders, especially depression. In developing countries, the prevalence of this condition is higher, reaching 15.6% during pregnancy and 19.8% after delivery. The unavoidable consequences of such a large pandemic are not only physical but also psychological impacts on vulnerable populations, such as pregnant women. Some reports mention side effects on the fetus in the form of preterm delivery, fetal distress but there is no evidence that COVID-19 infection can pass the transplacental route to the baby (Aziz, et al, 2020). From Viandika and Ratih 2021 research in Malang Regency, it shows that 98% of mothers experience anxiety during pregnancy (Viandika and Ratih, 2021). This shows that anxiety that occurs in pregnant women is still high in Malang Regency Due to this pandemic, governments around the world are implementing measures to prevent further spread of the virus and reduce the number of causes (Kajdi, 2020).

The existence of government instructions or policies on maintaining physical distance and contact, as well as the mass media which is becoming more frequent in informing about COVID-19 also contributes to major changes in the behavior of pregnant women so that feeling under pressure can cause indirect adverse effects on physical health and health. psychology (Corbett et al., 2020). Anxiety, depression, and stress during pregnancy are serious public health problems and lead to changes in health behavior. Health behaviors that must be carried out during this pandemic are to wear masks, wash hands frequently or use hand sanitizers and reduce crowds and maintain distance. Therefore, the researchers conducted a study on the correlation between anxiety levels and the behavior of preventing the transmission of the Covid-19 virus in pregnant women at the Jaya Kusuma Husada Clinic, Kepanjen Malang.

METHODS

This study used descriptive-analytic research (correlational research) with a cross-sectional study design. The population was pregnant women at the Jaya Kusuma Husada Clinic, Kepanjen on January 2021 with a sample of pregnant women using purposive sampling technique with a total of 53 pregnant women as respondents. The independent variable in this study was anxiety. The dependent variable in this study was the behavior of preventing the transmission of the Covid-19 virus. The data collection techniques used a questionnaire which then analyzed by Spearman Rank.

RESULTS

Table 4.1: Characteristics of Respondents

Aspect	Description	F	%
Age	< 20 years	6	11.3 %
	≥ 20 - ≤ 35 years	42	79.3 %
	> 35 years	5	9.4 %
Parity	Primigravida	20	38 %
	Multigravida	33	62 %
Gestational Age	Trimester 1 st	15	28,4 %

	Trimester 2 nd	26	49 %
	Trimester 3 rd	12	22.6 %
Education	Primary school	26	49.1%
	Secondary school	27	50.9%
	Hight school	53	100%
Worker	House wife	30	56.6%
	Private	16	30.1%
	Self-employed	7	13.3%
	Government employees	0	0%

Based on Table 4.1 shows that the age characteristics of pregnant women are mostly aged 20 - 35 years totaling 42 respondents (79.3%). Most of the respondents are multigravida totaling 33 respondents (62%). Most of the respondents in the second trimester of pregnancy amounted to 26 respondents (49%). Most of them have a high school education, amounting to 27 respondents (50.9%). Most are housewives totaling 30 respondents (56.6%)

Table 4.2: Level of anxiety

No	Level of anxiety	F	%
1.	No anxiety	1	1,9%
2.	Mild anxiety	12	22,7%
3.	Moderate anxiety	22	41,5%
4.	Severe anxiety	17	32%
5.	Panic anxiety	1	1,9%
	Total	53	100%

Based on table 4.2 most of the respondents experienced moderate anxiety 22 respondents (41.5%).

Table 4.3: Behavior

No	Classification	F	%
1.	Positive	43	81%
2.	Negative	10	19%
	Total	53	100%

Based on table 4.3, most of the health behaviors of pregnant women during the COVID-19 pandemic were positive, totaling 43 respondents (81%).

Table 4.4: Correlation between anxiety levels and health behavior of pregnant women during the COVID-19 pandemic

No	Level of anxiety	Behavior				P
		Positive		Negative		
1.	No anxiety	0	0%	1	1,9%	0.090
2.	Mild anxiety	8	15,1%	4	7,5%	
3.	Moderate anxiety	18	34%	4	7,5%	
4.	Severe anxiety	16	30,2%	1	1,9%	
5.	Panic anxiety	1	1,9%	0	0%	
	Total	43	81,2%	10	18,8	100%

Based on table 4.4, it can be seen that most of the respondents experienced moderate anxiety and positive health behaviors, as many as 18 respondents (34%), while 1 respondent did not experience anxiety with negative behavior (1.9%), 1 respondent was severely anxious with negative behavior. (1.9%) and 1 respondent with panic anxiety with positive behavior (1.9%). The results of the Spearman Rank statistic test obtained a p-value of 0.090 (sig< 0.050), which means that there is a negative correlation between the level of anxiety and the health behavior of pregnant women in the COVID-19 pandemic.

DISCUSSION

Research conducted on the anxiety level of pregnant women using the HARS questionnaire, of the 53 respondents studied, the results showed that most pregnant women had a level of anxiety about COVID-19 in the moderate anxiety category, 22 respondents (41.5%) while those who did not experience anxiety. 1 respondent (1.9%), mild anxiety 12 respondents (22.7%), severe anxiety 17 respondents (32%), and panic anxiety as much as 1 respondent (1.9%). Research on behavior using questionnaires with questions about the behavior of preventing the transmission of COVID-19 carried out by pregnant women, the results showed that most of the respondents showed positive behavior, 43 respondents (81.2%). The results of the Spearman Rank statistical test obtained a p-value of 0.090 (sig< 0.050), which means that there is a negative correlation between the level of anxiety and the health behavior of pregnant women during the COVID-19 pandemic. This is following the results of research by Marshel (2020) which states that there is a significant negative correlation between health anxiety and health behavior in young adults amid the COVID-19 pandemic in Jakarta.

However, this is not in line with the research conducted by Devra and Immanuel (2020) which stated that there was a significant correlation between students' anxiety levels and students' attitudes due to COVID-19. The results of this study are also do not following the theory which explains that a person's anxiety is a source of stimulus for behavior. Defense mechanism as a human effort to control awareness of anxiety. For example, if a person has inappropriate thoughts and feelings that increase anxiety, he or she represses those thoughts and feelings. Repression is the process of storing inappropriate impulses (Isaac, 2005) meaning that the higher the anxiety, the more negative behavior can be generated, and vice versa if the lower the anxiety/not anxiety leads to positive behavior. The COVID-19 pandemic has caused increased anxiety among pregnant women. Women pay most attention to older relatives, then their children, followed by the unborn. They feel worried about the risk of infection to the baby in the postpartum period (Corbett et al., 2020). This anxiety has prompted them to take steps to prevent the spread of COVID-19. The existence of government instructions or policies on maintaining physical distance and contact, as well as the mass media which is becoming more frequent in informing about COVID-19 also contributed to major changes in the behavior of pregnant women. The results of the study by Corbett, et al showed that more than 35% of patients (25/71) isolated themselves to avoid disease.

A third (32.4%; 23/71) started staying home from work due to concerns about the virus while one in five patients (19.7%; 14/71) started working from home. Nearly half of the women questioned (46.5%; 33/71) changed their primary method of transportation (Corbett et al., 2020). The results of this study indicate that pregnant women have carried out positive behaviors in preventing COVID-19, namely by diligently washing hands with soap, wearing masks when leaving the house, keeping a distance and avoiding crowds, covering mouths when coughing and sneezing, taking multivitamins, and continuing to do pregnancy tests.

CONCLUSION

From the results of the study, it can be concluded that there is a negative correlation between the level of anxiety and the health behavior of pregnant women during the COVID-19 pandemic. The COVID-19 pandemic has caused increased anxiety among pregnant women. Anxiety about the risk of contracting COVID-19 encourages pregnant women to take steps to prevent transmission of COVID-19.

SUGGESTION

Pregnant women and the public are expected to follow health protocols to prevent the transmission of COVID-19 for themselves, their families and the surrounding community. Health workers, especially midwives, are expected to provide education to pregnant women about prevention and advice during the COVID-19 pandemic in order to reduce anxiety and always pay attention to health protocols in providing services, especially health guidelines for pregnant women during the COVID-19 pandemic.

ACKNOWLEDGEMENT

The authors would like to thank the Chancellor of ITKM Widya Cipta Husada, head of the midwifery professional education study program, head of research institutes and community service, respondents in this study and all parties who helped in this research.

FUNDING

This research was funded by the research and community service institute of ITKM Widya Cipta Husada. ITKM Widya Cipta Husada helps all costs incurred in this research.

CONFLICTS OF INTEREST

The Authors in this research have no affiliations with or involvement in any organization or entity with any financial interest or non-financial interest in the subject matter or materials discussed in this manuscript.

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