RESEARCH ARTICLE

Planned pregnancy affects primigravida readiness in role transitions

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Abstract

Objective: To identify the correlation between planned pregnancy and role transition in primigravida.

Method: The cross-sectional study was conducted at the Bandarharjo Health Centre, Semarang, Indonesia, from February to July 2022, and comprised married primigravida's regardless of trimester who had never had a miscarriage. Data was collected using the London Measure of Unplanned Pregnancy, and the Body Understanding Measure for Pregnancy Scale instruments. Data was analysed using. the software SPSS version 26. P<0.05 was considered significant.

Results: Of the 86 subjects, 40(46.5%) were aged 17-25 years, while 34(40.7%) were aged 12-16 years. All the 86 (100%) were married, although some of them acquired pregnancy before the wedding. There were 40(46.5%) unplanned pregnancies, and 36(41.9%) participants were ready for role change compared to 18(20.9%) who were not ready to face the new role. Planned pregnancy significantly correlated with primigravida readiness for role transitions (p=0.001).

Conclusion: There was a significant relationship between planned pregnancy and readiness to face the role.

Keywords: Pregnancy, Pregnancy, Unplanned, Family Planning, Abortion, Spontaneous. (JPMA 74: S-63 [Suppl. 5]; 2024)

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Introduction

A shift to the role of motherhood is a challenging and complex phenomenon, especially in primigravida. Role transition is a turning point where women experience physiological and psychological changes where they need to adjust to family situations and the new identity of being a mother.[1] Planned pregnancy contributes significantly to achieving proper role transition. Women who plan their pregnancy well will be able to recognise their needs during pregnancy to prepare themselves to carry out their role as mothers.[2] Failure in the transition of roles will cause various impacts related to parenting, barriers to the attachment between mother and the foetus, inability to grow a sense of responsibility towards the pregnancy, and self-preparation in carrying out the role of a mother.[3]

A study stated that in unplanned pregnancies, there was a rejection of pregnancy and lack of care, and pregnant women said it took time to accept the presence of their baby.[4] In another study, 38.6% pregnant women could not feel attachment to the foetus due to a lack of support in preparing for the pregnancy.[5] There was a significant relationship between planned pregnancy and maternal and foetal attachment(p=0.016).[6] A study also stated that 16.6% pregnant women were not ready to undergo the role transition, and experienced depression during the antenatal period due to unplanned pregnancies.[7]

Planned pregnancy encourages mothers to prepare themselves well, use health facilities for antenatal care, be aware of the dangerous signs of pregnancy, and prepare for delivery and care.[8] Pre-conception preparation will encourage mothers to obtain appropriate information regarding the role that must be carried out by women during pregnancy and prepare themselves to welcome the new role.[9] Preparation for the transition in shaping maternal readiness is crucial in forming identity so that a role is formed in childcare after childbirth.[10]

Preparation for the role transition is related to the status of a person's pregnancy which affects psychologically in preparing herself for the pregnancy.[11]

The current study was planned to identify the correlation between planned pregnancy and role transition in primigravida.

Subjects and Methods

The cross-sectional study was conducted at the Bandarharjo Health Centre (BHC), Semarang, Central Java, Indonesia, from February to July 2022, and comprised married primigravida's regardless of trimester who had never had a miscarriage. After approval from the ethics review committee of the Faculty of Nursing, Universitas Islam Sultan Agung, Semarang, all those who were registered with BHC during the data collection process and met the inclusion criteria were included.

After taking informed consent from the subjects, data was

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collected by distributing questionnaires during prenatal classes at the BHC. Data included age, education, pregnancy status and readiness for role change. Pregnancy status was assesses using the London Measure of Unplanned Pregnancy Questionnaire (UK version) after getting permission for use.[12] The instrument was modified and tested for validity (0.362-0.973) and reliability (0.647). While readiness for role change was assessed using the Body Understanding Measure for Pregnancy Scale after permission for use.[13] The instrument was modified and tested for validity (0.560-0.989) and reliability (0.733).

Data was analysed using SPSS 26. Spearman correlation test was used to test the relationship between pregnancy status variables and role change. P<0.05 was considered significant.

Results

Of the 86 subjects, 40(46.5%) were aged 17-25 years, while 34(40.7%) were aged 12-16 years. A total of 86 (100%) were all married, although some of them experienced pregnancy before the wedding. There were 40(46.5%) unplanned pregnancies, and 36(41.9%) participants were ready for role transition compared to 18(20.9%) who were not ready to face the new role (Table 1). Planned pregnancy significantly correlated with primigravida readiness for role transitions (Table 2).

Table-1: Characteristics of the participating primigravida (n=86).

Variable	n (%)
Age (years)	
Early adolescence (12-16)	34 (40.7)
Late adolescence (17-25)	40 (46.5)
Early adult (26-35)	12 (12.8)
Total	86 (100)
Eduation	
Low	58 (67.4)
Middle	28 (32.6)
Total	86 (100)
Pregnancy Status	
Unplanned	40 (46.5)
Ambivalent	21 (24.4)
Planned	25 (29.1)
Total	86 (100)
Role Transition	
Not Ready	18 (20.9)
Quite Ready	32 (37.2)
Very Ready	36 (41.9)
Total	86 (100)

Table-2: Relationship between pregnancy status and role transition readiness.

Variable	Pregnancy Status	Role Transition
Pregnancy Status		
Correlation Coefficient	1.000	0.650**
Sig. (2-tailed)	-	-
n	86	86
Role Transition		
Correlation Coefficient	0.650**	1.000
Sig. (2-tailed)	-	-
n	86	86

Discussion

The findings showed that some primigravida were in their early or late teens. Adolescents are individuals who are still unstable, and are in the stage of searching for identity by having friends to hang out with or specific communities. The influence of association with the peer environment and technological advances that make it easier for teenagers to access various pornographic media, which, along with lack of knowledge, and permissiveness from parents, significantly cause the occurrence of unplanned pregnancies.[14] The Indonesian government has set an age limit for marriage, according to which both partners have to be at least 19 years old, and if there is a deviation from the age of the parents, they have to approach the relevant court with reasons and sufficient evidence.[15] In addition, the phenomenon of the ease of obtaining contraception also strongly supports sexual behaviour that triggers pregnancy in adolescence.[16] The causes of unplanned adolescent pregnancies include risky premarital sexual behaviour, lack of knowledge about reproductive health and sexuality, adolescents' permissive attitude towards sexuality, easy access to pornography through various media, parental attitudes, and association with close friends.[14] Adolescents, who are unstable and still looking for self-identity are easily influenced to imitate whatever is the trend in their group.[17]

The current study also showed that most primigravida had low levels of education. Research also states that unplanned pregnancy is closely related to the negative role of peers, social media exposure, attitudes, parental roles, knowledge and religiosity.[18] For this reason, knowledge becomes the controller of adolescents' influence from the surrounding environment. Adolescents will gain knowledge and advice from the school where they study, and adolescents with higher education have a more rational mindset, so the consequences of their actions will determine their attitudes.[19] Thus, the level of education becomes vital. Women with higher education have broader thoughts about preparing for pregnancy and parenting patterns, so they are more likely to delay pregnancy for better planning.[20] There is a relationship between knowledge and access to information affecting attitudes towards pregnancy planning.[21]

The current study found that most of the respondents did not plan their pregnancy. Following teenagers' psychology, they do not have the readiness to have a family, and getting married at a young age will increase the problems for

teenagers.[22] The causes of unplanned pregnancies are lack of knowledge, economic factors, and lack of ability to ensure the correct use of contraception, in addition to violence in cases where the first sexual intercourse takes place out of coercion.[16] This unplanned pregnancy can also be due to divorce and violence in the family, as there is a relationship between divorce and unplanned pregnancy.[23] Unplanned pregnancy has negative impacts as women are generally not ready to undergo a role transition, leading to the desire to have an abortion during pregnancy.[16]

A strong correlation between planned pregnancy and readiness in role transition means that someone with a planned pregnancy will have good readiness for role transition. An unplanned pregnancy will have a considerable impact, and the transition to motherhood will be difficult. Women with unwanted pregnancies also risk rejection of prenatal care, affecting the mother's and foetus's health.[24] In addition, the transition of roles that must be carried out by pregnant adolescents causes stress, which is quite challenging to overcome, impacting poor emotional wellbeing.[25] It is not uncommon for adolescents who face such roles to seek coping strategies to deal with psychosocial problems and create happiness for themselves.[26]

The pregnancy that occurs, especially in adolescents, is a challenging period. Psychologically, adolescents will have difficulty accepting changes in their self-image and adjusting to changing roles in terms of responsibility in caring for a baby. Research asserts that adolescent pregnancy is marked by low body image, self-esteem and depression.[27]

Pregnancy is adolescence is often unwanted. In addition, the achievement of the mother's role and satisfaction with the mother's role is strongly influenced by the pregnancy status, either desired or unplanned. This status is then closely related to the ability to carry out responsibilities, the attachment of the mother to the foetus, and the process of nurturing in carrying out the role of the mother.[3]

The achievement of the role transition can be seen from the responsibility for the pregnancy, the attachment between the mother and the foetus, the ability to care for the pregnancy, the ability to recognise the risks and manage the pregnancy, emotional wellbeing and preparation for childbirth.[28]

The current study has limitations as the sample size was not calculated which could have affected the power of the study.

Conclusion

There was a significant relationship between planned pregnancy and primigravida's readiness to face the role transition.

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