

THE RELATIONSHIP BETWEEN HUSBAND'S SUPPORT AND THE LEVEL OF ANXIETY EXPERIENCED BY PREGNANT WOMEN AT THE ATIKAH CLINIC, PANYABUNGAN DISTRICT, MANDAILIN G NATAL REGENCY
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Article Info	ABSTRACT
Keywords: Husband Support, Anxiety, Pregnant Women, Pregnancy, Mental Health	<p>Pregnancy is a phase of life accompanied by physical and psychological changes, making pregnant women susceptible to anxiety. One important factor influencing the level of anxiety of pregnant women is the support of their husbands, both emotional, physical, and psychological. Less than optimal support can increase anxiety and negatively impact the health of the mother and fetus. This study aims to analyze the relationship between husband's support and the level of anxiety of pregnant women. This study used a quantitative design with a correlational approach. The study population was pregnant women in the second and third trimesters who checked their pregnancies at the Atikah clinic. A sample of 50 pregnant women was selected using a random sampling technique. The research instruments were a husband's support questionnaire covering emotional, physical, and psychological support, and the Beck Anxiety Inventory (BAI) to measure the level of anxiety of pregnant women. Data analysis was performed univariately and bivariately using the Chi-Square test. The results showed that the majority of respondents received insufficient support from their husbands (60.0%), and the majority of pregnant women experienced moderate levels of anxiety (54.0%). The results of the bivariate analysis showed a significant relationship between husband's support and the level of anxiety of pregnant women ($p = 0.003$; $p < 0.05$). Pregnant women who receive good husband support tend to have mild anxiety levels, while those with less husband support are more likely to experience moderate to severe anxiety. The study's conclusions indicate that husband support plays a significant role in reducing maternal anxiety levels. Therefore, increasing husbands' involvement through education and support during pregnancy is necessary as a promotional and preventive measure to maintain the mental health of pregnant women.</p>
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INTRODUCTION

Pregnancy is a phase of life filled with physical and emotional changes for a woman. While many women experience pregnancy with joy, many also experience anxiety related to their physical, mental, and social well-being. Anxiety in pregnant women can manifest in various forms, such as concerns about the health of the fetus, the delivery process, and their ability to care for the child after birth. This phenomenon is known as pregnancy anxiety.

A pregnant woman's anxiety level can be influenced by various factors, including the support she receives from those closest to her, especially her husband. In this context, the husband's role is crucial, providing emotional, physical, and psychological support. Research shows that good husband support can reduce stress and anxiety levels in pregnant women. The husband acts as a source of

security and comfort for his wife. This support can take the form of attention, understanding, involvement in the pregnancy process, and preparedness for childbirth.

However, not all pregnant women receive adequate support from their husbands. Factors such as differing perceptions of pregnancy, social pressure, and a lack of understanding of the importance of support during pregnancy can affect the quality of support provided. This can lead to increased anxiety, which negatively impacts the physical and mental health of pregnant women and potentially affects fetal development. Data collected from several studies in Indonesia, including a study at Tempel II Community Health Center, Sleman, Yogyakarta (2024), showed a significant relationship between husband's support and anxiety in third-trimester pregnant women (p -value = 0.002 < 0.05). Most respondents received support from their husbands. These results reinforce the idea that better husband's support, lower maternal anxiety. Furthermore, a quantitative study at Aalfa Royhan University in Padangsidimpuan City (2024) with a sample of 34 third-trimester pregnant women at a community health center found that "good" husband's support was present in 55.9% of respondents and that there was a significant relationship between husband's support and anxiety (p = 0.000 < 0.005). Pregnant women who receive support from their husbands are more likely to experience less anxiety than those who lack support.

Research into the effect of husband's support on maternal anxiety is crucial, given that anxiety can directly impact the well-being of both mother and child. By understanding the relationship between husband's support and anxiety levels, it is hoped that more effective approaches to managing maternal anxiety and improving quality of life during pregnancy can be identified.

Thus, this paper aims to analyze the influence of husband's support on the level of anxiety experienced by pregnant women. This research is expected to contribute to the development of knowledge about the importance of social support in pregnancy and maternal mental health.

RESEARCH METHODS

The research design used in this study was quantitative with a correlational approach. This study aimed to determine whether there is a significant relationship between husband's support (independent variable) and maternal anxiety levels (dependent variable). Furthermore, this study also examined the influence of moderating factors such as socioeconomic status, trimester of pregnancy, and previous pregnancy experiences on this relationship.

The population in this study was pregnant women undergoing their pregnancies at the Atikah maternal and child health clinic in a specific area. The pregnant women in the study were in their second or third trimester, as this is the stage where mothers tend to experience higher levels of anxiety related to childbirth and parenthood.

The sample taken in this study was 50 pregnant women who were selected by random sampling from the agreed health centers.

The instrument used to collect data in this study was a questionnaire consisting of two main parts: Husband Support Questionnaire: Designed to measure three types of support provided by husbands to pregnant women (emotional, physical, and psychological). This questionnaire uses a Likert scale of 1-5 to measure the level of support. Beck Anxiety Inventory (BAI): This instrument was used to measure the level of anxiety of pregnant women. The BAI consists of 21 items that evaluate anxiety in the daily lives of pregnant women.

RESULTS AND DISCUSSION

This research was conducted on 50 pregnant women who met the inclusion criteria. Respondents varied in characteristics based on age, trimester of pregnancy, socioeconomic status, education, and previous pregnancy experience. A general overview of the respondents is presented below.

Table 1. Frequency Distribution Based on Age of Pregnant Women in 2025

No	Age (Years)	Frequency	Percentage (%)
1	< 20 years	4	8.0
2	20–35 years	39	78.0
3	> 35 years	7	14.0
Amount		50	100.0

Based on Table 1 it is known that the majority of respondents are in the 20–35 age group, namely 39 people (78.0%). Respondents aged > 35 years numbered 7 people (14.0%), while respondents aged < 20 years numbered 4 people (8.0%).

1. Trimester of Pregnancy

Table 2. Frequency Distribution of Pregnancy Trimesters in 2025

No	Trimester of Pregnancy	Frequency	Percentage (%)
1	First trimester	12	24.0
2	Second Trimester	20	40.0
3	Third Trimester	18	36.0
Amount		50	100.0

Based on Table 2 most pregnant women are in the second trimester, namely 20 respondents (40.0%), followed by the third trimester (36.0%) and the first trimester (24.0%).

2. Socio-Economic Status Based on Income

Table 3. Frequency Distribution of Socio-Economic Status Based on Income in 2025

No	Income	Frequency	Percentage (%)
1	< 2 million	21	42.0
2	2–4 million	23	46.0
3	> 4 million	6	12.0
Amount		50	100.0

Based on Table 3 the majority of respondents, 23 (46.0%), had an income of 2–4 million rupiah. Furthermore, 21 respondents (42.0%) had an income of <2 million rupiah, and 6 respondents (12.0%) had an income of >4 million rupiah.

3. Socio-Economic Status Based on Education

Table 4. Frequency Distribution of Education Level of Pregnant Women in 2025

No	Level of education	Frequency	Percentage (%)
1	JUNIOR HIGH SCHOOL	13	26.0
2	SENIOR HIGH SCHOOL	27	54.0
3	D-III / S-1	10	20.0
Amount		50	100.0

Based on Table 4 the majority of respondents, 27 (54.0%), had a high school education. Thirteen respondents (26.0%) had a junior high school education, and 10 respondents (20.0%) had a Diploma III/Bachelor's degree.

4. Previous Pregnancy Experience

Table 5. Frequency Distribution of Pregnancy Experiences in 2025

No	Bad Pregnancy Experience	Frequency	Percentage (%)
1	Once	14	28.0

2	Never	36	72.0
	Amount	50	100.0

Based on Table 5 the majority of respondents, 36 (72.0%), had never experienced a negative pregnancy experience. Meanwhile, 14 respondents (28.0%) reported having experienced a negative pregnancy experience.

5. Husband's Support for Pregnant Women

Table 6. Frequency Distribution of Husband's Support for Pregnant Women in 2025

No	Husband's Support	Frequency	Percentage (%)
1	Good	20	40.0
2	Not enough	30	60.0
	Amount	50	100.0

Based on Table 4.6, it is known that of the 50 respondents, the majority of pregnant women received insufficient support from their husbands (30 respondents, 60.0%). Meanwhile, 20 respondents (40.0%) received good support from their husbands.

6. Anxiety Level of Pregnant Women

Table 7. Frequency Distribution Anxiety Levels of Pregnant Women

No	Anxiety Level	Frequency	Percentage (%)
1	Light	7	14.0
2	Currently	27	54.0
3	Heavy	16	32.0
	Amount	50	100.0

Based on Table 7 it is known that of the 50 respondents, the majority of pregnant women, 27 (54.0%), had moderate anxiety. Seven respondents (14.0%) had mild anxiety, and 16 respondents (32.0%) had severe anxiety.

Bivariate Analysis

1. Relationship Husband's Support and Pregnant Women's Anxiety Levels in 2025

Results of relationship analysis data Husband's Support and Pregnant Women's Anxiety Levels in 2025 can be seen in the following table:

Table 8. Connection Husband's Support and Pregnant Women's Anxiety Levels in 2025

Husband's Support	Anxiety Levels of Pregnant Women						Total	p-value		
	Light		Currently		Heavy					
	F	%	f	%	f	%				
Good	6	12.0	12	24.0	2	4.0	20	40.0		
Not enough	1	2.0	15	30.0	14	28.0	30	60.0		
Total	7	14.0	27	54.0	16	32.0	50	100.0		

Based on Table 8 from a total of 50 respondents, it is known that in the group of pregnant women with good husband support, there were 6 people (12.0%) who experienced mild anxiety, 12 people (24.0%) experienced moderate anxiety, and 2 people (4.0%) experienced severe anxiety, so that the total was 20 people (40.0%). Meanwhile, in the group of pregnant women with less husband support, there was 1 person (2.0%) who experienced mild anxiety, 15 people (30.0%) experienced moderate anxiety, and 14 people (28.0%) experienced severe anxiety, with a total of 30 people (60.0%).

The results of the Chi-Square statistical test showed a p-value of 0.003, indicating a significant relationship between husband's support and the level of anxiety in pregnant women ($p < 0.05$). This indicates that pregnant women who receive good husband support are more likely to experience mild anxiety, while pregnant women with less husband support are more likely to experience moderate to severe anxiety.

Discussion

1. The Role of Husband's Support (Emotional, Physical, and Psychological) in Reducing Anxiety Experienced by Pregnant Women

Based on the research results, the level of husband's support for pregnant women shows that the majority of respondents received support from their husbands in the good category, as many as 20 people (40.0%), while 30 respondents (60.0%) received insufficient support from their husbands. This distribution illustrates that many pregnant women still do not receive optimal support from their husbands during pregnancy, although some have received good support from their partners.

The results of this study align with Walyani's (2020) theory, which explains that husband's support is one of the most important forms of social support for pregnant women because the husband is the closest person who plays a direct role in providing a sense of security, comfort, and calm. Husband's support is divided into three main components: emotional support, physical support, and psychological support, all of which significantly contribute to reducing anxiety levels in pregnant women.

Emotional support includes attention, affection, a husband's willingness to listen to complaints, and an empathetic response to the mother's condition. According to Sulistyawati (2021), a husband's attention and empathy have been shown to have a calming effect on mothers, thereby reducing anxiety arising from hormonal and physical changes during pregnancy. In this study, the high proportion of husbands with moderate and high levels of support indicates that most mothers receive adequate emotional attention, so it is not surprising that most respondents experienced low to moderate levels of anxiety.

Research by Sutisna et al. (2022) also supports these findings, showing that emotional support was negatively correlated with maternal anxiety. Mothers who felt appreciated, understood, and loved by their husbands reported lower levels of anxiety than those who felt less cared for.

Physical support includes husbands' assistance with household chores, accompanying them to prenatal checkups, and ensuring that the mother's needs are met. According to Prawirohardjo (2020), a husband's physical involvement helps reduce the mother's workload and provides a sense of security, thereby reducing mental stress that can potentially trigger anxiety. In this study, high levels of physical support from husbands were reflected in the groups of respondents with high and moderate levels of husband support, which ultimately contributed to the low number of pregnant women with severe anxiety.

Indonesian research by Ningsih (2023) showed that pregnant women who were accompanied by their husbands during prenatal checkups experienced lower levels of anxiety than those who were not. Furthermore, physical assistance with housework helped mothers feel more comfortable and less overwhelmed, thus reducing anxiety.

3. Psychological Support

Psychological support takes the form of motivation, positive encouragement, mental empowerment, and self-confidence. Yulianti's (2022) theory explains that psychological support plays a crucial role in increasing a mother's mental readiness to face changes during pregnancy. When a husband provides mental support, a mother feels more able to cope with the uncertainty and fear of childbirth.

Research by Raudah et al. (2022) shows that mothers who receive good psychological support from their partners have lower levels of stress and anxiety and demonstrate better preparedness for the labor process.

Looking at the distribution of research data, high husband support (360%) and moderate (44.0%) may explain why most mothers experience low to moderate anxiety. Mothers who receive good husband support tend to feel calm, confident, and able to adapt to changes during pregnancy. Conversely, in the group with low husband support (20.0%), mothers are likely to experience higher levels of anxiety due to a lack of the emotional and psychological resources needed during pregnancy.

The results of this study are in line with the findings of Kusumawati and Dewi (2023) who stated that husband's support is the main protective factor for the mental health of pregnant women, and significantly reduces anxiety based on statistical tests.

Based on research findings and supporting theories, researchers assume that husband support is a dominant factor influencing a pregnant woman's anxiety levels. A husband who is emotionally, physically, and psychologically involved can provide a sense of security, mental stability, and comfort for the mother, thus effectively managing anxiety. Researchers also assume that increasing husband education about their role in pregnancy can further strengthen support for the mother and help reduce the risk of more severe anxiety.

2. Level of Anxiety Experienced by Pregnant Women During Pregnancy

Based on the research results in Table 4.7, it is known that of the total of 50 respondents, most of the pregnant women were at a mild level of anxiety, as many as 7 people (14.0%), while moderate anxiety was experienced by 27 people (54.0%) and severe anxiety was experienced by 16 people (32.0%). These findings illustrate that anxiety is indeed a normal condition during pregnancy, but the majority of mothers in this study were at an adaptive (mild) level of anxiety, while others experienced moderate anxiety that requires more intensive attention and support.

Regarding pregnancy experiences, the data in Table 4.5 shows that the majority of respondents (36 respondents (72.0%) had never experienced a negative pregnancy experience, while 14 (28.0%) had experienced a negative experience related to pregnancy or childbirth. This high proportion of respondents who had never experienced a negative experience may be one factor why high levels of anxiety were not found in this study. Previous experiences have been shown to significantly influence the psychological state of pregnant women.

This aligns with Sulistyawati's (2021) theory, which states that pregnant women with negative pregnancy experiences, such as complications in previous pregnancies or deliveries, tend to have higher levels of anxiety in subsequent pregnancies. Conversely, mothers who experienced normal pregnancies without complications were better able to adapt to the physiological and psychological changes during pregnancy. In this study, the high number of mothers without negative pregnancy experiences (72.0%) supports the finding that most respondents experienced only mild anxiety.

Walyani's (2020) theory also states that anxiety during pregnancy is generally influenced by physiological and psychological changes, as well as the mother's readiness to face the birthing process. However, previous positive experiences can reduce the perception of threat and uncertainty, thus increasing maternal confidence, ultimately lowering anxiety levels. This is evident in the study results, which showed that high levels of anxiety were absent, likely because most respondents had no traumatic experiences.

The results of this study are also supported by various studies in Indonesia. Research by Maulida (2023) showed that primigravida mothers, or mothers who had no previous pregnancy experience, tended to experience higher levels of anxiety than multigravida mothers, especially if their previous experience was positive. Meanwhile, research by Devi and Yuliana (2021) found that negative pregnancy or childbirth experiences, such as miscarriage, prolonged labor, or complications, were significantly associated with increased anxiety in subsequent pregnancies. Therefore, the fact that the

majority of respondents had no negative experiences is a strong reason why this study did not find high levels of anxiety.

Furthermore, research by Utami et al. (2022) also confirmed that maternal anxiety is influenced by psychosocial factors, including past negative experiences. Mothers with negative experiences are more prone to strong anxiety responses due to trauma or repeated fear. Conversely, mothers with positive experiences tend to be more emotionally stable.

From the biopsychosocial perspective described by Yanti (2020), past experiences are a crucial psychological factor influencing the well-being of pregnant women. Adverse experiences can increase the production of stress hormones like cortisol, which can lead to emotional and physical discomfort. Because most respondents had no adverse experiences, the risk of reactivating past stress or fear was lower, allowing their anxiety to be controlled.

Research in Indonesia by Putri et al. (2023) also showed that moderate to high anxiety in pregnant women can increase the risk of premature birth, emotional discomfort, and low preparedness for the labor process.

Considering this research data, it can be concluded that the anxiety levels of pregnant women are still within reasonable limits but still require intervention and support. For mothers with moderate anxiety, healthcare providers should provide pregnancy education, simple counseling, and improve therapeutic communication. This approach is crucial to prevent anxiety from developing into severe anxiety that could impact both the mother and the fetus. Support from family, especially the husband, is also a crucial component proven to reduce anxiety levels in pregnant women.

3. Connection Husband's Support and Pregnant Women's Anxiety Levels

The results of the study show that of the 50 respondents, it was found that in the group of pregnant women with good husband support, there were 6 people (12.0%) who experienced mild anxiety, 12 people (24.0%) experienced moderate anxiety, and 2 people (4.0%) experienced severe anxiety, so that the total was 20 people (40.0%). Meanwhile, in the group of pregnant women with less husband support, there was 1 person (2.0%) who experienced mild anxiety, 15 people (30.0%) experienced moderate anxiety, and 14 people (28.0%) experienced severe anxiety, with a total of 30 people (60.0%).

The results of the Chi-Square statistical test showed a p-value of 0.003, indicating a significant relationship between husband's support and the level of anxiety in pregnant women ($p < 0.05$). This indicates that pregnant women who receive good husband support are more likely to experience mild anxiety, while pregnant women with less husband support are more likely to experience moderate to severe anxiety.

These findings align with psychological and maternal theories that emphasize the importance of emotional support during pregnancy. According to Walyani (2020) in her book "Pregnancy Midwifery Care," husband's support is a key form of social support for pregnant women, increasing their sense of security, reducing psychological distress, and helping them adapt to the physical and emotional changes during pregnancy. Furthermore, Prawirohardjo (2019) explains that the husband's presence and involvement act as a protective factor against prenatal anxiety because he is the primary source of information, physical support, and comfort for the mother.

The results of this study also align with recent Indonesian journals showing that low husband support is associated with increased anxiety in pregnant women. Research by Sari et al. (2022) at the Mojokerto Community Health Center found that pregnant women who lack emotional support and attention from their husbands have a twofold higher risk of anxiety compared to those who receive optimal support. Similarly, Lestari & Handayani (2021) reported that pregnant women in their third trimester who receive good husband support show lower levels of anxiety, particularly in coping with physical discomfort and preparing for childbirth. Another study by Fitriani (2023) showed that

husband support in the form of attention, housework assistance, accompanying antenatal care visits, and providing motivation has a direct effect on reducing maternal anxiety.

The consistency of these findings with previous theory and research confirms that husband's support is not only an emotional need but also an important psychosocial aspect that influences the quality of maternal health. Husband's support helps reduce physiological stress by lowering stress hormones (such as cortisol) and increasing maternal confidence in navigating the pregnancy process. Therefore, the greater the husband's support a mother receives, the lower her anxiety levels.

Based on research results and theoretical analysis, researchers assume that maternal anxiety is significantly influenced by the extent to which the husband is physically and emotionally present during pregnancy. A husband who is actively involved in providing attention, facilitating the mother's needs, and providing a sense of security will significantly contribute to the mother's psychological stability. Therefore, increasing education for husbands regarding the importance of their role during pregnancy is believed to help reduce maternal anxiety and improve the well-being of both mother and fetus.

CONCLUSION

Based on the results of research regarding the role of husband's support and the level of anxiety of pregnant women, several important things can be concluded as follows:

1. Husbands' emotional, physical, and psychological support significantly contributes to reducing anxiety levels in pregnant women. The study found that 20 pregnant women (40.0%) received good levels of husband support, while 30 pregnant women (60.0%) received poor levels of husband support. These findings suggest that good husband support plays a crucial role in maintaining a mother's emotional stability during pregnancy.
2. Research shows that the anxiety levels of pregnant women are dominated by the moderate category, with 27 (54.0%), followed by the severe category with 16 (32.0%), and mild anxiety with 7 (14.0%). This indicates that most pregnant women experience significant levels of anxiety and require more attention and support during pregnancy.
3. There is a significant relationship between husband's support and the anxiety level of pregnant women with a p value of 0.003 ($p<0.05$). The analysis of the relationship shows that the higher the husband's support, the lower the anxiety level experienced by pregnant women. This finding is consistent with theory and various previous studies that emphasize the husband's role as a primary source of support during pregnancy. Optimal support reduces physiological stress, suppresses the hormone cortisol, and increases the mother's mental readiness for childbirth.

REFERENSI

Devi, R., & Yuliana, S. (2021). Hubungan pengalaman kehamilan sebelumnya dengan kecemasan ibu hamil. *Jurnal Kesehatan Maternal*, 8(2), 45–52.

Fitriani, A. (2023). Peran dukungan suami terhadap kecemasan ibu hamil trimester tiga. *Jurnal Psikologi dan Kesehatan*, 10(1), 23–30.

Kusumawati, N., & Dewi, R. (2023). Dukungan suami sebagai faktor protektif kesehatan mental ibu hamil. *Jurnal Kebidanan Indonesia*, 15(3), 112–120.

Lestari, P., & Handayani, M. (2021). Hubungan dukungan suami dan kecemasan pada ibu hamil trimester III. *Jurnal Ilmu Kebidanan*, 12(2), 67–74.

Maulida, F. (2023). Perbedaan kecemasan ibu primigravida dan multigravida. *Jurnal Kesehatan Reproduksi*, 9(1), 10–18.

Ningsih, A. (2023). Pengaruh pendampingan suami terhadap kecemasan ibu hamil. *Jurnal Kebidanan Modern*, 6(2), 55–63.

Prawirohardjo, S. (2019). Ilmu kebidanan. Jakarta: PT Bina Pustaka.

Prawirohardjo, S. (2020). Keterlibatan suami dalam kehamilan dan persalinan. Jakarta: EGC.

Putri, D., Rahayu, S., & Hadi, P. (2023). Kecemasan ibu hamil dan risiko persalinan prematur. *Jurnal Kesehatan Ibu dan Anak*, 7(1), 33–41.

Raudah, R., Sari, L., & Pratiwi, T. (2022). Pengaruh dukungan psikologis suami terhadap kecemasan ibu hamil. *Jurnal Psikologi Kesehatan*, 11(2), 78–85.

Sulistyawati, Y. (2021). Dukungan suami dan kecemasan pada ibu hamil. *Jurnal Kebidanan dan Keperawatan*, 14(3), 102–110.

Sutisna, A., Dewi, P., & Rahmawati, F. (2022). Hubungan dukungan emosional suami dengan kecemasan ibu hamil. *Jurnal Psikologi Maternal*, 5(1), 45–54.

Utami, D., Hidayati, S., & Santoso, R. (2022). Faktor psikososial yang memengaruhi kecemasan ibu hamil. *Jurnal Kesehatan Reproduksi*, 8(2), 88–97.

Walyani, I. (2020). *Asuhan kebidanan kehamilan*. Yogyakarta: Nuha Medika.

Yanti, R. (2020). Perspektif biopsikososial pada kehamilan. *Jurnal Psikologi dan Kesehatan*, 9(1), 15–23.

Yuliastuti, T. (2022). Peran dukungan psikologis suami terhadap kesiapan mental ibu hamil. *Jurnal Ilmu Kebidanan*, 13(2), 71–79.