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HASIL PENILAIAN SEJAWAT SEBIDANG ATAU PEER REVIEW
KARYA ILMIAH: JURNAL ILMIAH INTERNASIONAL BEREPUTASI

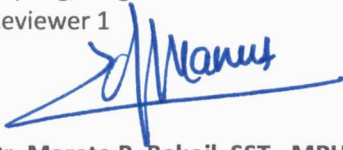
Judul Jurnal Ilmiah (Artikel)	:	Cognitive Behavior Therapy Lowers Anxiety Levels of Pregnant Women during the COVID-19 Pandemic at Sikumana Health Center
Jumlah Penulis	:	3
Status Pengusul	:	Penulis ke 2
Penulis Jurnal Ilmiah	:	Yuliana Dafroyati*, Ririn Widyastuti, Suparji Suparji
Identitas Jurnal Ilmiah	:	a. Nama Jurnal : Open Access Macedonian Journal of Medical Sciences b. ISSN : 1857-9655 c. Nomor/Volume : 10/G d. Edisi (Bln/thn) : Februari/2022 e. Penerbit : Scientific Foundation SPIROSKI, Skopje, Republic of Macedonia f. Jumlah Halaman : 4 Halaman (596-599) g. DOI : https://doi.org/10.3889/oamjms.2022.9585 h. Jurnal URL : https://oamjms.eu/index.php/mjms/article/view/9585/7617
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Cognitive Behavior Therapy (CBT) lowers Anxiety Levels of Pregnant Women during the Covid 19 Pandemic in Health Centers

by Ririn Widyastuti

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Cognitive Behavior Therapy (CBT) lowers Anxiety Levels of Pregnant Women during the Covid 19 Pandemic in Health Centers

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Abstract

Background: Corona virus disease (Covid 19) is an infectious disease caused by the SARS-CoV-2 virus. Pregnant women are considered a vulnerable or at-risk group during covid-19. Pregnancy during the covid-19 pandemic can cause high anxiety for pregnant women. Cognitive behavior therapy (CBT) interventions used can prevent the occurrence of anxiety and depression of pregnant women.

Aim: to find out the influence of cognitive behavior therapy (CBT) of pregnant women who experience anxiety during the covid 19 pandemic at Sikumana Health Center, Kupang City, East Nusa Tenggara Province, Indonesia.

Methods: Quasi experimental design with pre design and post test design at Sikumana Health Center, Kupang City, East Nusa Tenggara Province, Indonesia. The sample of 80 respondents consisted of 40 intervention group respondents and 40 respondents of the control group. Taylor Minnesota Anxiety Scale (TMAS) questionnaire was used as an instrument in this study. Intervention was held by giving CBT therapy for 10 sessions of meetings in an hour. The control group was given treatment in the form of minimum midwifery standard care (10T) while the intervention group was given therapy in the form of CBT and minimum midwifery standard care (10T). The control group was given CBT treatment twice a month in 10 encounters with stages of identification, cognitive restructuring, identification and correction and mind notes. The Mann Whitney Test was used as data analysis techniques in this research. Thus, SPSS was used as a data analysis application.

Results: There was a significant difference between the pretest TMAS score and after the CBT intervention. There was a decrease in the level of anxiety, namely from the TMAS pretest score of 44.19 to 28.70 and the value Z pretest -1,769, Z post test -5,204 and $p = 0.000$ ($p < 0.005$). In the control group, there was no meaningful difference between the TMAS pretest and posttest scores. Conclusion: Cognitive Behavior Therapy (CBT) effectively lowers anxiety levels in pregnant women during the Covid 19 pandemic at Sikumana Health Center, Kupang City, Indonesia.

Introduction

Corona virus disease (COVID-19) is an infectious disease caused by the SARS-CoV-2 virus. WHO raised the status of covid-19 globally to a worldwide pandemic including Indonesia [1]. The Covid 19 pandemic causes global impacts including general health and mental health. The high cases of Covid 19 increase the risk of depression and anxiety [2]. Pregnant women are considered a high-risk population of Covid 19 [3], [4]. Pregnancy is a natural process that occurs in women, ranging from conception to birth with physical, emotional and social changes [4]. During pregnancy there are physiological changes and hormonal changes that decrease immunity so that they are susceptible to get infected [2]. Covid 19 pandemic has a psychological impact on pregnant women. It increases anxiety during pregnancy [3].

Some studies report that the period of pregnancy is a time characterized by an increased risk of emotional disorders such as depression, anxiety and trauma-related disorders [5]. About 21% of pregnant women suffered from anxiety during the Covid 19 and significant predictors of anxiety during the pandemic included the number of pregnancies, practices regarding Covid 19, Covid 19 anxiety, depression, and social support [4]. During pandemic,

pregnant women in the second and third trimesters of pregnancy were more worried; the total health anxiety score was significantly higher among pregnant women in the third trimester of pregnancy [6]. The prevalence of anxiety of pregnant women in China is higher during Covid 19 than before Covid 19. During pandemic, pregnant women in the second and third trimesters were more worried about the condition. Thus, the anxiety score was highest in the third trimester pregnant women [3].

One way to deal with mental health problems such as anxiety and depression is to use behavioral cognitive therapy (CBT). CBT intervention is effectively given to postpartum mothers to prevent the occurrence of depression and anxiety. CBT was done in 9 weeks, carried out every week with one hour, can meaningfully reduce the incidence of depression in post partum mothers [7]. Other studies showed that the effect of Mindfulness-integrated Cognitive Behavior Therapy in pregnant women showed significantly lower reductions in the average scores of anxiety and depression in the experimental group than the control group [8].

The purpose of this study was to find out the effect of cognitive behavior therapy (CBT) on anxiety in pregnant women during the Covid 19 pandemic at Sikumana Health Center, Kupang City, East Nusa Tenggara Province, Indonesia.

Methods

Design of the study

Quasi experimental design with pre design and post test design at Sikumana Health Center, Kupang City, East Nusa Tenggara Province, Indonesia.

Participants

The population in this study was pregnant women in the working area of Sikumana Health Center, Kupang City, East Nusa Tenggara, Indonesia which amounted to 508 respondents. This study was held from January to May 2021. Purposive random sampling was used as a sampling technique. The inclusion criteria in this study were pregnant women trimester I, II and III in the working area of Sikumana Health Center, Kupang City and they were willing to be studied. The exclusion criteria in this study were pregnant women with a history of previous mental disorders and a history of psychotropic substance use. The sample count was determined based on Slovin's 80 respondents consisting of 40 control groups and 40 intervention groups. The independent variable in the study was cognitive behavior therapy (CBT). Dependent variables were anxiety levels and outside variables were maternal age, education, gestational age and gravida.

Instrument

Researchers used a questionnaire as an instrument. Taylor Minnesota Anxiety Scale (TMAS) was used in this study. The questionnaire consists of 50 questions with alternative answers of 1 for 'yes' and 0 for 'no'. A respondent expressed anxious when the TMAS score ≥ 21 and was not anxious when $TMAS \leq 21$. The category of anxiety level was divided into 3, namely low anxiety with a TMAS score of ≤ 20 , moderate anxiety with a TMAS score of 20 - 35 and severe or high anxiety with a TMAS score of ≥ 25 .

Procedure

Ethical clearance was obtained before the collection of data based on the research permission letter no LB.02.03/1/0113/2020 dated December 16, 2020 from the Health Polytechnic Ministry of Health Kupang. Data collection was done by giving information to the respondents directly at the time of visit to the health center. Once the respondent met the criteria of inclusion and exclusion, the respondent signed an informed consent as a sign of approval that they agreed to participate in research activities for 10 sessions of meetings in an hour. Respondents were randomly selected as many as 80 respondents. Then, respondents filled out the TMAS questionnaire. After completing the TMAS questionnaire, respondents were divided into two groups, namely the intervention group and the control group. The control group was given treatment in the form of minimum midwifery standard care (10T) while the intervention group

was given therapy in the form of CBT and minimum midwifery standard care (10T). The intervention group was given CBT treatment twice a month in 10 encounters with stages of identification, cognitive restructuring, identification and correction and mind notes.

Data analysis

The data analysis technique in this study quantitatively analyzed differences in anxiety of pregnant women during the Covid 19 period in pretest and post test collection using the Mann Whitney Test. SPSS software was used in analyzing the data.

Results

Table 1 The Frequency distribution characteristics of demographic data intervention and control group at Sikumana Health Center, Kupang City, East Nusa Tenggara (n=80)

Variable	Intervention/CBT (n=40)	Control (n=40)
Age		
High risk (<20 years old)	2 (5.0%)	0 (0.0%)
Normal (20-35 years old)	28 (70.0%)	33 (82.5%)
High risk (> 35 years old)	10 (25.0%)	7 (17.5%)
Education		
Junior high school	6 (15%)	6 (15%)
Senior high school	24 (60%)	23 (57.5%)
Diploma	1 (2.5%)	1 (2.5%)
Bachelor	9 (22.5%)	10 (25%)
Occupation		
Housewife/unemployed	27 (67.5%)	27 (67.5%)
Civil servant	4 (10%)	5 (12.5%)
Self employed/entrepreneurial	9 (22.5%)	8 (20%)
Gestational age		
Trimester I	5 (12.5%)	6 (15.0)
Trimester II	16 (40%)	15 (37.5%)
Trimester III	19 (47.5%)	19 (47.5%)
Gravida		
Primigravida	20 (50%)	18 (45%)
Multigravida	19 (47.5%)	20 (50%)
Grand multipara	1 (2.5%)	2 (5.0%)

Table 1 shows that most of the respondents' ages were 20-35 in either the intervention or control group. In education aspect, most of them were graduated from high school. Thus, in occupation aspect; most of the respondents were unemployed. Most gestational ages were in the second and third trimesters and belong to the primigravida and multigravida groups.

Tabel 2 Anxiety Level of Pregnant Women at Sikumana Health Center, Kupang City, East Nusa Tenggara, Indonesia (n =80)

Variabel	Intervention/CBT (n=40)	Control (n=40)
Pre-Test		
No anxiety	5 (12.5%)	0 (0.0%)
Low anxiety	17 (42.5%)	2 (5.0%)
Moderate anxiety	18 (45%)	31 (77.5%)
High anxiety		7 (17.5%)
Post Test		
No anxiety	4 (10%)	0 (0.0%)
Low anxiety	21 (52.5%)	2 (5.0%)

Moderate anxiety	14 (35.0%)	31 (77.5%)
High anxiety	1 (2.5%)	7 (17.5%)

Table 2 shows that 18 respondents (45%) experienced moderate anxiety in the intervention group. While 7 respondents (17.5%) and 31 respondents (77.5%) are highly and moderately anxious in the control group. Post-test results shows that there is a decrease in stress levels in the intervention group / CBT, namely high anxiety to 1 respondent (2.5%). Thus, there is no change of anxiety level in control group.

Table 3 Cognitive behavior therapy lowers Anxiety Levels of Pregnant Women during Covid 19 at Sikumana Health Center in Kupang City, East Nusa Tenggara Province, Indonesia

Characteristi c	TMAS Pretest		TMAS Posttest		Z		p-value	
	Mea n Rank	Sum of Ranks	Mea n Rank	Sum of Ranks	Pretes t	Posttes t	Pretes t	Posttes t
CBT	44.4 9	1779.5 0	28.7 0	1148.0 0	-1.769	-5.204	0.077	0.000
Kontrol	36.5 1	1460.5 0	52.3 0	2092.0 0				

Table 3 shows that there is a meaningful difference between the TMAS pretest score and after being given CBT treatment. There is a decrease in the level of anxiety, namely from the TMAS pretest score of 44.49 to 28.70 and the value Z pretest -1,769, Z post test -5,204 and p = 0.000 (p<0.005). However, in the control group, there is no meaningful difference between the TMAS pretest and posttest scores.

Discussion

Table 2 shows that most pregnant women experience low and moderate anxiety during pandemics in both the intervention group and the control group. Low anxiety levels are 17 respondents (42.5%) and moderate 18 respondents (45%) in the intervention group. The control group showed moderate anxiety 31 respondents (77.5%) and 7 respondents (17.5%) with high anxiety. This is in accordance with the results of research that shows that 93% of pregnant women experience anxiety and stress infected with Covid 19. The mother was worried about being infected with Covid 19 and worried about her pregnancy [2]. A cross-sectional study of 205 pregnant women in Tabris Iran showed that the average anxiety score was 3.79 (3.39). Anxiety among pregnant women during the Covid 19 is influenced by the level of education, partner support, and gravida [9]. The study showed that most of the respondents' education was high school, with 24 respondents (60%) in the intervention group and 23 respondents (57.5%) in the control group. Most of the respondents were primigravida and multigravida in the second trimester and third trimester in both the intervention group and the control group. The average of total anxiety score was 22.3 ± 9.5 , 24.6 ± 9.3 and 25.4 ± 10.6 in the first, second and third trimesters of pregnancy, respectively. 9, 13 and 21% of women experience high anxiety in the first, second and third trimesters of pregnancy. During Covid 19, pregnant women in the second and third trimesters were more worried and anxious during the pandemic. Pregnant women in trimesters II and III were more anxious and worried about getting sick and not infected, thus had more concerns about the disease [10].

Table 3 shows that there are differences in anxiety levels of pregnant women in the intervention group before and after CBT intervention. The anxious score before being given CBT was 44.49, after therapy was given became to 28.70. So it can be concluded that CBT can reduce anxiety of pregnant women during the covid 19. The results of the post-test score difference analysis shows a coefficient of z of -5,204, p=0.000 (p<0.005). This means that there is a difference in anxiety levels of pregnant women during covid 19 in the intervention group after being given CBT therapy. In the intervention group that got CBT interventions, they had lower anxious scores than in the control group that did not get therapy. This means that the research hypothesis is proven.

Pregnancy, childbirth and postnatal can cause stress, hence increase anxiety of the mother and her partner. Anxiety is a whole psychological process that causes changes in cognitive, affective, psychological and behavioral levels [11]. Anxiety disorders are a form of mental disorder. Anxiety disorders often occur during pregnancy up to 12 months after delivery and can have a negative impact on the mother, fetus and baby [12].

Anxiety disorders are influenced by genetic factors, environmental factors and epigenetic factors [12]. Evidence-based psychotherapy (particularly cognitive behavioral therapy) and psychoactive medications (particularly serotonergic compounds) are both effective, facilitating patients' choices in therapeutic decisions [12]. This statement is supported by the results of previous research explained that CBT interventions are effectively given to postpartum mothers to prevent the occurrence of depression and anxiety. CBT is done in 9 weeks, carried out every week with 1 hour session can meaningfully reduce the risk of depression in post partum mothers [7]. The results of another study showed that the administration of the effects of Mindfulness-integrated Cognitive Behavior Therapy of pregnant women showed significantly lower reductions in the average scores of anxiety and depression in the experimental group than in the control group [8]. Anxiety disorders during pregnancy can cause serious consequences for both the mother and fetus. CBT therapy is a psychosocial treatment that has been empirically proven to reduce anxiety disorders [13].

Conclusion

Cognitive behavior therapy (CBT) effectively lowers anxiety of pregnant women during Covid 19 at Sikumana Health Center, Kupang City, Indonesia. The recommendation of this study is that a further research related to emotional support for pregnant women by family and health workers is needed.

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