



Dealing with Vulnerability During a Pandemic: Pregnant Women's Perspectives

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ABSTRACT

The coronavirus affects the psychological condition of mothers during pregnancy; therefore, they are vulnerable to experience anxiety, stress, and depression during the pandemic. This phenomenological study aims to explore the experiences of pregnant women in dealing with pandemic situations. This qualitative study used an interpretive phenomenological approach and in-depth interviews with 10 pregnant women as participants. The data were transcribed and analyzed using an interpretative phenomenological approach. The results led to 9 main themes, include: (1) considering COVID-19 as scary, (2) anxiety due to increased risk of contracting the virus during pregnancy, (3) increased stress during pregnancy, (4) being constrained due to limited activities, (5) couples becoming the main support, (6) the support of people around creates positive feelings, (7) becomes more disciplined in implementing health protocols, (8) more active in using social media, and (9) familiarize with the changing situation of the pandemic. It can be concluded that pregnant women develop new habits during pandemics, such as seeking support from partners and others, adhering to health protocols, being active on social media, and adapting to the pandemic situation.

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ABSTRAK

Virus corona mempengaruhi kondisi psikologis ibu selama kehamilan sehingga mereka sangat rentan mengalami kecemasan, stres, dan depresi selama masa pandemi. Studi fenomenologi ini bertujuan untuk menggali pengalaman ibu hamil dalam menghadapi situasi pandemi. Penelitian kualitatif ini menggunakan pendekatan interpretif fenomenologis dan wawancara mendalam pada 10 ibu hamil sebagai partisipan. Data ditranskripsi dan dianalisis menggunakan pendekatan fenomenologi interpretatif. Hasil penelitian menghasilkan 9 tema utama, antara lain: (1) menganggap COVID-19 sebagai hal yang menakutkan, (2) kecemasan karena meningkatnya risiko tertular virus selama kehamilan, (3) meningkatnya stres selama kehamilan, (4) terkendala karena aktivitas yang terbatas, (5) pasangan. menjadi pendukung utama, (6) dukungan orang sekitar menciptakan perasaan positif, (7) menjadi lebih disiplin dalam menerapkan protokol kesehatan, (8) lebih aktif menggunakan media sosial, dan (9) membiasakan diri dengan perubahan situasi pandemi. Dapat disimpulkan bahwa ibu hamil mengembangkan kebiasaan baru selama pandemi, seperti mencari dukungan dari pasangan dan orang lain, mematuhi protokol kesehatan, aktif di media sosial, dan beradaptasi dengan situasi pandemi.

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INTRODUCTION

COVID-19 has been considered a global health crisis of the 21st century and has profoundly affected economic and global healthcare systems. Studies showed that those infected with the virus are treated in the Intensive Care Unit because they have a high risk of suffering from pneumonia (Poon et al., 2020; San-Juan et al., 2020). It has also had an impact on the quality of life of a variety of population groups (Bellato et al., 2020), particularly pregnant women, who are also at vulnerable groups (Dashraath et al., 2020). The effects of the virus on pregnant woman are not only on physical health, but also affects psychological conditions during pregnancy (Lebel et al., 2020). In addition, these individuals are more prone to experiencing psychological and emotional problems such as stress, anxiety, and depression when compared to non-pregnant women during the pandemic (Davenport et al., 2020).

The anxiety, stress, and depression that arise are strongly influenced by perception of the virus (Karavadra et al., 2020). During the pandemic, pregnant women had difficulty accessing health care facilities for Ante Natal Care (ANC). This is because they were afraid of being exposed to the virus from health care facilities (Kahyaoglu Sut & Kucukkaya, 2020). Some had other challenges, such as difficulties in managing finances for planning childbirth (Nowacka et al., 2021; Matsushima & Horiguchi, 2020). Furthermore, they have difficulty in carrying out their role as mothers (Kajdy et al., 2020). Therefore, they need support from their family to overcome anxiety, stress, and depression caused by various challenges (Matsushima & Horiguchi, 2020).

The experiences of pregnant women that emerged in the early days of the pandemic include fear, as well as disruption in carrying out prenatal care and social life routines (Sahin & Kabakci, 2020). The women share their experiences of living during a pandemic with feelings of being disturbed when carrying out their daily routines. In fact, they had challenges due to the pandemic accompanied by the strength to face the crisis (Mortazavi & Ghardashi, 2021) Therefore, further study needs to be conducted to determine the psychological and coping experiences of pregnant women in dealing with the pandemic. Hence, this study aims to explore the experiences of pregnant women in dealing with pandemic situations.

METHOD

This qualitative study used an interpretive phenomenological approach to investigate the feelings regarding a particular life experience (Polit & Beck, 2018). The interviews were conducted on 10 participants using the Purposive Sampling technique with the following criteria, (1) pregnant women in the first, second, and third trimesters who have had a pregnancy check at a hospital or health center, (2) can communicate effectively in Indonesian, and (3) willing to conduct online interviews. This study was conducted between May - June 2021 in the Manggarai Regency, East Nusa Tenggara Province. Data collection was carried out through an in-depth online interview process with video conference (zoom meeting and WhatsApp video call).

The research team visited Dr. Ben Mboy Hospital, Ruteng, the Regional Technical Implementation Unit (UPTD) of the Ruteng City Health Center, and the UPTD of the Lao Health Center to conduct study contracts. The participants were asked to voluntarily participate, and after getting approval,

their phone numbers were saved and contacted online for interviews. After the interview, a verbatim transcription was carried out to obtain text/written data.

Subsequently, the data were analyzed using the Interpretative Phenomenological Analysis (IPA). This is an analytical method to reveal in detail how participants interpret their personal and social world. This includes their experiences, events, and statuses (Love et al., 2020; Smith & Osborn, 2015). Furthermore, this study used IPA, therefore the process of exploring the perceptions in dealing with pandemic situations was properly displayed according to their personal experiences. In addition, the meaning of their experiences was easily determined through the Interpretative Phenomenological Analysis. Rigor of the study was achieved through credibility; this study clarified the findings to the participants and recorded the interview process using a screen recorder. Meanwhile, to ensure transferability, the findings were described in detail in a narrative form. A discussion of the results was also made using journals and literature that were relevant to the topic. Further, dependability of the study was attained by consulting the results with Supervisors. The principle of confirmability was implemented by documenting the procedures for checking and re-checking the data throughout the study.

RESULT AND DISCUSSION

There are 9 themes in this study, namely (1) considering COVID-19 as scary, (2) anxious due to increased risk of contracting the virus during pregnancy, (3) increased stress during pregnancy, (4) becomes constrained due to limited activities, (5) couples become the main support for pregnant women, (6) support from people around them creates positive feelings, (7) becomes more disciplined in implementing health protocols, (8) uses social media more actively, and (9) gets used to the changing situation of the pandemic.

Theme 1: Considering COVID-19 as scary

This theme consists of three sub-themes. The first is the fear of contracting the virus which is supported by the participant's statement as follows:

"This COVID virus makes you uneasy... you don't know who will get COVID next... who will die next..." (P7)

"The COVID virus is a virus that makes you afraid... and uneasy...many people have died as a result of this COVID..." (P10)

"This COVID, I believe, poses a threat to everyone...everyone faces a difficult challenge...the virus is inconvenient..." (P8)

The second sub-theme is the increasing stress due to the rules associated with the pandemic. This is supported by the statement as follows:

"Anyway, COVID is an annoyance; the virus is obnoxious, and the rules are obnoxious..." (P2)

"I'm really irritated, I think... there are a lot of injustices that I've seen during COVID... when some people don't wear masks, they don't get raided, but there are those

who do, and some people appear to be able to get COVID assistance...” (P2)

The third is fear of the new type of COVID-19 virus, which is supported by the following statements:

“Even if they have been vaccinated, many still get it... so don't mess with this COVID... this bad COVID... especially now that a new variant is coming...” (P3)

“It also frightens me... furthermore, there are numerous new types of COVID... God... it makes me so nervous...how can you say the new one has a lot of symptoms, and we get it quickly...” (P4)

“Furthermore, there is another delta variant of this COVID that kills a large number of people...” (P10)

The pandemic situation is a major stressor for pregnant women which makes them afraid. Also, various negative feelings arise such as being irritated at the situation, fear of transmission, confusion, and uneasiness with the threat of the virus. The associated psychological problems, such as anxiety, stress, and depression are strongly influenced by the perception of the pandemic. This study found that most participants perceived this virus as a form of threat to the health. Furthermore, the virus is considered a trigger for changes in the behavior of pregnant women during the pandemic. The perception makes the virus scary and a cause of stress (Atmuri et al., 2021). It is also a major stressor (Barbosa-leiker et al., 2021) as this study found that most of the participants perceived the virus as a form of threat to their health, which caused fear, irritation, and restlessness. This also highlights the presence of a new Delta Variant, which made them more afraid.

Theme 2: Anxious due to increased risk of contracting the virus during pregnancy

This theme consists of three sub-themes. The first is changing the health services used which are supported by the following statements:

“Indeed, when it was COVID-19, I did not go to the community health center... I was scared... So I went to a private doctor instead. ...” (P1)

The second sub-theme is the feeling of being a vulnerable group. This is supported by the following statements:

“Furthermore, we pregnant women are extremely vulnerable to COVID...” (P6)

“It's like being a woman who is more sensitive to her emotions as well as COVID-19...” (P7)

The third is feeling responsible for 2 lives which is supported by the statements:

“As a result, we must be vigilant because we are not only responsible for one but also for two lives...” (P3)

“Because I'm not the only one who gets sick... I'm also carrying a child in my tummy...” (P1)

During the pandemic, pregnant women tried to avoid crowded places like hospitals due to fear of being infected. The anxiety level increased because many friends and family

were infected in the hospital. Furthermore, they were afraid of having a miscarriage due to being infected. Therefore, they were anxious during the pandemic due to a large number of reported cases and the prejudice against people who have flu and cough that are similar to COVID-19 symptom (Lin et al., 2021). Over time, pregnant women have gotten information regarding their vulnerability (Wu et al., 2021). Due to the anxiety experienced, they prefer private health services to reduce the risk of transmission (Cigaran et al., 2021). They also feel more secure and comfortable undergoing antenatal care at a midwife, nurse, or private doctor with the hope to give birth in a private practice (Coxon et al., 2020). In this study, the participants changed their examination to a practicing doctor when the pandemic incidence rate was quite high. The anxiety level increased because they are responsible for two lives. This is in accordance with previous study which stated that pregnant women were not only worried about themselves but also the condition of their baby (Lebel et al., 2020).

Theme 3: Increased stress during pregnancy

This theme consists of two sub-themes. The first is stress due to changing patterns of social interaction. This is supported by the participant's statements as follows:

“I haven't met anyone because of the pandemic, and I'm really stressed...” (P1)

“It's rare for me to meet people; it's not that I don't want to; it's just that I think I have to keep myself in check, especially now that I'm pregnant...” (P3)

The second sub-theme is increased stress due to changes in economic conditions. This is supported by the following statements:

“I'm very stressed, and I think the COVID situation is making it difficult for me to find work... I'm sorry once more; I have a husband... I just want to say...” (P10)

“Think about it now if you want to spend money, there must be priorities, so there must be a need for me that is difficult to fulfill...” (P10)

The participants showed that the economic problems arising from the pandemic situations stressed them. This is because they could not meet their family and personal needs. This problem makes it difficult to manage finances such as paying installments or credit, and to buy daily necessities for the family. Also, the economic problems are a triggering factor for family disputes (Kajdy et al., 2020). The current study found that the participants often felt dizzy and had headaches in facing financial crisis. Stress in pregnant women occurs due to difficulties in financial management for planning childbirth (Ahlers-schmidt et al., 2020). A previous studies explained an increased stress level in pregnant women during the pandemic (Matvienko-sikar et al., 2021; Puertas-Gonzalez et al., 2021; Preis et al., 2020). The participants were often faced with a difficult decision to limit social interactions (Anderson et al., 2021). Therefore, the pandemic has an impact on the family's economic condition due to job or customer loss, as well as reduced income (Moyer et al., 2020; Shahid et al., 2020). In this study, the participants claimed to be stressed due to changes in social interactions and economic conditions.

Theme 4: Becomes constrained due to limited activities

This theme consists of two sub-themes. The first is feeling confined because they couldn't freely carry out activities, which is supported by the participants' expressions:

"It's not free to go out; it's just that when it gets cold outside, I can't go out..." (P3)

"Sometimes I feel as if I've been abandoned... When a family member dies, if it's a little out of town, my husband refuses to accompany me outside..." (P1)

"If it's related to the pandemic, I believe it's becoming increasingly constrained..." (P5)

"God, all I do is sleep, wake up, cook, eat, and sleep again; I'm a natural slacker... not productive..." (P1)

The second sub-theme is the feeling of change due to activity limitations. This is supported by the expressions:

"Additionally, I'm pregnant at the age of 30... so I feel like my work has decreased by 60%... I'm exhausted... so I'm guessing pregnant women get COVID as well... it's really sad... I'm sick of getting COVID... it feels like a never-ending problem..." (P1)

"I think I'm lazy to do anything during pregnancy, and luckily, my family understands hahahaha... maybe because I'm pregnant, so I sleep a lot..." (P5)

Pregnant women limited their activities during the pandemic by spending more time at home, reduced shopping activities, not holding events, working from home, limiting plans for health checks, and avoiding exercise in crowded places (Anderson et al., 2021). In this study, activity restrictions were not only based on the participants' wishes but also on the demands of their partners and families. This made them constrained because they were not completely free to determine what they could do. Also, they revealed being lazy and easily fatigued.

Theme 5: Couples become the main support for pregnant women

This theme consists of three sub-themes. The first is feeling that their husband is always available when needed. This is supported by the participants' expressions:

"This husband is the very first support... because we are almost 24 hours with him." (P6) "We spend a lot of time together these days..." (P3)

"As for my husband, he always takes care of me...helps take care of the children...helps take care of the house..." (P5)

The second sub-theme is a feeling that the husband is an entertainer when there is problem. This is supported by the expressions:

"My husband also sometimes when he sees my sour face, he makes funny jokes so I think it's a bit amused..." (P8)

The third sub-theme is feeling that the husband is very worried about them during pregnancy which is supported by the participants' expressions:

"I also feel hot whenever I'm in the village, which makes it difficult to sleep... fortunately, my husband is kind enough to assist with the fan..." (P9)

"He couldn't leave me alone, so he came and picked me up..." (P5)

"Because my husband won't leave me alone at home, I need someone to accompany me..." (P1)

Pregnant women who do not get support from their partners are at high risk of stress and depression (Hawkins et al., 2021). Therefore, the presence of a partner greatly affected psychological well-being during the pandemic (Meaney et al., 2021; Vasilevski et al., 2021). In this study, all the participants felt the support from their partners was very important. They explained that husbands were helpful with tasks such as doing housework. Furthermore, the presence of the husband as an entertainer reduced their stress.

Theme 6: Support from people around them creates positive feelings

This theme consists of two sub-themes. The first is input from friends that motivates pregnant women. This is supported by the participants' expressions:

"I frequently talk to my friends, and they tell me about their pregnancy experiences, so if there is a problem, I frequently ask them..." (P9)

"There's a difference between socializing with family and socializing with friends... so we sometimes fight because I'm bothered by things like that... But after I go to the office once a week, I feel like my social needs are met..." (P1)

"Initially, a friend advised me to sell masks; I obtained masks from him and continued to sell them... Basically, I believe it was friends who motivated me to get up..." (P8)

Second, family support reduces their burden, which is supported by the statement:

"I feel like I'm carrying less weight... so that I can concentrate more on caring for my pregnancy, especially during this pandemic..." (P5)

"I am extremely grateful; I consider myself extremely fortunate to have a good and caring husband, as well as a family that genuinely cares about me..." (P3)

The women need support from their surrounding families to overcome various emotional responses including anxiety, stress, and depression (Wei et al., 2018; Helps et al., 2020). Also, their reduced opportunity to meet people such as family makes them feel they do not get social support (Bedaso et al., 2021). This study found that support from friends and family is important to overcome difficulties during the pandemic.

Theme 7: Becomes more disciplined in implementing health protocols

This theme consists of two sub-themes. The first is feeling the need to implement health protocols. This is supported by the expressions:

"What matters is that hand washing has become a necessity for me..." (P1)

"Wearing a mask is critical, and I keep hand sanitizer with me at all times, Dad..." (P3)

"Wear a mask, use hand sanitizer, and keep a safe distance..." (P7)

The second is feeling that they should not be influenced by others, which is supported by the statement:

"I told my husband that I still needed to wear a mask, keep your distance, wash your hands thoroughly, and avoid going with others who are still ignorant..." (P5)

During the pandemic, there were behavioral changes to reduce the risk of transmitting the virus, such as wearing masks, washing hands, reducing the use of public transportation, and social distancing (Lee & You, 2020). The participants conveyed the need for discipline in implementing health protocols and remaining consistent. Therefore, they are not easily influenced by others who do not comply with the protocols.

Theme 8: Uses social media more actively

This theme consists of two sub-themes. Firstly, the media of communication with relatives changed. This is supported by the participant's expressions:

"I frequently open social media, and I believe it is very easy to be influenced by what I see on social media..." (P1)

"Video calls are the only way to communicate with family in the village..." (P6)

The second is getting entertainment from social media which is supported by the expressions:

"That is how I am currently utilizing social media... Perhaps it's a pandemic, and we'll all be playing more cellphone games as a result... Cellphones provide all forms of entertainment..." (P7)

The efforts to stay connected with others are means for reducing stress (Matvienko-sikar et al., 2021). This increased the use of social media during the pandemic (Amram et al., 2021; Goodyear et al., 2021). In fact, the participants spent a lot of time on social media for entertainment. Furthermore, they used social media platform as a medium of communication with relatives to keep interacting.

Theme 9: Gets used to the changing situation of the pandemic.

This theme consists of two sub-themes. The first is adjusting to the pandemic situation, which is supported by the expression:

"Now that I'm used to COVID..." (P1)

"We also don't need to be too concerned; this virus has been around for over a year, and we should be able to adjust to the situation now..." (P5)

"This COVID isn't brand new..." (P5)

"A lot of habits have shifted in the last few years..." (P4)

Secondly, there is positive belief during the pandemic which is supported by the statements:

"Especially when I see someone who has been ill, he keeps getting better... After all, many people have been vaccinated now..." (P1)

"I believe God will protect me as long as I have this baby in my womb..." (P3)

Pregnant women adjusted to the various challenges that arise during the pandemic (Mortazavi & Ghardashi, 2021). These adjustments include improving physical health and the immune system by exercising, drinking adequate fluids, getting enough sleep, and consuming healthy foods. Furthermore, they seek support by expressing what they feel to others (Hashim et al., 2021). The participants realized that the COVID-19 pandemic situation has lasted more than a year, therefore they feel it is important to adapt and reduce the risk of transmitting the virus. They also have positive faith and believe that God will always protect them and their unborn babies. In addition, they believe in vaccination programs for the wider community.

LIMITATION OF THE STUDY

Because of the pandemic, only Zoom and WhatsApp platforms were available for in-depth interviews. As a result, nonverbal expressions that reveal information about psychological experiences were not observed as well as they could have been.

CONCLUSION AND RECOMMENDATIONS

The interview results with 10 participants which were analyzed using Interpretative Phenomenological Analysis (IPA) led to 9 main themes. These themes include (1) considering COVID-19 as scary, (2) anxiety due to more risk of contracting the virus during pregnancy, (3) increased stress, (4) became constrained due to limited activities, (5) couples became the main support, (6) the support of those around create positive feelings, (7) became more disciplined in implementing health protocols, (8) were more active in using social media, (9) and got used to the changing situation of the pandemic. This study found that pregnant women perceived COVID-19 as scary, causing anxiety, stress, and feelings of restraint. They tried to seek support from partners and people around them, therefore new habits were formed. These habits include discipline in health protocols, being active on social media, and adapting to the pandemic situation. Further research is needed to collect data through focus group discussions in order to develop interventions for

managing psychological issues among pregnant women in crisis situations.

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ETHICAL CONSIDERATIONS

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Conflict of Interest statement

The author declares that there is no conflict of interest.

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