

Achievement of The Maternal Role In Pregnancy During The Covid Pandemic

Sri Wahyuni^{1*}, Tutik Rahayu², Apriliani Yulianti Wuriningsih³, Hernandia Distinarista⁴

Faculty of Nursing Science, Universitas Islam Sultan Agung, Indonesia^{1,2,3,4}

Corresponding author: 1*



Keywords:

Covid pandemic, Maternal role;
Pregnancy.

ABSTRACT

Achieving the role of being a mother is a very important thing in a pregnancy and it requires an adaptation process. The COVID-19 pandemic situation which requires a change in the new habit order causes more stress for pregnant women in adapting to the achievement of their new role. This study aims to determine the achievement of the role of motherhood during the pregnancy period during the Covid 19 pandemic. This is a type of quantitative research with a cross sectional design. The number of research subjects is 99 taken from the entire population or total sampling. Data were collected using the instrument "What Being the Parent of a New Baby is Like: Revision of an Instrument (WPL-R)" and analyzed by logistic regression. Parity and occupation affect the achievement of the mother's role during pregnancy with a significance value of <0.05 . Parity is the most influential factor on the achievement of the role of pregnant women in Bandarharjo Village, North Semarang, Semarang, Central Java with an OR value of 10.759 and p value of 0.000.



This work is licensed under a Creative Commons Attribution Non-Commercial 4.0 International License.

1. Introduction

The change in the role of being a mother is a stage of maturation and in the process requires adaptation [1]. Adaptation to changing roles is not an easy thing and can be passed well by every woman, especially when women experience various psychological problems [2]. Covid-19 pandemic period is a stressful situation. The situation of the number of deaths that occurred and the limitation of health services that interact directly with patients to prevent the spread which resulted in public concern to visit health care facilities [3]. Constraints for mothers are difficulties during the pregnancy period which is a transitional turning point in her life With the health threats they experience, pregnant women are required to be able to adapt to changing roles and changing extreme situations.

Women who are unable to reach the level of adaptation will feel pressured and helpless from the time they get pregnant until they take on their new role [4]. Adaptability will determine the success of his role. Barriers in carrying out their role will have an impact on the inability to become a mother which can cause stress or depression [5]. The threat to the risk of contracting the Covid-19 virus which is dangerous for both the mother and the fetus in her womb will further increase the stress she experiences.

The covid-19 pandemic increased anxiety by 2.23 times and depression by 2.44 times in pregnant women [6]. A study stated that during the COVID-19 pandemic period, all post-partum mothers experienced anxiety: 95.8% experienced moderate anxiety and 4.2% severe anxiety. Continuous feelings of anxiety with situations that threaten health also have an impact on depression [7]. The results of the study on pregnant women even showed that as many as 34.1% of pregnant women experienced depression during the COVID-19 pandemic period [8]. Anxiety in pregnant women is caused by worries about health conditions, feelings of fear of childbirth, and the future of child care in the midst of the COVID-19 pandemic situation [9].

Various studies that reveal the anxiety and depression felt by pregnant women have been carried out, but none has yet revealed how maternal roles are formed during the COVID-19 pandemic period. Maternal role is very important to be formed early in the pregnancy period. The reason is that failure to achieve maternal roles can cause depression and have an impact on the mother's ability to maintain pregnancy and child care [10]. Another study also stated that instilling beliefs about maternal roles starting from the pregnancy period had a significant impact on the occurrence of depression in the postpartum period [11].

2. Methods

This research is a type of quantitative research with a cross sectional design. The population taken was pregnant women in areas affected by COVID-19, namely in the Bandarharjo Village area, North Semarang, Central Java, with 99 subjects as a subject. Data were collected using the instrument "What Being the Parent of a New Baby is Like: Revision of an Instrument (WPL-R)" developed by [12]. Data were analyzed using logistic regression.

3. Results

Table 1 Characteristics of Pregnant Women

Variable	n	%
Age		
High Risk	8	8.1
Productive	91	91.9
Total	99	100.0
Paritas		
Primi gravida	46	46.0
Multi gravida	53	53.0
Total	99	100.0
Graduates		
Low	5	5.1
Middle	86	86.9
High	8	8.1
Total	99	100.0
Profession		
House Wife	65	64.7
Career woman	34	34.3
Total	99	100.0

Table 1 shows that the majority of respondents are of productive age, namely 91 respondents (91.9%), multigravida status is 53 respondents (53.0%), has a history of secondary education totaling 86 respondents (86.9%), and the majority work as housewives amounted to 65 respondents (64.7%).

Table 2. Distribution of Frequency of Maternal Role

Variable	n	%
-----------------	----------	----------

Maternal Role		
Not Good	49	49.5
Good	50	50.5
Total	99	100.0

Table 2 explains that most pregnant women have a good maternal role with a total of 50 respondents (50.5%).

Table 3. Relationship of Maternal Age with Maternal Role

Variable	Self Efficacy		Total
	Not Good	Good	
Age			
High Risk	7	1	8
Productive	42	49	91
Total	49	50	99
<i>r</i>			0.025

Table 3 shows that there is a relationship between the age of pregnant women and maternal role with a correlation value of 0.025.

Table 4. Relationship between Parity of Pregnant Women and Maternal Role

Variable	Maternal Role		Total
	Not Good	Good	
Paritas			
Multi gravida	42	4	46
Primi gravida	7	46	53
	49	50	99
<i>r</i>			0.000

Table 4 shows that there is a relationship between parity and maternal role in pregnant women in the Bandarharjo Village area, North Semarang, Semarang, Central Java with a correlation value of 0.000.

Table 5. Relationship of Pregnant Women's Education with Maternal Role

Variable	Maternal Role		Total
	Not Good	Good	
Graduate			
Low	5	0	5
Middle	44	42	86
High	0	8	8
Total	49	50	99
<i>r</i>			0.001

Table 5 shows that there is a relationship between education and maternal role in pregnant women in the area of Bandarharjo Village, North Semarang, Semarang, Central Java with a correlation value of 0.001.

Table 6 Relationship of Pregnant Mother's Work to Maternal Role

Variable	Maternal Role	Total
-----------------	----------------------	--------------

Profession	Not Good	Good	
House Wife	59	5	64
Career Woman	20	14	35
Total	79	19	99
<i>r</i>			0.000

Table 6 shows that there is a relationship between work and maternal role in pregnant women in the area of Bandarharjo Village, North Semarang, Semarang, Central Java with a correlation value of 0.000.

Table 7 The Most Influential Factor on Maternal Role

Variable	B	S.E.	Wald	df	Sig.	Exp (B)
Umur	-19.598	14210.339	.000	1	.999	.000
Paritas	2.376	.622	14.580	1	.000	10.759
Pendidikan	1.990	1.098	3.286	1	.070	7.313
Pekerjaan	1.673	.639	6.848	1	.009	5.330
Constant	30.396	28420.0	.000	1	.999	1588372357 3630.000

Table 7 shows that parity and occupation of pregnant women have an effect on Maternal Role with a significance value of <0.05. The tendency of someone who has a job to have a good Maternal Role is 5,330 times when compared to someone who does not work. Parity is the most influential factor on the Maternal Role of pregnant women in the area of Bandarharjo Village, North Semarang, Semarang, Central Java with an OR value of 10,759.

4. Discussion

The results showed that parity is the most influential factor in the formation of the Maternal Role. Women who have had children more quickly adapt to changing their role to become mothers in their next pregnancy compared to women who experience pregnancy for the first time. Pregnancy in women will bring up various responses to changes in the body, both physically and psychologically. These changes require a process to adapt to the achievement of a new role. The success of achieving a new role to become a mother, especially in the first pregnancy requires a process that needs to be started since pregnancy [13]. Parity will provide many experiences for mothers in the period of pregnancy, childbirth, breastfeeding, and newborn care [14].

Women who have previous childbirth experience have better emotional maturity, as research conducted by [15] who state that adulthood promotes a transition to positive emotions and that adolescent mothers are noted to be more negative and maintain rigid dysfunctional patterns.

This study also shows that work affects the formation of Maternal Roles for pregnant women in areas affected by COVID-19. Currently, it has become a trend in society with the emancipation that women in their careers are equal to men. Work will cause women to have many friends and socialize with a variety of different communities. Communication with various communities causes women to be rich in experiences that can increase knowledge and understanding [16]. The essence of working women is not only economically valuable, but more than that when women interact with communities that have the same or equal level, knowledge transfer will occur more quickly and easily [17].

Women work in a patterned manner and solve various problems quickly and responsibly, this condition causes habits that can be reflected in everyday life [18]. Various kinds of ideas are usually raised by working women when making decisions and they tend to be more skilled [19]. This skill is very meaningful and is a positive potential for a mother to improve her ability to adapt to changes in her new role. Achieving a good maternal role will affect the parenting pattern of the mother towards the child and management in her family which can prevent the risk of depression due to failure to achieve the role [11].

The achievement of her role as a mother is very meaningful to form the mentality of a working woman. Positive potentials will be able to develop and influence the achievement of the role as a mother optimally which is the basis for improving physical, emotional, and social health status that is able to develop competency achievement [20]. Achievement of maternal roles indicates success in maternal identity which will create a balanced family function [21]. The real implication during the Covid-19 pandemic period is that the achievement of a good maternal role will create a good role in preventing the transmission of Covid-19 and implementing new habits in the family. As research conducted by [22] which states that there is a significant relationship between Maternal Role and health behavior.

5. Conclusions

Parity and occupation are factors that influence the formation of Maternal Role in pregnant women in the Bandarharjo Region, Semarang. Parity is the most influential factor on Maternal Role with OR 10.759 and p value 0.000.

6. References

- [1] Javadifar N, Majlesi F, Nikbakht A, Nedjat S, Montazeri A. Journey to Motherhood in the First Year After Child Birth. *J Fam Reprod Heal* 2016;10:146–53.
- [2] Esmaelzadeh Saeieh S, Rahimzadeh M, Yazdkhasti M, Torkashvand S. Perceived Social Support and Maternal Competence in Primipara Women during Pregnancy and After Childbirth. *Int J Community Based Nurs Midwifery* 2017;5:408–16.
- [3] States U, Control D. Family-centered care during a pandemic : The hidden impact of restricting family visits. *Nurs Health Sci* 2021;4–6. <https://doi.org/10.1111/nhs.12748>.
- [4] DeVito J. How Adolescent Mothers Feel About Becoming a Parent. *J Perinat Educ* 2010;19:25–34. <https://doi.org/10.1624/105812410x495523>.
- [5] Corrigan CP, Kwasky AN, Groh CJ. Social Support, Postpartum Depression, and Professional Assistance: A Survey of Mothers in the Midwestern United States. *J Perinat Educ* 2015;24:48–60. <https://doi.org/10.1891/1058-1243.24.1.48>.
- [6] Grumi S, Provenzi L, Accorsi P, Biasucci G, Cavallini A, Decembrino L, et al. Depression and Anxiety in Mothers Who Were Pregnant During the COVID-19 Outbreak in Northern Italy : The Role of Pandemic-Related Emotional Stress and Perceived Social Support. *Front Psychiatry* 2021;12:1–9. <https://doi.org/10.3389/fpsy.2021.716488>.
- [7] Fatmawati Y, Munfaati EL. KECEMASAN IBU POST PARTUM MASA PANDEMI COVID-19 DI PUSKESMAS GABUS 1 PATI. *J Profesi Keperawatan* 2022;9:34–48.

- [8] Nakachew Sewnet Amare, Dereje Nibret Gessesse YSK, Ababayehu Melesew Mekuriyaw, Michael Amara Tizazu, Mulat Mossie Menalu, Birhan Tsegaw Taye AGM. Prevalence of antenatal depression and associated factors among pregnant women during COVID-19 pandemic in North Shewa zone, Amhara region, Ethiopia 2020.
- [9] García-Fernández R, Liébana-Presa C, Marqués-Sánchez P, Martínez-Fernández MC, Calvo-Ayuso N, Hidalgo-Lopezosa P. Anxiety, Stress, and Social Support in Pregnant Women in the Province of Leon during COVID-19 Disease. *Healthc* 2022;10:1–9. <https://doi.org/10.3390/healthcare10050791>.
- [10] Bilszta J, Ericksen J, Buist A, Milgrom J. Women’s experience of postnatal depression - beliefs and attitudes as barriers to care. *Aust J Adv Nurs* 2010;27:44–54.
- [11] Anja Wittkowski, Charlotte Garrett, Alison Cooper AW. The Relationship between Postpartum Depression and Beliefs about Motherhood and Perfectionism during Pregnancy. *J WOMAN’S Reprod Heal* 2017;Vol 1:9–23. <https://doi.org/10.14302/issn.2381-862X.jwrh-15-848>.
- [12] Trisetyaningsih Y, Lutfiyati A, Kurniawan A. Dukungan Keluarga Berperan Penting Dalam Pencapaian Peran Ibu Primipara. *J Kesehat Samodra Ilmu* 2017;8:105294.
- [13] Entsieh AA, Hallström IK. First-time parents’ prenatal needs for early parenthood preparation-A systematic review and meta-synthesis of qualitative literature. *Midwifery* 2016;39:1–11. <https://doi.org/10.1016/j.midw.2016.04.006>.
- [14] Suryaningsih EK, Wu S-F, Yan X-Y, Lin H-R. Indonesian mother’s feeling and thought during pregnancy: a qualitative study. *J Heal Technol Assess Midwifery* 2018;1:57–63. <https://doi.org/10.31101/jhtam.606>.
- [15] Van Bommel DMH, Van der Giessen D, Van der Graaff J, Meeus WHJ, Branje SJT. Mother–Adolescent Conflict Interaction Sequences: The Role of Maternal Internalizing Problems. *J Res Adolesc* 2019;29:1001–18. <https://doi.org/10.1111/jora.12441>.
- [16] Rafique GM, Mahmood K. Relationship between knowledge sharing and job satisfaction: a systematic review. *Inf Learn Sci* 2018;119:295–312. <https://doi.org/10.1108/ILS-03-2018-0019>.
- [17] Sajid M. The Impact of Job Satisfaction and Knowledge Sharing on Employee Performance. *J Resour Dev Manag* 2016;21:16–23.
- [18] Amalia FR, Kurniawati F. Self-efficacy source and career adaptability: The mediating roles of career decision self-efficacy. *Humanit Indones Psychol J* 2019;16:43. <https://doi.org/10.26555/humanitas.v16i1.9573>.
- [19] Kumar SP, Saha S. +. *SAGE Open* 2017;7:1–13. <https://doi.org/10.1177/2158244017733030>.
- [20] Shrestha S, Adachi K, A Petrini M, Shrestha S. Maternal Role: A Concept Analysis. *J Midwifery Reprod Heal* 2019;7:1732–41. <https://doi.org/10.22038/jmrh.2019.31797.1344>.
- [21] Panthumas S, Kittipichai W, Chamroonsawasdi K, Taechaboonsersak P. Antecedent factors of

maternal identity among primiparous Thai teenage mothers. *J Heal Res* 2019;33:336–48. <https://doi.org/10.1108/JHR-09-2018-0109>.

[22] Isa A, Muhamad NA, Mustapha N, Abdul Mutalip MH, Lodz NA, Mohd Royali MS, et al. Association between Self-Efficacy and Health Behaviour in Disease Control: A Systematic Review. *Glob J Health Sci* 2017;10:18. <https://doi.org/10.5539/gjhs.v10n1p18>.