



ORIGINAL RESEARCH ARTICLE

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## STUDY TO ASSESS THE FEAR OF CHILDBIRTH AMONG PRIMIGRAVID WOMEN (PILOT STUDY)

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### ARTICLE INFO

#### Article History:

Received 23<sup>rd</sup> May, 2017  
Received in revised form  
27<sup>th</sup> June, 2017  
Accepted 20<sup>th</sup> July, 2017  
Published online 30<sup>th</sup> August, 2017

#### Keywords:

Primi Gravid,  
Last Menstrual Period,  
Expected Date of Delivery,  
Childbirth Fear.

### ABSTRACT

Pregnancy is a wonderful period in a women's life and she spends each and every day in pleasant anticipation, waiting to hold her bundle of joy in her arms, Even though it is a time of great happiness and fulfilment of the life, pregnancy causes a lot of mental conflicts and feelings which is a natural trend of this period. The main aim of the study to assess the level of fear related to child birth. A quantitative research approach was adopted. A research design adopted for this study was Quantitative randomized control & experimental pre ,post design . The primigravida mothers with Last menstrual period (LMP) from may last to June Ist week were chosen as sample in this study. The total sample size were 24 , 12 in control group (Primi gravid mothers) they were taken in Kolathur health post I & 12 experimental group samples were taken in Ayanavaram health post I. Sample was selected by using simple random sampling technique. Data were analyzed by using descriptive and inferential statistics, The results showed that there is an statistically difference found in experimental pre and post value of fear of childbirth ( $t=31.159, P<0.001$ ) compare to control pre and post value ( $t=0, p=1$ ) The difference in the mean values was statistically significant ( $P<0.001$ ). Therefore reduction of fear related to childbirth especially in primi gravid mothers is utmost important.

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Citation: Mrs. Mahalakshmi, T. and Dr. Hepziba Kirubamani. 2017. "Study to assess the fear of childbirth among primigravid women (pilot study)", International Journal of Development Research, 7, (08), 14507-14509.

### INTRODUCTION

Childbirth is one of the most memorable and rewarding event of a couples life. No matter how often a woman gives birth, each experience is an intimate and unique celebration of life. Childbirth fear is reported to affect around 20% of women .Studies have shown that anxiety due to labour in women may lead to obstetrical complications like Pre-Eclampsia, forceps deliveries ,prolonged and precipitated labour, postpartum haemorrhage, manual removal of theplacenta, foetal distress, preterm labour and child birth abnormalities.<sup>1</sup>Hence, maternal death is often not a result of technical incompetence or negligence, but also due to lack of health counselling, lack of health education of the mothers and family about labour. Limited knowledge to the primi gravid mothers about labour increases her anxiety. Since it is a first exposure to the mothers, the changes that take place in her body will create anxiety and fear.

To overcome this and prevent occurrence of anxiety in primi gravidae about labour, she should be educated about labour and make her to be prepared for childbirth.. The women those who attend delivery for the first time definitely would have some sort of fear and anxiety. This fear is due to lack of knowledge and idea about what is happening around her and it will lead to lack of Cooperation during delivery (Hema Swaroopa, 2017). Certain levels of fear and anxiety about childbirth are expected, Especially among primi mothers. However, problems arise when these feelings negatively impact a Woman's decisions and perceptions about the birth process (Jaypee, 2010). Childbirth- related fear (CBRF) has been described as a negative cognitive assessment of the anticipated childbirth, feelings of fear and anxiety when facing birth, very negative feelings towards birth, very negative feelings towards birth and the pathological dread and avoidance of childbirth- 'tocophobia'

The actual birth of a child that is known as labour or parturition is a major life process for women . Fear of labor pain is one of the most important reasons that make women go for cesarean section (Jebarna Kiruba Mary, 2017). An increasing number of women wish to deliver by caesarean section without a medical indication and it has been suggested that such requests are because of fear of childbirth (Healthizen, 2009). A woman’s ability to adapt to the changes and challenges of pregnancy is unique and the level of the stress she experiences affects the outcome of pregnancy (Girija Kalayil Madhavan prabhakaran, 2013). Pregnant women become more focused about labor and birth of a child as they approach the final phase of pregnancy. Midwives play a vital role in helping pregnant women to overcome their fear and anxieties about labor and childbirth. Various educational programs and methods have been designed to help pregnant women and both the parents, in general, to know the different aspects of labor and delivery (Hofberg, 2004)

**MATERIALS AND METHODS**

The main objective of this study is to assess the level of Fear related to childbirth among antenatal women. A quantitative Randomized control& Experimental pre Post design was adopted for this study. Samples were Primi gravid women attending antenatal clinic in Ayanavaram urban Health post I & kolathurhealth post under Chennai corporation . High risk pregnancies were excluded. Antenatal women who met the inclusion criteria were selected through random sampling to the study. Sample size were 12 . In present study the researcher had constructed a structured baseline variables in Section- A & Section –B consists of with 8 items like age, religion, education, occupation, income etc. & Section –B consists of Wijma Delivery Expectancy Questionnaire (WED-Q Version-A) to assess the fear of child birth The study was conducted after the approval of Institutional Ethical Committee (24/04/2015/IEC/SU) in Saveetha University, Chennai. Purpose of the research study was explained to all the participants. An informed written consent was obtained from each participant before the data collection. During 24<sup>th</sup> weeks of gestation, Wijma delivery expectancy questionnaire is administered for both control and experimental group mothers to assess the fear of labour among primigravid mothers ,followed by videos on normal child birth process was showed to only experimental group mothers in order to reduce the fear of labour. After 7 days post test was conducted for both groups.For the control group mothers routine ante natal care services were provided. At end outcome or mode of labor were assessed. Fear of childbirth was assessed by Wijma Delivery Expectancy Questionnaire (WED-Q Version-A). The W-DEQ (version A) measures the Fear of childbirth. The rating scale which consists 33-items has the score ranging from 0 to 5 per item, i.e., ‘ Not at all’ to ‘extremely’ with a minimum score of 0 and a maximum score of 165. The higher the score, the greater the fear of childbirth manifested. Validity and reliability was obtained for the tool. Then they were asked to self rate their level of anxiety related to childbirth. Each rating score meaning was explained. The data were analyzed using an Descriptive & Inferential statistics.

**RESULTS**

In current study majority of the (67%) experimental primi gravid women were in the age group of 21-23 years, 67%

mothers were completed their higher education level , 67% were belonged to Hindu religion, 95% were housewives. In regard. of family system majority (58 %) were belonged to Nuclear family, 83 % marriages were consanguineous , in regard of weight majority of mothers were in 45-50 kg & regarding height of the mothers 58 % were in 150cm-155cm.(Table 1)

**Table 1 .Demographic variables of Primi gravid Mothers in experimental group**

S.No	Demographic Variables	Frequency	Percentage
1.	1. Age of the Mother		
	a)21-23 years	8	67
	b)24- 26 years	4	33
	c)27-30 years		
	2.Educational Status		
	I)Non Literate	2	16.5
	II)Primary education	8	67
	III)Higher education	2	16.5
	V) Graduates		
	3.Occupation		
I)Housewifes	9	75	
II)Company Worker	3	25	
III)Skilled Labour			
4.Religion			
I)Hindu	8	67	
II)Muslim	1	8	
III)Christian	3	25	
IV)Others		-	
5.Income			
I) Rs 1000-3000	1	8	
II) Rs 3001-5000	7	58	
III) Rs5001-7000	2	16.5	
IV) Rs 7001-10000	2	16.5	
6.Type of Family			
I)Nuclear	7	58	
II)Joint	5	42	
7.Type of Marriage			
I) Consanguineous	2	17	
II)Non Consanguineous	10	83	
8.Sources Of Health Information			
I)Family members	7	58	
II)Health Professionals	3	25	
III)Friends			
IV) Mass Media	2	17	
9.Weight of the mother			
i)45-50kg	6	50	
ii)50-55kg	2	17	
iii)55-60kg	3	25	
iv)Above60kg	1	8	
10.Height			
i)150cm-155	7	58	
ii)155-160cm	3	25	
iii)160cm-170cm	2	17	
iv)above 170cm			

**Table-2 Level of Fear of childbirth among Primi gravid women**

Fear category	Pretest		Post Test	
	Control	Experimental	Control	Experimental
Mild or low	(0)	(0)	(0)	11(92%)
Moderate	(0)	(1)(8%)	1 (8%)	1(8%)
High	(12)(100%)	(11)(92%)	(11)(92%)	0
Total	12	12	12	12

The present study revealed that level of fear of child birth in pre test 100% of the mothers in the control group had high level of fear,

**Table.3 Comparison of Pre& post scores of fear of child birth of control& experimental Groups by parametric& Non parametric tests**

S.NO	Parameter	Statistical test	Statistical Values
1.	Fear of child birth	Paired 't' test	Control pre & Experimental Pre test (t=0,p=1) Value
Mann-Whitney rank sum test		Control post & Experimental post test (t=31.159,P<0.001) Control pre & Experimental Pre test (t=160.50,p=0.563) Value	
Control post & Experimental post test (t=222.000,p<0.001) n=12			

In same way 92% of experimental mothers in pretest had high level of fear .In post test 92% of Control group mothers had high level of fear. But in post test 92% mothers in experimental group had mild or low fear about their child birth .It shows that there was no reduction of fear of child birth in control group. (Table 2.). The fear of childbirth was analyzed by both parametric & Non parametric (paired 't' test & Mann-Whitney rank sum test) test. The results showed that there is an statistically difference found in experimental pre and post value of fear of childbirth (t=31.159,P<0.001) compare to control pre and post value (t=0,p=1) The difference in the mean values was statistically significant (P<0.001) and also Mann-Whitney rank sum test showed control pre and experimental pre test value of child birth fear (t=160.50,p=0.563) was not statistically significant. But comparing control post value the experimental post test value (t=222.000,p<0.001) shows statistically difference found at the level of p<0.001, the results revealed that in post test fear of child birth was reduced in experimental group mothers compare to control group (Table 3 ).The outcome of delivery was assessed for both groups in the form of mode of labour, out of 12 mothers in experimental group (attended birth preparedness class or Lamaze includes performing antenatal exercise) 8 (67%) had normal delivery and 4 mothers (33%) had caesarean section. In control Group out of 12 mothers 3(25%) had normal delivery and 9 (75%) had caesarean section

## DISCUSSION

High level child birth fear may leads to unfavourable labour outcomes such as prolonged labour, preterm labour, low birth weight and unplanned caesarean sections. The findings suggest that child birth fear is a core predictor of many adverse labour outcomes<sup>7</sup>. In this current study routine screening of fear of childbirth was integrated in prenatal care& Specific interventions were implemented to minimize the fear of childbirth & promoted better labour outcomes in primigravid mothers.

## Conclusion

Antenatal fear must be taken care as priority to reduce the emerging number of caesarean sections & other adverse labor outcomes. Fear of child birth has serious consequences and also causes negative perceptions of labor which in turns of maternal request for caesarean section. To reduce the fear related to childbirth especially in primi gravid mothers and to prevent its consequences is the utmost important (Precilla, 2016). Therefore to reduce the fear of childbirth authors showed videos on child birth. So study proved that intervention given by author helped in reduction of childbirth fear.

## Conflict Of Interest

Conflict of interest declared none.

## Acknowledgement

Author express sincere thanks to all the experts for their valuable suggestions..1. Dr. Hepshibha Kerubhamani, Saveetha Medical College and Hospital, Saveetha University, Thandalam. 2. Dr. P. Mangala Gowri, Principal, Saveetha college of Nursing, Saveetha University, Thandalam. 3. Dr. Vijayaragavan, Ph.D, Director of Research, Saveetha University.

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