SOUTH EAST ASIA NURSING RESEARCH
Available on : https://jurnal.unimus.ac.id/index.php/SEANR

Original Research

Pregnant Mother's Anxiety Level On Stunting Risk

Eni Hidayati[1], Sifana Ayu Damayanti[1], Desi Aryana Rahayu[1], Muhammad Fatkul Mubin[1], Tri Nurhidayati[1]

[1] Universitas Muhammadiyah Semarang, Indonesia

Article Info

Article History:
Submitted: Dec 26th 2021
Accepted: March 1st 2022
Published: March 29th 2022

Keywords:
Level of anxiety; pregnant women; risk of stunting

Abstract

Pregnancy at a young age and over the age of 35 is vulnerable to causing pregnant women to experience various risks of pregnancy because pregnant women at a young age do not know much about how to maintain their pregnancy conditions and pregnant women over the age of 35 experience a decrease in nutrient absorption so they are easy to experience various kinds of problems. One of the risks of pregnancy is stunting. Pregnant women usually experience a psychological decline that causes anxiety in themselves. So that it also has an impact on the growth and development of the prospective baby. The type of research used is an analytical approach. The design of this study used a cross-sectional approach. The population in this study were pregnant women in the Sembungharjo village area with a total of 27 pregnant women using a total sampling of data analysis using the chi-square test. The results of the study from 27 respondents were obtained that pregnant women with mild anxiety among as many as 16 respondents (59.3%), moderate anxiety among as many as 5 respondents (18.5%), and no anxiety among as many as 6 respondents (22.2%). Respondents with severe anxiety were 0 (0%). A total of 27 pregnant women respondents found that as many as 5 respondents (18.5%) had low risk while 22 respondents (81.5%) were not at risk, and pregnant women with high risk were 0 (0%). The conclusion is that there is no relationship between the anxiety level of pregnant women and the risk of stunting in Sembung Harjo sub-district, Genuk sub-district with a p-value of 0.366 (a> 0.05).

INTRODUCTION

Pregnancy is a period of mental, psychological and emotional changes, although many women say that pregnancy is something that adds to the perfection of the family, especially the first pregnancy for women.[1] Pregnancy is divided into 3 trimesters, namely the first trimester (1-3 months), the second trimester (4-6 months) and the third trimester (7-9 months) for primigravida mothers (pregnant for the first time). % of pregnant women experience anxiety in the third trimester, namely the final trimester to face the first delivery.[2] WHO estimates that every year there are 210 million pregnancies worldwide, the prevalence of anxiety in pregnant women in Portugal is 18.2%, in Bangladesh 29%, in Hong Kong 54%. In Indonesia, the number of pregnant women is 5,263,057. The incidence of pregnancy anxiety is 18-70%. For pregnant women for the first time, there are many pressures and

Corresponding author:
Eni Hidayati
eni.hidayati@unimus.ac.id
South East Asia Nursing Research, Vol 4 No 1, March 2022
ISSN:2685-032X
DOI: https://doi.org/10.26714/seanr.4.1.2022.14-20

thoughts that arise, one of which is biological pressure that arises due to various physical changes. For example, this change in body shape can cause fear and anxiety when facing childbirth for the first time.[3] The relationship between the anxiety level of pregnant women and the risk of giving birth to a low birth weight baby in IndonesiaPublic health centerrappang. Based on this research, it was found that the majority of pregnant women had mild anxiety as many as 22 people (73.0%), moderate anxiety as many as 4 people (13.0%) and as many as 3 people did not experience anxiety (3.0%) which means that most Most pregnant women have mild anxiety during their pregnancy.Pregnancy anxiety refers to worries and fears about pregnancy and the health of the baby. Anxiety in pregnancy can be associated with low knowledge of pregnant women about pregnancy, especially how to deal with anxiety. Preventive action by providing health education to pregnant women in order to increase the knowledge of pregnant women in overcoming their anxiety about the risk of pregnancy.

There are still many pregnancies in Indonesia that are at risk of pregnancy which causes dangers and complications that will occur to the mother and fetuswhichwill cause death, disability and abnormalities in the fetus. Screening for abnormalities in the fetus can be carried out routine ANC examinations so that they can be detected at gestational age. Abnormalities of physical disabilities in infants that are often encountered are congenital heart disease, cleft lip and one of the most common ones is stunting.[4] The incidence of stunting is currently one of the problems that occurs in the world, including in Indonesia, stunting occurs mostly in infants under five, based on 2019 data it was recorded at 27.67% or. According to data from the province of Central Java, until February 2020 there were 156,549 children under five who were stunted. In the province of South Sulawesi in 2019, children under five who experienced stunting were 35.6%.[5]

Education on nutritional needs during pregnancy is very important to prevent various risk factors for pregnancy, lack of awareness about the importance of maternal nutrition will have an impact on efforts made to prevent stunting. Stunting is a failure of child growth and development due to non-fulfillment of nutritional needs that lasts for a long time starting from pregnancy until the age of 24 months. One way to overcome stunting and must be carried out is fulfilling nutrition for pregnant women and controlling food. to increase maternal knowledge in the first 1000 days of life by providing counseling to pregnant women about the risks that may occur with their pregnancy, one of which is the risk of stunting.[6]

Many factors underlie the high incidence of stunting in toddlers, the cause is lack of food intake or even the presence of infectious diseases, other factors are lack of mother's knowledge, wrong parenting, parenting has an important role in realizing optimal child growth, or poor hygiene patterns. . Not many people know that short children are a problem because all short children around the community look like children with normal activities.[7] Many children under five years of age also experience stunting, one of the risk factors for stunting in children under five years old, they are not given exclusive breastfeeding. years needed, so that the child's nutrition is not met and the possibility of infection can occur in the first 1000 days of life so that it becomes an obstacle for children in development.[8]

From a preliminary study of data from the Sembungharjo sub-district, genuk sub-district. The results of a survey and short interviews conducted with 6 pregnant women about the level of anxiety of pregnant women about the risk of stunting, it was found that 2 out of 6 pregnant women could not answer correctly about the definition of stunting, 92.6% of pregnant

women knew what caused stunting. 85.2% of pregnant women do not have anxiety about stunting in their pregnancy. And 100% of pregnant women answered that they had routinely checked their pregnancy at health services. 81.5% of pregnant women answered that they were worried about the baby they were going to give birth to.

METHODS

Design

This study uses a correlation research design with the type of research used is an analytical approach. The design of this study used a cross sectional approach.The purpose of this study was to determine whether there is a relationship between the anxiety level of pregnant women and the risk of stunting

Sample

The population in this study were all pregnant women in Sembungharjo village as many as 27 people. The research sample was 27 respondents using a total sampling of data analysis using the chi square test.

RESULTS

Characteristics of respondents are the average age of 20-29 years (74.1%), the average education of high school respondents is 23 respondents (85.2%), the average gestational age is 13 respondents aged 0-4 months (48.1 %).

Table 1
The category of anxiety level and stunting risk of pregnant women

Indicators	f	%
Anxiety level		
Light	16	59.3
Currently	5	18.5
There is not any	6	22.2
Heavy	0	0
Anxiety level		
Low risk	5	18.5
No risk	22	81.5
High risk	0	0

Table 2
Analysis of the relationship between the anxiety level of pregnant women and the risk of stunting

Anxiety Level	Risk level		*p*
	No risk	Low risk	
There is not any	4	2	
Light	13	3	
Currently	5	0	0.366
Heavy	0	0	
Total	22	5	

Based on the results of calculations using the chi-square test with 27 pregnant women respondents, p 0.366 means that there is no relationship between the anxiety level of pregnant women and the risk of stunting. Because p value > 0.05. So Ho is accepted and Ha is rejected, which means that there is no relationship between the anxiety level of pregnant women and the risk of stunting in Sembungharjo Village, Genuk District, Semarang City.

DISCUSSION

General description of respondent characteristics. Based on the results of the frequency distribution of respondents' characteristics by age, the respondents' ages ranged from 20 years to 49 years, most of the respondents aged (20-29 years) were (74.1%) respondents. Age (30-39 years) as many as (22.2%) respondents. Age (40-49 years) that is (3.7%). Based on the frequency distribution based on the last education, 23 respondents (85.2%) obtained high school education and 4 respondents (14.8%). Based on the frequency distribution based on gestational age, there were 13 respondents (48.1%). 5-6 months as many as 10 respondents (37.0%). 7-9 months as many as 4 respondents (14.8%).

An illustration of the level of anxiety of pregnant women on the risk of stunting. Based on the results of the study, the description of the anxiety level of pregnant women was found that most of the motherspregnant with mild anxiety as many as 16 respondents (59.3%), moderate

anxiety as many as 5 respondents (18.5%), and no anxiety as many as 6 respondents (22.2%). In this study, it was found that most of the respondents had mild anxiety about their pregnancy. Pregnant women already understand the factors that will be experienced during pregnancy and respondents already know how to overcome their anxiety. Based on these studies, it can be concluded that the majority of pregnant women experience mild anxiety during their pregnancy.[9]

The relationship between the anxiety level of pregnant women and the risk of giving birth to a low birth weight baby at the Rappang Public Health Center. Based on this study, it was found that the majority of pregnant women had mild anxiety as many as 22 people (73.0%), moderate anxiety as many as 4 people (13.0%) and as many as 3 people did not experience anxiety (3.0%) which means that most Most pregnant women have mild anxiety during their pregnancy.[10] About 23 respondents who did not experience anxiety (60.5%) and about 15 respondents experienced anxiety (39.5%) based on the results obtained from the study, pregnant women who experienced anxiety were caused by several reasons. factors namely age, level of knowledge and parity.[11]

It was found that of the 23 respondents who had the last education of high school with a total of 23 people (71%) the majority of pregnant women with moderate anxiety levels were 10 people (31.3%) and 5 people with severe anxiety (15.6%). concluded that the lack of education status in pregnant women will cause pregnant women to experience stress more easily compared to pregnant women with higher education.[12] Entitled the level of anxiety of pregnant women in facing childbirth based on health status in the work area of the Jombang Public Health Center, it was found that from 123 respondents, as many as 107 respondents (87%) experienced mild anxiety and 16 respondents moderate anxiety (13%) based on this study, pregnant women have more mild and moderate levels of anxiety in the work area of the Jombang Public Health Center.[13]

In accordance with research from Nurul Rahmitha entitled the anxiety level of third trimester primigravida pregnant women at the Tamanlanrea District Health Center, with the number of respondents as many as 37 people with the result that more pregnant women have mild and moderate levels of anxiety, namely 11 people each (29.7%) while pregnant women who do not have anxiety are 10 people (27%) and pregnant women who have severe anxiety levels are 5 people (13.5%).[14]

An overview of the stunting risk of pregnant women. Based on the results of the research on the risk of stunting in pregnant women, it was found that the majority of pregnant women who did not have the risk of stunting were 22 respondents (81.5%). Whereas5 respondents (18.5%) had a low risk, in this study it was found that the average respondent did not have a stunting risk because most of the respondents had fulfilled their nutritional needs during pregnancy, this can be seen in the stunting risk questionnaire given by researchers to respondents, about knowledge and fulfillment of nutrition during pregnancy for the prevention of stunting in the baby in the womb. Most pregnant women already know stunting and its causes so that the average respondent has fulfilled their nutritional needs to prevent stunting in their pregnancy.

Prevention of stunting from an early age with nutritious food for pregnant women in the Wonocolo sub-district, Surabaya, it was found that from 40 respondents, most of the pregnant women had fulfilled their nutritional and nutritional needs for stunting prevention during pregnancy.[15] Malnutrition in pregnant women can cause poor conditions for babies in the womb, pregnant women who have not met balanced nutrition since the beginning of pregnancy have a risk of giving birth to

stunting babies or other disease disorders based on the research entitled balanced nutrition education for pregnant women in stunting prevention in the village. Karang Bayan, West Lombok Regency, it can be concluded that the more pregnant women who have fulfilled nutrition and nutrition since the beginning of pregnancy can prevent stunting and other baby abnormalities.[16]

Pregnant women who routinely check their pregnancies to health services also prevent the risk of stunting in pregnancy. Titled antenatal care visits related to the incidence of stunting in this study, it was found that most of the respondents routinely checked their pregnancies in health services so that respondents gained knowledge about how to prevent stunting.[17]

Get that as many as 40 pregnant women respondents got respondents with good nutritional status as many as 37 people while 3 pregnant women with poor nutritional status, from the results obtained from the study most pregnant women had fulfilled their nutrition since the beginning of pregnancy. The more pregnant women who have fulfilled their nutritional status since the beginning of pregnancy, the lower the risk of stunting.[18] It was found that some pregnant women already know how to prevent the risk of stunting in their pregnancy by consuming nutritious food and regularly checking their pregnancy to the nearest health service so that pregnant women get education about their health problems and nutritional status during pregnancy.[19]

Relationship between the anxiety level of pregnant women and the risk of stunting. Based on the results of the study, the relationship between the level of anxiety of pregnant women and the risk of stunting shows that there is no relationshipbetween the anxiety level of pregnant women and the risk of stunting. In the results of the analysis of the relationship between the anxiety level of pregnant women and the risk of stunting from 27 respondents, it was found that pregnant women with mild anxiety were 16 respondents (59.3%), moderate anxiety was 5 respondents (18.5%), there was no anxiety as much as 6 respondents (22.2%). And respondents with severe anxiety 0 (0%) and pregnant women who have a risk of stunting, it was found that as many as 5 respondents (18.5%) had low risk while 22 respondents (81.5%) were not at risk.

From the results of the study, it was found that the p value of 0.366 (p>0.05) it can be concluded that there is no significant relationship between the level of anxiety of pregnant women and the risk of stunting, it can be concluded that the level of anxiety of pregnant women does not have a relationship with the risk of stunting. of pregnancy, this is because most pregnant women have met their nutritional needs since the beginning of pregnancy. A person's pregnancy can be a factor that causes pregnant women to experience anxiety but the level of anxiety experienced is different, Local government efforts in preventing stunting in the province of the Bangka Belitung Islands, from the results of this study stunting is caused by poor nutrition experienced by pregnant women and lack of knowledge of pregnant women about health and nutrition before and during pregnancy.

From the results of this study, it was found that the majority of pregnant women had mild anxiety levels, but the anxiety of pregnant women was not about the risk of stunting that would be experienced. But what makes them anxious is when they will face childbirth, thinking about whether the baby's condition is perfect or not. The majority of respondents have not thought about the risk of stunting in their pregnancy. Because the majority of respondents have fulfilled their nutrition and nutrition since the beginning of pregnancy, so they have no worries about the risk of stunting that will be experienced.

Based on the results of the Chi-Square test which aims to determine the relationship between the anxiety level of pregnant women and the risk of stunting in the Sembungharjo sub-district, the value of sig (2-tailed) or p value of 0.366 is obtained because p value > 0.05, then Ho is accepted and Ha is rejected. which means that there is no significant relationship between the level of anxiety of pregnant women and the risk of stunting. This study concluded that there was no relationship between the anxiety level of pregnant women and the risk of stunting in Sembungharjo Village.

CONCLUSION

Pregnant women who have mild anxiety levels are as many as 16 respondents (59.3%), who have moderate anxiety are 5 respondents (18.5%), and there are no anxiety as many as 6 respondents (22.2%). Pregnant women with severe anxiety are 0 (0%). Pregnant women who have no risk are 22 respondents (81.5%). While pregnant women who have a low risk are 5 respondents (18.5%) pregnant women who have a high risk are 0 respondents (0%). Based on statistical tests with the Chi-Square test with 27 pregnant women respondents, the p value of 0.366 means that there is no relationship between the anxiety level of pregnant women and the risk of stunting.

ACKNOWLEDGMENTS

The author would like to thank all pregnant women who have been willing to be respondents in this study.

CONFLICTS OF INTEREST

It is hoped that pregnant women can overcome their anxiety during pregnancy. To prevent stunting, pregnant women should diligently check their pregnancy at the nearest health service and meet nutritional needs from the time of pregnancy to avoid stunting from an early age.

REFERENCES

1. Aisyah RD, Suparni S, Fitriyani F. The 8 th University Research Colloquium 2018 Universitas Muhammadiyah Purwokerto Edukasi Dalam Paket Caring Terhadap Pengetahuan Tentang Education In Caring Package On Knowladge About Anxiety Of The 8 th University Research Colloquium 2018 Universitas Muh. Univercity Res Colloqulum. 2018;346–9.
2. Wardani HW, Agustina R, Damayanti EAF. Tingkat Kecemasan dengan KualitasTidur Ibu Hamil Primigravida Trimester III. Dunia Keperawatan. 2018;6:1.
3. Nelsi Y, Vitayani S, Abbas HH. Analisis Faktor yang Mempengaruhi Kecemasan pada Ibu Hamil terhadap Hubungan Seksual di RSIA Siti Khadijah I Makassar. Wind Heal. 2019;2:128–36.
4. Wicaksono I. Pencegahan Stunting Sejak Dini Di Era Milenial Desa Sukokerto Kecamatan Pajarakan Kabupaten Probolinggo. Abdi Panca Marga. 2019;1:43–7.
5. Indonesia KKR. Riskesdas. Jakarta; 2018.
6. Ekayanthi NWD, Suryani P. Edukasi Gizi pada Ibu Hamil Mencegah Stunting pada Kelas Ibu Hamil. J Kesehat. 2019;10:312.
7. Salamung N, Haryanto J, Sustini F. Faktor-Faktor yang Berhubungan dengan Perilaku Pencegahan Stunting pada Saat Ibu Hamil di Wilayah Kerja Puskesmas Kabupaten Bondowoso. J Penelit Kesehat "SUARA FORIKES" (Journal Heal Res "Forikes Voice"). 2019;10:264.
8. K. Septi Viantri & L. Diah Ayu. Faktor-Faktor yang Berhubungan Dengan Kejadian Stunting Pada Anak Usia Dibawah 5 Tahun. Fakt yang Berhubungan Dengan Kejadian Stunting Pada Anak Usia Dibawah 5 Tahun. 2020;5:196.
9. Siregar NY, Kias CF, Nurfatimah N, Noya F, Longgupa LW, Entoh C, et al. Tingkat Kecemasan Ibu Hamil Trimester III dalam Menghadapi Persalinan. J Bidan Cerdas. 2021;3:18–24.
10. Pratiwi WR. Hubungan Tingkat Kecemasan Ibu Hamil Terhadap Risiko Melahirkan Bayi Berat Lahir Rendah Di Puskesmas Rappang | JIKI Jurnal Ilmiah Kesehatan IQRA. J Ilm Kesehat Iqra. 2019;07:32–7.
11. Rudiyanti N, Raidartiwi E. Tingkat Kecemasan pada Ibu Hamil dengan Kejadian Preeklampsia di Sebuah RS Provinsi Lampung. J Ilm Keperawatan Sai Betik. 2018;13:173.
12. Maki FP, Pali C, Opod H. Gambaran Tingkat

Kecemasan Ibu Hamil Primigravida Trimester III di Klinik Bersalin Sutra Minahasa Selatan. J e-Biomedik. 2018;6:103–10.

13. Siallagan D, Lestari D. Tingkat Kecemasan Menghadapi Persalinan Berdasarkan Status Kesehatan, Graviditas Dan Usia Di Wilayah Kerja Puskesmas Jombang. Indones J Midwifery. 2018;1:104–10.
14. Wolfe DT, Hermanson DR, Ii BAB, Diri AK, Diri PK, Chotimah C, et al. No Titleخلاصه روانپزشکی. Educ Psychol J. 2017;2:65–72.
15. Ningrum NP, Hidayatunnikmah N, Rihardini T. Cegah Stunting Sejak Dini dengan Makanan Bergizi untuk Ibu Hamil. E-Dimas J Pengabdi Kpd Masy. 2020;11:550–5.
16. Pratiwi IG. Edukasi Tentang Gizi Seimbang Untuk Ibu Hamil Dalam Pencegahan Dini Stunting. J Pengabdi Masy Sasambo. 2020;1:62.
17. Hutasoit M, Utami KD, Afriyliani NF. Kunjungan Antenatal Care Berhubungan Dengan Kejadian Stunting. Kesehat Samodra Ilmu. 2020;11:1–10.
18. Safitri A, Gayatri SW, Kartika ID. Tatalaksana Gizi Pada Ibu Hamil Untuk Mencegah Risiko Stunting Pada Anak Di Puskesmas Jongaya. J Pengabdi Kedokt Indones. 2021;2:1–8.
19. Alfarisi R, Nurmalasari Y, Nabilla S. Status Gizi Ibu Hamil Dapat Menyebabkan Kejadian Stunting Pada Balita. J Kebidanan Malahayati. 2019;5:271–8.