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The Relationship Between Pregnant Women's Anxiety About Having Sex During Pregnancy At Amini Dalan Lidang Clinic, Panyabungan District Mandailing Natal Country Year 2023

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ABSTRACT

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physical factors, emotions, sexual dysfunction, and myths about sex while pregnant. During pregnancy most of the desire to have sex does not change, in fact, increasing, because it is influenced by the increase in the hormone estrogen. Therefore, sexual intercourse during pregnancy is not a nuisance. Sexual intercourse during pregnancy can still be done, but for the first trimester of pregnancy. The frequency of having sex should not be done as often as usual. If sexual intercourse is forced in the first trimester of pregnancy, it is feared that spontaneous miscarriage may occur. This study aims to determine the relationship between the level of anxiety of pregnant women about having sex during pregnancy at the Amini Clinic in Lidang, Panyabungan District, Regency Mandailing Christmas Year 2023 . The type of research used is a descriptive study with a cross sectional approach The population in the study was pregnant who checked their pregnancy at the midwife Amini clinic in lidang. The sampling technique uses Random Sampling with a sample size of 41 people. Data collection using primary and secondary data. Data analysis using chi-square test with significant level of p<0.05. The results of the analysis showed that there was a relationship between the level of anxiety of pregnant women about having sex during pregnancy with a value of P = 0.001 where P = <0.05. It is expected that pregnant women are advised to still want to have sexual relations during pregnancy appropriately to maintain family harmony and meet physiological needs and for health workers at the midwife clinic Amini can provide counseling about sexuality during pregnancy either by giving counseling on sexuality during pregnancy either by giving IEC at the time of pregnancy check-up or counseling at the posyandu.

Sexual intercourse during pregnancy is individual and is influenced by

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1. INTRODUCTION

Sexual intercourse during pregnancy is individual and is influenced by physical factors, emotions, sexual dysfunction, and myths about sex while pregnant. During pregnancy most of the desire to have sex does not change, in fact, increasing, because it is influenced by the increase in the hormone estrogen. Therefore, sexual intercourse during pregnancy is not a disorder (Susanti, 2018). Sexual intercourse during pregnancy can still be done, but for the first trimester of pregnancy. The frequency of having sex should not be done as often as usual. If sexual inter course is forced in the first trimester of pregnancy, it is feared that spontaneous miscarriage can occur according to Pangkahila (2016). Based on data from the WHO (World Health Organization), shows that every day, About 810 women died as a result of pregnancy and childbirth. From 2000 to 2017, the maternal mortality ratio fell by about 38% worldwide. 94% of all maternal deaths occur in low- and middle-income countries. Skilled care before, during and after childbirth can save the lives of women and newborns (WHO, 2019). Based on Indonesian

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data, 40% of women experience a decrease in sexual desire during the first trimester and second trimester of pregnancy. However, only 9% of husbands said loss of sexual desire in the first trimester and 17% in the second trimester, and as many as 75% and 64% of both women and men said loss of sexual desire in the later stages of pregnancy (IDHS, 2019).

Based on the Health Profile of North Sumatra in 2012, the coverage of pregnancy examination for pregnant women in North Sumatra since 2007 has increased from 77.95% to 85.92% in 2012, namely for IP coverage of 92.74% and for K4 coverage of 85.92% from 25 districts and 8 cities in North Sumatra but this increase seems slow because the increase is only about 2% every year. With this increase, it is feared that North Sumatra will not be able to achieve the SPM target in the health sector, which is 95% in 2019 (North Sumatra Health Profile, 2019). The Health Profile of Mandailing Natal in 2020 was reported to be 153 people or 103,000 per 100,000 live births, consisting of 47 deaths of pregnant women (30.71%), 44 deaths of maternity mothers (27.45%), postpartum maternal deaths of 62 people (40.52%) (Mandailing Natal Health Office, 2020). True facts from myths in society include; The myth that having sex during pregnancy will cause miscarriage and injure the fetus. In fact, in a normal pregnancy, sex will not cause miscarriage or injure the fetus, since the fetus is in a strong amniotic sac. In addition, there is mucus that coats the cervix as well as a fence (barrier) when germs enter; The myth that orgasms resulting in miscarriage or premature birth. The fact of the myth, that orgasm will indeed make the stomach contract due to the influence of the hormone prostaglandin in the semen fluid, but this contraction is different from contractions before labor and this contraction is not dangerous for a normal pregnancy (Sylvia, 2016).

The myth that sexual intercourse will interfere with the comfort of the baby's "sleep", the fact that the fetus actually enjoys a "gentle shake" when a married couple has sex. The fetus cannot see, understand and feel what is happening. So the perceived fetal movement is a normal movement (Rahmawati, 2010). The results of Sri Rahayu's research (2017) in one month sexual intercourse was carried out 3-4 times (43.5%), 5-6 times (14.5%), 7-8 times (6.5%) and there were 2.5% did not have sexual intercourse during pregnancy. Another study conducted by Permata (2018) where out of 33 women, 23 women experienced Decreased sexual desire, 6 women experienced an increase, while the other 3 women avoided sexual intercourse during pregnancy. From the initial survey data, researchers conducted interviews with 10 pregnant women, and the results of the interviews were known to 7 pregnant women said they were afraid of having sex during pregnancy and felt dissatisfied, experiencing discomfort or pain during sexual intercourse and 3 pregnant women claimed not to have sex while pregnant at all, for fear of miscarriage. Based on the background and description above, researchers are interested in conducting a study entitled "The Relationship Between Anxiety Levels of Pregnant Women About Having Sex During Pregnancy at Amini Clinic in Lidang, Panyabungan District, Mandailing Natal Regency in 2023"

2. METHOD

The type of research used is a descriptive study with a cross sectional approach which aims to identify the relationship between the level of anxiety of pregnant women about having sex during pregnancy at the Amini Dalan Lidang Clinic, Panyabungan District, Mandailing Natal Regency in 2023. The population in this study was all pregnant women at the Amini Midwife Clinic which amounted to 70 people. With the slovin sampling formula, a sample of 41 respondents was obtained. The study was conducted at the Amini Midwife Clinic in December-January 2023. Before the data is analyzed, validity and reliability tests are carried out. Data analysis used univariate and bivariate analysis. Univariate analysis is to get an idea of the frequency distribution of respondents. And Bivariate analysis is an analysis that has The purpose is to test the difference and measure the relationship between two research variables, namely between the independent variable and the dependent variable. Bivariate analysis in this study used the chi-square test with a confidence level of 95%. Guidelines in accepting hypotheses. If the probability value (p) \leq 0.05 then H0 is rejected, if (p) >0.05 then H0 fails to



be rejected. Data is presented in tabular form.

3. RESULTS AND DISCUSSION

To identify the relationship between pregnant women's anxiety levels about having sex during pregnancy, researchers used questionnaire sheets. The following will be described about the results of the study, namely the characteristics of respondents, the Relationship between the Level of Anxiety of Pregnant Women About Having Sex During Pregnancy at the Midwife Clinic Amini Dalan Lidang Kec. Panyabungan Kab. Mandailing Natal Year 2023

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Characteristics of respondents in the study included age, education, source of information, occupation, parity, and anxiety levels. It can be described in the following table:

Tabel 1. Frequency Distribution of Respondent Characteristics based on Amini Dalan Lidang Midwife Clinic in 2023

| No | Characteristics of Respondents | N | % |
|----|--------------------------------|----|-------|
| | Age | | |
| 1 | < 20 Tahun | 3 | 7,3 |
| 2 | 21 – 35 Tahun | 36 | 87,8 |
| 3 | >35 Tahun | 2 | 4,9 |
| | Jumlah | 41 | 100,0 |
| | Education | N | % |
| 1 | SD | 6 | 14,6 |
| 2 | Junior | 12 | 29,3 |
| 3 | SMA | 17 | 41,5 |
| 4 | Akademi | 6 | 14,6 |
| | Jumlah | 41 | 100,0 |
| | Resources | N | % |
| 1 | Mass media | 2 | 4,9 |
| 2 | Print | 23 | 56,1 |
| 3 | Health Workers | 13 | 31,7 |
| 4 | Family | 3 | 7,3 |
| | Jumlah | 41 | 100,0 |
| | Paritas | | • |
| 1 | Primipara | 26 | 63,4 |
| 2 | Scundipara | 11 | 26,8 |
| 3 | Multipara | 4 | 9,8 |
| | Jumlah | 41 | 100,0 |
| | Anxiety Level | | |
| 1 | No anxiety | 5 | 12,2 |
| 2 | Mild anxiety | 8 | 19,5 |
| 3 | Moderate anxiety | 18 | 43,9 |
| 4 | Severe anxiety | 10 | 24,4 |
| | Jumlah | 41 | 100,0 |
| | Work | | |
| 1 | IRT | 27 | 65,9 |
| 2 | Private Employees | 4 | 9,8 |
| 3 | Self employed | 5 | 12,2 |
| 4 | PNS | 2 | 4,9 |
| 5 | Laborer | 3 | 7,3 |
| | Jumlah | 41 | 100,0 |

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examine the relationship of independent variables including age, education, sources of information, parity, with the dependent variable, namely the level of anxiety of pregnant women during sexual intercourse, bivariate analysis uses the chi-square test with α =0.05 which is described as follows:

Tabel 2. Results of Analysis of Characteristics of Respondents with Anxiety of Pregnant Women During Sexual Intercourse at Amini Midwife Clinic in Lidang in 2023

| No | Characteristics of Respondents | Anxiety Level | | | | | | | | |
|----|-----------------------------------|---------------|------|--------------|------|---------------------|------|-------------------|------|---------|
| | | No anxiety | | Mild anxiety | | Moderate anxiety | | Severe anxiety | | p-value |
| | | \mathbf{F} | % | F | % | F | % | \mathbf{F} | % | |
| | Age Mother | | | | | | | | | _ |
| 1 | <20Tahun | 0 | 0 | 2 | 4,9 | 0 | 0 | 1 | 2,4 | 0,019 |
| 2 | 20-35 Tahun | 5 | 12,2 | 4 | 9,8 | 18 | 43,9 | 9 | 22,0 | |
| 3 | >35 Tahun | 0 | 0 | 2 | 4,9 | 0 | 0 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Education | | | | | | | | | |
| 1 | SD | 0 | 0 | 1 | 2,4 | 2 | 4,9 | 3 | 7,3 | |
| 2 | SMP | 0 | 0 | 3 | 7,3 | 7 | 17,1 | 2 | 4,9 | 0,000 |
| 3 | SMA | 0 | 0 | 4 | 9,8 | 8 | 19,5 | 5 | 12,2 | |
| 4 | Akademi | 5 | 12,2 | 0 | 0 | 1 | 2,4 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Resources | | | | | | | | | |
| 1 | Mass Media | 0 | 0 | 0 | 0 | 2 | 4,9 | 0 | 0 | |
| 2 | Print | 5 | 12,2 | 6 | 14,6 | 9 | 22,0 | 3 | 7,3 | 0,040 |
| 3 | Health Worker | 0 | 0 | 2 | 4,9 | 7 | 17,1 | 4 | 9,8 | |
| 4 | Family | 0 | 0 | 0 | 0 | 0 | 0 | 3 | 7,3 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Paritas | | | | | | | | | |
| 1 | Primipara | 5 | 12,2 | 4 | 9,8 | 14 | 34,1 | 3 | 7,3 | |
| 2 | Scundipara | 0 | 0 | 4 | 9,8 | 3 | 4 | 9,8 | 22,0 | 0,033 |
| 3 | Multipara | 0 | 0 | 0 | 0 | 1 | 2,4 | 3 | 7,3 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |
| | Work | | | | • | | · | | • | |
| 1 | IRT | 2 | 4,9 | 5 | 12,2 | 12 | 29,3 | 8 | 19,5 | |
| 2 | Private Employees | 1 | 2,4 | 1 | 2,4 | 2 | 4,9 | 0 | 0 | |
| 3 | Self Employed | 0 | 0 | 0 | 0 | 3 | 7,3 | 2 | 4,9 | 0,022 |
| 4 | Buruh | 0 | 0 | 2 | 4,9 | 1 | 2,4 | 0 | 0 | |
| 5 | Laborer | 2 | 4,9 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Jumlah | 5 | 12,2 | 8 | 19,5 | 18 | 43,9 | 10 | 24,4 | |

From the table above, it shows that based on age, the majority of respondents aged 20-35 years experienced moderate anxiety levels as many as 18 respondents (43.9%). The results of the chi-square statistical test show a p-value of 0.019, meaning that there is a relationship between age and the level of anxiety of pregnant women during sexual intercourse. Based on education, the majority of respondents with a high school education experienced moderate anxiety levels as many as 8 respondents (19.5%). The results of the chi-square statistical test show a p-value of 0.000, meaning that there is a relationship between education and the level of anxiety of pregnant women during sexual intercourse. Based on information sources, the majority of respondents received information from print media experiencing moderate anxiety levels as many as 9 respondents (22%). The results of the chi-square statistical test show a p-value of 0.040, meaning that there is a relationship between information sources and the level of anxiety of pregnant women during sexual intercourse.

Based on parity, the majority of primiparous respondents experienced moderate anxiety levels as many

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as 14 respondents (34.1%). The results of the chi-square statistical test showed a p-value of 0.033, meaning that there was a parity relationship with the level of anxiety of pregnant women during sexual intercourse. Based on work, the majority of housewives experienced moderate anxiety levels as many as 12 respondents (29.3%). The results of the chi-square statistical test show a p-value of 0.022, meaning that there is a relationship between work and the level of anxiety of pregnant women during sexual intercourse.

Discussion

The Relationship Between Maternal Age and Anxiety of Pregnant Women During Sexual Intercourse at Amini Midwife Clinic in Lidang in 2023 The results of the analysis showed that the majority of respondents aged 20-35 years experienced moderate anxiety levels as many as 18 respondents (43.9%). The results of the chi-square statistical test showed a p-value of 0.019, meaning that there is a relationship between age and the level of anxiety of pregnant women during sexual intercourse. Struat (2017) states that someone who is younger will be more susceptible to stress-related disorders than someone older. Age is one of the factors that can cause anxiety in a person. In general, a person's anxiety develops in adolescence and early adulthood, this condition can become panic in the late teens to the age of 30 years. Sarwono (2018) the age of pregnant women is the age of mothers obtained through filling out questionnaires. In the period of healthy reproduction it is known that the safe age for pregnancy and childbirth is 20-30 years. Maternal mortality in pregnant women and childbirth at the age of under 20 years was 2 to 5 times higher than maternal mortality that occurred at the age of 20 to 29 years. Maternal mortality increases again after the age of 30 to 35 years. The age of a woman at the time of pregnancy should not be too young and not too old. Age less than 20 years or more than 35 years, high risk for childbirth. The researchers' assumption is that at the age of these respondents on average at the age of 20-35 years. Factors that influence stress or anxiety are at a young age. Someone who is younger will be more susceptible to stress-related disorders than someone older. Anxiety arising from the husband's past experience of the same thing that can cause anxiety.

The Relationship between Education and Anxiety of Pregnant Women During Sexual Intercourse at the Amini Midwife Clinic in Lidang in 2023The results of the analysis showed that the majority of respondents with a high school education level experienced moderate anxiety levels as many as 8 respondents (19.5%). The results of the chi-square statistical test show a p-value of 0.000, meaning that there is a relationship between education and the level of anxiety of pregnant women during sexual intercourse. Higher education has implications for knowledge and good attitudes. High school education is considered to have better knowledge about pregnancy and pregnant women can find extensive information about their pregnancy. The level of education influences awareness of the importance of health both in oneself and in one's environment which can drive the need for health services, including the importance of information about sexual relations during pregnancy. Information obtained from formal and informal education can have an immediate impact that can increase knowledge (Notoatmodjo, 2016).

The Relationship of Information Sources with Anxiety of Pregnant Women During Sexual Intercourse at Amini Dalan Lidang Midwife Clinic in 2023

The results of the analysis showed that the majority of respondents received information from print media experienced moderate anxiety levels as many as 9 respondents (22%). The results of the chi-square statistical test show a p-value of 0.040, meaning that there is a relationship between information sources and the level of anxiety of pregnant women during sexual intercourse.

Information sources are everything that can be used by a person so that they know about new things, and have characteristics that can be seen, read and studied, researched, studied and analyzed utilized and developed in educational, research, laboratory activities, transformed to others.

According to the author's assumption, the source of information obtained by pregnant women comes from print media such as books, magazines, newspapers and others. By reading a lot, pregnant women can reduce their anxiety levels during sexual intercourse during pregnancy. And the more you read and find out, the more you can reduce your anxiety levels. Because it has obtained a lot of information

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obtained.

Work Relationship with Anxiety of Pregnant Women During Sexual Intercourse at Amini Dalan Lidang Midwife Clinic in 2023

The results of the analysis showed that the majority of housewives respondents experienced moderate anxiety levels as many as 12 respondents (29.3%). The results of the chi-square statistical test show a p-value of 0.022, meaning that there is a relationship between work and the level of anxiety of pregnant women during sexual intercourse.

Notoatmodjo (2018), which says that someone who works will have broader knowledge than someone who does not work because by working someone will get a lot of information and experience. The difference between the results of the study and the theory may be because housewives have more time at home and have higher social activity and are more likely Participate in counseling or health promotion carried out by health workers.

According to the theory, researchers assume, that a job does not affect the knowledge of the mother. This can be seen from the results of this study which shows that some mothers who work as housewives have good knowledge compared to working mothers.

Parity Relationship with Anxiety of Pregnant Women During Sexual Intercourse at Amini Dalan Lidang Midwife Clinic in 2023

The results of the analysis showed that the majority of primiparous respondents experienced moderate anxiety levels as many as 14 respondents (34.1%). The results of the chi-square statistical test showed a p-value of 0.033, meaning that there was a parity relationship with the level of anxiety of pregnant women during sexual intercourse.

This research is also in line with Astuti's (2018) research entitled The Influence of the Husband's Role on the Anxiety Level of Pregnant Women that out of 80 respondents as many as 53.75% experiencing anxiety. According to the researchers, many pregnant women experience anxiety because the respondents the researchers studied were primigravida mothers where the mother received limited information at the beginning of her pregnancy and did not have much experience and anxiety arising in sexual intercourse during pregnancy. Mothers also believe myths that circulate such as if you are one to three months pregnant it is not allowed to have sexual intercourseLater can miscarry. Mothers who do not experience anxiety during pregnancy, because mothers have high knowledge about their pregnancy, mothers also often dig up information about their pregnancy, and mothers are individuals who are not easily anxious or can control their worries or anxiety in their own way.

4. CONCLUSION

From the table above, it shows that based on the age of the majority of respondents aged 20-35 years experienced moderate anxiety levels as many as 18 respondents (43.9%), high school education levels experienced moderate anxiety levels as many as 8 respondents (19.5%), respondents received information from print media experienced moderate anxiety levels as many as 9 respondents (22%), primipara respondents experienced moderate anxiety levels as many as 14 respondents (34.1%), Housewives experienced moderate anxiety levels as many as 12 respondents (29.3%). The results of the chi-square statistical test showed that there was a relationship between age, education, information sources, parity and work with the level of anxiety of pregnant women during sexual intercourse having sex during pregnancy at Amini Dalan Lidang Clinic, Panyabungan District, Mandailing Natal Regency.

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