



EFFECT OF GYMNASTICSPREGNANCY RESULTS IN DECREASING ANXIETY LEVELS IN PRIMIGRAVIDA PREGNANT WOMEN TRIMESTER III

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ABSTRACT

Anxiety in facing childbirth is a mixed feeling, namely feelings of happiness full of hope accompanied by feelings of anxiety, fear, fear of death, birth trauma, and feelings of guilt/sin, worry, stress, unease, muscle tension, difficulty sleeping, anxiety. ongoing feelings that don't go away, and feelings of panic. Based on the results of a preliminary study conducted by researchers in January 2023 by interviewing 10 pregnant women in the third trimester at the Poskesdes Epil sub-district. Lais found that the level of anxiety of mothers facing the birth process was still high, eight out of ten mothers said they felt afraid before giving birth. This study aims to determine the effect of pregnancy exercise on reducing anxiety levels in third-term primigravida pregnant women at the Epil village health post, Lais sub-district, Musi Banyuasin Regency. This research uses quantitative methods using a pre-experimental design with an approach (One Group Pre-Post Test Design). The population of this study were all third trimester primigravida pregnant women who had their pregnancy checked at the Epil village health post, Kec. Lais as many as 40 people. The sample in this study was 20 respondents, using a purposive sampling technique. The analysis used was the paired sample t-test. The results of the research: Before carrying out pregnancy exercises, the respondents' anxiety levels were in the category of mild anxiety and moderate anxiety. After carrying out pregnancy exercises, the respondents' anxiety levels were in the categories of not anxious and mild anxiety. There was a significant difference between respondents before doing pregnancy exercises and after doing pregnancy exercises. (P Value = 0.000). There are differences before doing pregnancy exercises and after doing pregnancy exercises.

Keywords: anxiety; pregnancy exercise; pregnant women

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INTRODUCTION

Childbirth is the birth of the baby, placenta and amniotic membranes from the uterus to the uterus. Pregnancy is a condition where a woman has an embryo or fetus in her womb. Pregnancy begins at the time of conception until the birth of the fetus, and the length of pregnancy from ovulation to parturition is estimated to be around 40 weeks and does not exceed 43 weeks. (Sintya Dewi et al., 2020). According to the World Health Organization (WHO), the maternal mortality rate (MMR) is still very high, around 810 women die from complications related to pregnancy and childbirth throughout the world every day, and around 295,000 women die during and after pregnancy and childbirth. Meanwhile, the maternal mortality rate in developing countries reaches 462/100,000 live births. Meanwhile, in developed countries it is 11/100,000 live births (Lestari, 2020).

The decline in MMR in Indonesia occurred from 1991 – 2007, namely from 390 to 228 per 100,000 live births. However, based on the results of the 2012 Indonesian Demographic and Health Survey (SDKI), the maternal mortality rate in Indonesia increased, namely 359 per 100,000 live births. MMR has again shown a decline to 305 maternal deaths per 100,000 live births based on the results of the Inter-Census Population Survey (SUPAS 2015). This is not in accordance with the 5th Global MDGs (Millennium Development Goal's) target of reducing the Maternal Mortality Rate (MMR) to 102 per 100,000 live births in 2015.(Indrayani, 2021).

The maternal mortality rate for South Sumatra Province in 2018 was targeted at 134 people and was realized at 119 people or 111.19%. If you look at the graph, the number of maternal deaths during the last 3 years has decreased but increased slightly in 2018. The achievement of reducing the number of maternal deaths in South Sumatra is specifically calculated per person, not per 100,000 live births, so it cannot be directly compared with national achievements. The MMR calculation through the population census also only describes the national figure, namely 346 per 100,000 KH, and cannot describe the MMR per province. Health Service Plan 2019 19 The number of maternal deaths in South Sumatra province in 2014 was 155 people, rose to 164 deaths in 2015, fell to 142 people in 2016 and fell again to 107 people in 2017 and rose to 119 people in 2018 as seen in the graph below(Destaria & Pramono, 2019).

In the city of Palembang itself, in 2019 there were 120/161,571 KH in 2018 based on reports, there were 4 Maternal Mortality Rates (MMR) caused by bleeding, hypertension in pregnancy, circulatory system disorders and other causes. This shows a decrease in the MMR compared to 2017, namely 7 people in the Maternal Mortality Rate (MMR). K1 coverage for the city of Palembang in 2019 was 100% and K4 was 99.9%. The highest K1 and K4 coverage is at the Makrayu health center. The lowest K1 and K4 coverage is in the Karya Jaya area(DINKES, 2023). The direct cause of maternal death in Indonesia is 80% due to obstetric complications and 20% due to other causes. Meanwhile, indirect causes are factors that can aggravate pregnancy such as "too four" (too young, too old, giving birth too often, and too close a birth distance) as well as factors that complicate the process of handling pregnancy, childbirth and postpartum emergencies such as "three "late" (late in recognizing danger signs and making decisions, late in reaching health facilities, and late in handling emergencies) to overcome this requires efforts to assist with childbirth by health workers and the involvement of civil society including professional organizations in reducing MMR in Indonesia. Meanwhile, the number of infant deaths in the city of Palembang in 2019 increased by 508 per 159,908 KH(Palembang Health Office, 2019).

Anxiety in facing childbirth is a mixed feeling, namely feelings of happiness full of hope accompanied by feelings of anxiety, fear, fear of death, birth trauma, and feelings of guilt/sin, worry, stress, unease, muscle tension, difficulty sleeping, anxiety. ongoing feelings that don't go away, and feelings of panic. Anxiety during pregnancy can also be influenced by positive or negative factors regarding the mother's perspective on pregnancy and childbirth, lack of husband/family support, socioeconomic problems, previous psychiatric history, previous pregnancy/childbirth trauma, poverty, social position, ethnicity, access to health services, drug abuse, alcohol consumption, and smoking behavior(Pratiwi & Yulita, 2021). There are several efforts that can be made to relieve anxiety before giving birth, efforts to reduce anxiety, namely, husband's support, counseling, emotional freedom techniques, and pregnancy exercises.(Pratiwi & Yulita, 2021)

The pregnancy exercise program is aimed at, through regular pregnancy exercise training, the condition of the muscles and joints which play a role in the birth mechanism process, increasing physical and psychological health as well as confidence in oneself and helpers in facing childbirth, can be maintained, guiding women towards a physiological birth, strengthens and maintains the elasticity of the abdominal wall muscles, pelvic floor muscles, ligaments, tissue and fascia which play a role in the delivery mechanism, loosens the joints associated with the birth process and forms an excellent body posture so that it can help overcome complaints, the position of the fetus, and reduce shortness of breath, obtain a perfect way to carry out contractions and relaxation, master breathing techniques in labor and be able to regulate yourself to calm (Suryani & Handayani, 2018).

Physiologically, this exercise will reduce the mother's anxiety level, which involves the parasympathetic part of the central nervous system. Relaxation will inhibit the increase in sympathetic nerves so that the hormones that cause body dysregulation can be reduced in number. The parasympathetic nervous system, which has the opposite function to the sympathetic nervous system, will slow down or weaken the work of the body's internal organs as a result of which there will be a decrease in heart rate, breathing rhythm, blood pressure, muscle tension, metabolic rate and production of stress-causing hormones, along with a decrease levels of stress-causing hormones, the entire body begins to function at a healthier level with more energy for healing, strengthening and rejuvenation. In this way, pregnant women will feel relaxed as anxiety symptoms decrease (Istikhomah & Mumpuni, 2016). Based on research conducted by Murbiah in Palembang City in 2015, there was a significant decrease in anxiety between before and after pregnancy exercise. The results of the qualitative analysis regarding feelings after pregnancy exercise, mothers feel more comfortable and less anxious about giving birth. Conclusion: Pregnancy exercise has an influence on reducing anxiety levels facing the birthing process.

According to research conducted by Choudhury (2017), there are four complications that directly cause maternal deaths in the world, the highest being prolonged labor with 1270 cases (24.5%), bleeding in 601 cases (11.6%), infection in 485 cases (9.3%), and seizures in 166 cases (3.2%). Most maternal and perianal deaths occur during childbirth. One of the causes in Indonesia is the long second stage (37%). The causes of a long second stage include the mother's anxiety level which makes the mother restless, causes the mother to make mistakes in pushing and makes the mother tired. The results of research regarding anxiety in third trimester pregnant women showed that 47.1% of pregnant women experienced mild anxiety, and 3.9% experienced moderate anxiety when facing childbirth. Worry and anxiety in pregnant women if not handled seriously will have physical and psychological impacts and effects. If the physical condition is not good, then the thought process, mood, and actions in daily life will be negatively affected. This research aims to determine the participation in pregnancy exercise with primigravida anxiety in facing childbirth.

Based on the results of a preliminary study conducted by researchers in January 2023 by interviewing 10 pregnant women in the third trimester at the Poskesdes Epil sub-district. Lais found that the level of anxiety of mothers facing the birth process was still high, eight out of ten mothers said they felt their fear before giving birth was getting bigger, while one of them stated "I always imagine what my birth process will be like, the closer the time is, the more excited I feel to see baby but I was also afraid to go through the process, afraid of pain, afraid of not being able to give birth naturally." Based on the results of these interviews, pregnant women experienced a level of anxiety about the birthing process, worried that they would not be able to give birth normally. Of the ten pregnant women, only 2 people admitted that they

felt normal about the birth process later. The aim of this research is to determine the effect of pregnancy exercise on reducing anxiety levels in third-term primigravida pregnant women at the Epil village health post, Lais sub-district, Musi Banyuasin Regency.

METHOD

This research method is quantitative using a pre-experimental design with an approach (One Group Pre-Post Test Design). Where in this study the sample was given a pre-test (initial observation) before being given the intervention, after that the intervention was given, then a post-test (final observation) was carried out. Population is a generalization area consisting of objects/subjects that have certain quantities and characteristics determined by researchers to be studied and then conclusions drawn (Hidayat, 2014). The population in this study was all pregnant women in the third trimester, totaling 40 people. The sample is part of the population studied or a number of characteristics possessed by the population (Indra, 2019). The sampling technique used was purposive sampling taken from the research population, namely normal pregnant women with a gestational age of 28 – 36 weeks. The data used in this research is primary data, data taken directly from respondents who collected data using the Hars questionnaire. This analysis was carried out on variables from the research results. In general, this analysis only produces a percentage distribution of each variable. The analysis is carried out to see the frequency distribution, both of the independent variable (Pregnancy Exercise) and the dependent variable (TM III Anxiety Level of Pregnant Women). Bivariate analysis is data analysis on two variables that are thought to have a correlation (Notoadmojo, 2010). The test used is the paired sample t-test with the condition that the data is normally distributed with the Shapiro-Wilk normality test. If the distribution of both data is normal, to see the difference in anxiety levels before and after pregnancy exercise.

RESULTS

Table 1.
The influence of pregnancy exercise on anxiety levels facing the birth process

Variables	Mean	P*
Pretest	2.75	0,000
Posttest	1.80	

Table 1, it is known that from the 20 samples that carried out the pretest and posttest, the mean value for the pretest was 2.75 and the posttest was 1.80 and the results of the paired sample test showed a result of 0.000, which means there is a difference in the level of anxiety before and after doing pregnancy exercises.

DISCUSSION

Based on the results of statistical tests on the anxiety level of pregnant women *primigravida* before and after doing pregnancy exercises. The results obtained from 20 samples who carried out the pretest and posttest, the mean value for the pretest was 2.75 and the posttest was 1.80 and the results of the paired sample test were 0.000, which means there is a significant influence between pregnancy exercise on reducing the anxiety level of third trimester *primigravida* pregnant women at the Epil District Health Post. Lais, this condition illustrates that giving pregnancy exercise to *primigravida* pregnant women in the third trimester can reduce anxiety. Anxiety in pregnant women is a unique psychological condition, but this occurs because it is influenced by increased hormones during pregnancy, and is also exacerbated by external stressors. This can have a bad impact on the mother and fetus if not handled properly. According to research by Miguel A. Diego, 2006, it was found that pregnant women who experience anxiety during pregnancy can increase cortisol levels during pregnancy which can be related to low fetal weight. (Parni & Tambunan, 2023). After carrying

out pregnancy exercises, the anxiety level of pregnant women before giving birth decreases very significantly, this is because when pregnant women do pregnancy exercises, their bodies become less tense and their minds become more relaxed.

In accordance with research by Sulastri (2012), the title pregnancy exercise is beneficial for pregnant women so that they master breathing techniques. This breathing technique is trained so that the mother is better prepared to face childbirth. With good breathing techniques, pregnant women's breathing patterns will become better and more regular so that they can give pregnant women a feeling of relaxation. Relaxation will inhibit the increase in the work of the sympathetic autonomic nerves, so that the parasympathetic nervous system has the opposite function to the sympathetic nerves.(Magfuroh, 2012). This can then reduce the adrenaline hormone resulting in a decrease in heart rate, breathing rhythm, blood pressure, muscle tension, metabolic rate and production of stress-causing hormones which causes pregnant women to become calmer along with reduced anxiety symptoms.(Elisadevi, 2018). When the level of anxiety in pregnant women decreases, it will give pregnant women enthusiasm to face the birth process(Collin, 2012)In line with research conducted by Keshavarzi F, 2014, it was found that pregnant women who experience anxiety increase cortisol levels in the fetal umbilical cord blood and can regulate growth. According to research by Alfie Ardiana Sari and Dian Puspitasari, 2016 found that pregnancy exercise can help pregnant women prepare physically and psychologically during childbirth.

The results of Haryanto's research, 2015, showed that pregnancy exercise had an effect on reducing the anxiety level of pregnant women in the third trimester in the practice of Independent Midwives in Boyolali Regency. Pregnancy exercise is very useful for reducing stress or anxiety during pregnancy. However, pregnancy exercise is not a magical cure that can free a person from all forms of stress, but pregnancy exercise can reduce the influence of stress on an individual. The benefits of exercise itself have been found to improve mood and reduce symptoms of depression, and have also been shown to act as an antidepressant and psychotherapy in the long term.(Wlandara et al., 2022). This research also agrees with the results of research by Nina Primasari (2017) that pregnant women who do pregnancy exercises can reduce the anxiety level of primigravida mothers before giving birth. Based on research results from Vivin Yuni (2017), there is a relationship between pregnancy exercise, husband's support and midwife support with a decrease in the mother's anxiety level before giving birth. Based on the results of research by Nazilla Nugrahen (2018), pregnant women who do pregnancy exercises and mural therapy can reduce anxiety in pregnant women.(Fatmasari et al., 2023).

In this study, it was found that there was a significant influence on the frequency of pregnancy exercise and the number of gravidas on the level of anxiety, which shows that the more often you do pregnancy exercise, the lower the level of anxiety and the more often the number of pregnancies the mother has, the lower the level of anxiety. These results are similar to the results of research by increasing the intensity of pregnancy exercise, this can reduce the level of anxiety before facing the birth process and the level of anxiety will increase if you don't even do pregnancy exercise.(Astri et al., 2020) In the opinion of researchers, the anxiety experienced by pregnant women can also be influenced by the number of parities or gravidas. As the mother's parity number increases, the anxiety she experiences decreases during pregnancy and childbirth based on previous experience.(Aliyah, 2016).

CONCLUSION

Based on the results of this research The Effect of Pregnancy Exercise on Reducing Anxiety Levels in Primigravid Pregnant Women in the Third Trimester in Lais, it can be concluded that: Before carrying out pregnancy exercises, the respondents' anxiety levels were in the categories of mild anxiety and moderate anxiety. After carrying out pregnancy exercises, the respondents' anxiety levels were in the not anxious and mildly anxious categories. There was a significant difference between respondents before doing pregnancy exercise and after doing pregnancy exercise. Which means there is a significant influence between pregnancy exercise on reducing the anxiety level of third trimester primigravida pregnant women at the Epil District Health Post. Lais, this condition illustrates that giving pregnancy exercise to primigravida pregnant women in the third trimester can reduce anxiety.

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