



# Literature Review : Differences in the Level of Anxiety in Primigravida and Multigravida in the Active Phase of Labor

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**Abstract.** Labor pain is an unpleasant sensation due to stimulation of sensory nerves. Pain is always subjective. Objective reactions to pain can include grimacing, tachycardia and hypertension. This reaction is used as a pain parameter, however, this symptom is generally not visible in chronic pain. Apart from that, there is no examination that can be used as a pain test. Therefore, every pain complaint from a sufferer must be accepted as an objective statement. This research is a literature review which aims to determine the differences in anxiety levels of primigravidas and multigravidas in the lead up to childbirth. The literature review source uses electronic media with various journals from 2019-2023 from the Google Scholar data base. These articles were found in 5 journals consisting of national journals. These results showed that there were differences in anxiety levels between primigravidas and multigravidas, including mild, moderate and severe levels of anxiety.

Keywords: Childbirth, Anxiety Level, Primigravida, Multigravida.

## 1. Introduction

Maternal Mortality Rate (MMR) Success can be seen from the Maternal Mortality Rate (AKI) indicator. In 2015, MMR was 305/100,000 live births (KH). This figure still shows high maternal mortality, so as an effort to reduce MMR the government launched the safe motherhood initiative program with the aim of ensuring that all women receive the care they need so that they are safe and healthy during pregnancy and childbirth [1].

Anxiety can have a bad impact on pregnancy, but not every pregnant woman have bad experience effects when facing anxiety because each individual has a different immune system. According to WHO (2020), around 10% of pregnant women experience depression and this condition is higher in developing countries, reaching 15.6% during pregnancy and 19.8% after giving birth. In pregnant women in China, anxiety symptoms increased by 59% based on a pre-COVID-19 cohort study who assessed pregnant women with the same demographic data. 29% of China's population said they experienced moderate to severe anxiety [2].

According to the World Health Organization (WHO), maternal mortality remains very high, with around 810 women dying every day from complications during pregnancy or childbirth worldwide. Approximately 295,000 women died during pregnancy and after giving birth in 2017. 94% of all maternal deaths occurred in low- and lower- middle-income countries. The global maternal mortality rate in 2013 (i.e. the number of maternal deaths per 100,000 live births) decreased by only 2.6% per year. As many as 80% of maternal deaths are the result of increased complications during pregnancy, childbirth and after delivery. Approximately 99% of all maternal deaths occur in developing countries. Nearly 90% of maternal deaths occur during childbirth and immediately after delivery [3].

Mothers experience psychological disorders during childbirth, namely anxiety, which according to Mc Nerney and Grenberg states that anxiety is a physical, mental and chemical reaction of the body to situations that are scary, surprising, confusing, dangerous and disturbing to someone. Psychologically, increased anxiety is influenced by coordination and reflex movements. Difficulty listening or disrupting relationships with others. Anxiety can make individuals withdraw and reduce engagement with others [4].

According to Bobak (2015), what causes bad behavior is related to a woman's readiness to face childbirth. If a woman is prepared for the physical and mental changes experienced during pregnancy, it will be easier to adjust to pregnancy and childbirth. This is in accordance with the results of this study, where multigravidas experienced lighter feelings of anxiety and good behavior because multigravidas had better mental readiness because they had experienced a previous pregnancy [5].

Every married couple dreams of having a child, namely a child, but quite a few married couples are still not ready to have children. Of course this can cause anxiety. Anxiety is a condition that is felt as something bad, characterized by feelings of worry that something unpleasant will happen. Various things can cause anxiety, for example health, social relationships, career, environmental conditions which are a source of worry [6].

There are several ways that can be done to reduce anxiety in pregnant women to maintain pregnancy and the birth process, namely by conducting counseling. Through outreach such as using leaflets, mothers can find out how to process and prepare for a good and comfortable birth, so that the mother's knowledge can increase and it is hoped that this can reduce the mother's anxiety before giving birth [7].

According to psychoanalytic theorists, the future child is a blank screen onto which the mother projects her hopes and fears. Connected with previous research, there is a large influence between the husband's role on his wife's pregnancy process. And the results of this research state that this has the potential to reduce anxiety and can make mothers calm when facing childbirth. It is stated that the husband's involvement from the start of pregnancy will definitely make it easier for his partner to undergo and deal with various changes during pregnancy. Because for men the pregnancy process is proof of their potential, and is a dynamic that plays a big role in becoming a father [8].

## 2. Method

This research is a literature review which aims to determine the differences in anxiety between primigravida mothers and multigravida mothers in facing childbirth. The review process begins by identifying journal articles that are relevant to the research topic. The articles to be reviewed were obtained through searches in electronic databases such as Google Scholar. Article searches are limited to publications from 2019-2023.

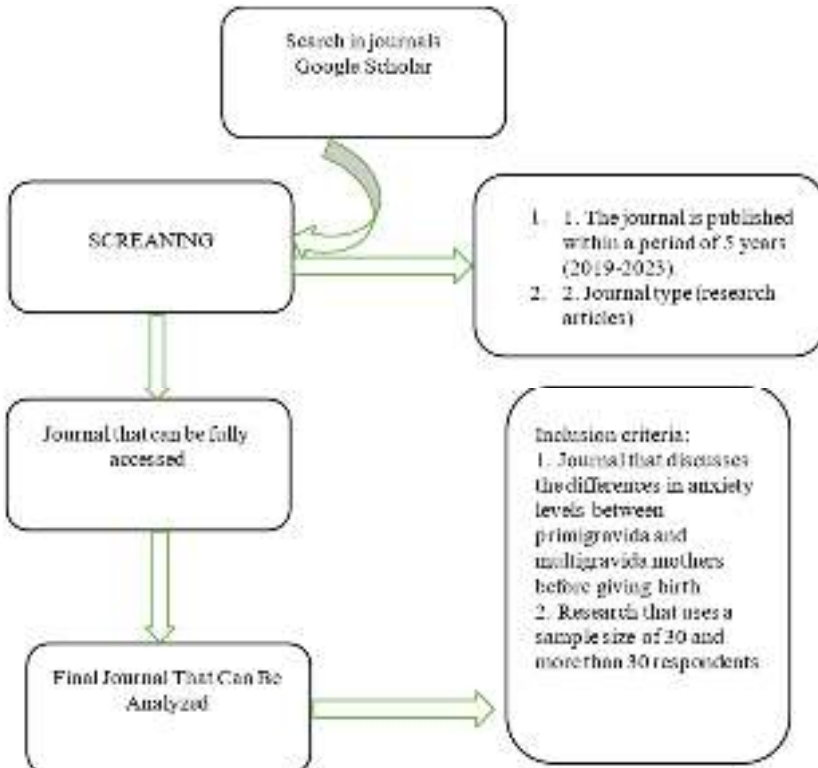


Fig 1. Prisma : Flow for creating a literature review

## 3. Results and Discussion

Literature searches via electronic databases produced 10 articles that had the potential to be reviewed. Further identification was carried out in more detail to determine articles that were relevant and met the inclusion criteria in this literature review. From this identification, 5 articles were obtained which will be reviewed in this research.

The five articles selected to be reviewed in this research are the results of research by the authors [9] [10] [8] [11] [12]. Three of the five articles are cross sectional research, one article uses a simple random sampling method and one article uses a quantitative method.

Based on the first journal research entitled "differences in levels of anxiety in facing childbirth between primigravida and multigravida" by [9]. The results of the analysis show that 6 people (27.3%) in the group of primigravida respondents experienced mild levels of anxiety, 6 people (27.3%) experienced severe levels of anxiety, and 10 people (45.4%) experienced moderate levels of anxiety. Meanwhile, in the group of multigravida respondents, 2 people (9.5%) experienced severe levels of anxiety, 4 people (19.0%) had moderate levels of anxiety, and 15 people (71.4%) had mild levels of anxiety.

The second research journal is a research journal entitled "differences in anxiety levels between primigravida and multigravida pregnancies in facing childbirth" by (Iii et al., n.d.). results of the analysis of differences in anxiety levels between multigravida mothers with hypertension and those without hypertension using the Mann Whitney test analysis of primigravidas and multigravidas, both those who experience hypertension and those who do not experience hypertension in facing childbirth.

The third research journal is a research journal entitled "differences in the level of pain in the first stage of labor in normal primigravida and multigravida mothers in the independent practice of midwifer Rahmawati Palembang in 2020" by [10] The results of the analysis showed that of the 21 mothers, 9.5% of primigravida mothers experienced mild pain, 42.9% of mothers experienced moderate pain, 47.6% of primigravida mothers experienced severe pain compared to mild and moderate pain. Meanwhile, of the 17 mothers, 17.6% of multigravida mothers experienced mild pain, 5.9% of multigravida mothers experienced severe pain and 76.5% of mothers experienced moderate pain compared to mothers who experienced mild and severe pain.

The fourth research journal is a research journal entitled "Differences in anxiety levels in primigravidas and multigravidas at RSIA Kasih Ibu Manado" [8]. The results of the analysis showed that the age distribution of respondents ranged from 20 years to 37 years with a total of 30 respondents. From these results, it was found that the age of most primigravidas was around 25-30 years, and multigravidas were mostly around 26-37 years. It is said that adult human behavior is different from children. The results of the study showed that 66.7% of pregnant women did not experience anxiety. This can also be influenced by the feeling that pregnancy is an expression of one's sense of self-realization and identity as a woman, a creative experience and a matter of pride as a woman. 1.10 Based on the distribution of gestational age in the first trimester (<14 weeks) there was one respondent, in the second trimester (14 – 28 weeks) there were three respondents and in the third trimester (>28 weeks) there were 26 respondents. It is stated that in the pregnancy process, especially in the second and third trimesters, there are various processes that are generally less liked by pregnant women, for example quickening (fetal movement) and adaptation to changes in the

pregnant woman's body habitus.

The fifth research journal is a research journal entitled "Differences in Labor Pain Levels in the Active Phase of First Stage in Primiparas and Multiparas at the Siti Reswari Padang Maternity Clinic" by [12]. The results of the analysis showed that 16 people (84.2%) experienced severe pain in the active phase of labor in the first stage of labor in primigravida mothers. More than half of the labor pain in multigravida mothers experienced moderate pain as many as 14 people (58.3%), there were differences in the level of labor pain in the first stage of the active phase between primiparas and multiparas.

#### 4. Conclusion

From this journal the author has concluded that there is a level of anxiety in both primigravidas and multigravidas. There are levels of anxiety, namely mild anxiety, moderate anxiety and severe anxiety. The influence of anxiety from internal factors and external factors which give anxiety to primigravida and multigravida mothers.

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