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Short Note

Stressors during pregnancy and relationship with socio-personal variables

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Abstract

The present study was undertaken with the specific objectives to assess the stressors during pregnancy and to determine the factors affecting the stress. The study was conducted on 150 pregnant women who enrolled themselves in the Zonal Hospital, Dharmshala and Civil Hospital, Palampur for their antenatal checkups. The data were collected with the help of interview schedule and standardized scales. The results of the study revealed that women suffered from various types of stressors during pregnancy (gain of new family members, going on pleasure trips, change in eating habits, social activities etc.). Caste and income were significantly related with the stress experienced during pregnancy.

Key words: Stressors, pregnancy, socio-personal variables.

Modern life is full of stress. Stress on individuals ranges from personal day-to-day life to their organizational activities. In this changing environment, participation, interaction, transaction, planning and regulations become key issues, each with its own frustrations attached.

The term "stress" is used to denote a force, pressure, or strong influence acting upon a person or a physical object. Stress is the inability to cope with a perceived threat to one's physical, mental, emotional and spiritual well being that in turn affects one's physical health. It is also defined as a mental and physical condition that occurs at any time and one must adjust or adapt to such condition. Stress is felt by every human being while facing life's challenges. The stressor is the cause and the physiological response is the stress.

All families experience stress and strains throughout their natural history. The major developmental stressor proving events of stress of families coincide with the major life events that occur across their life cycle. The events of births, divorce, death, leaving the nest and getting married can be perceived as a stress by families especially as it becomes necessary for them to adapt to life transitions. Kitson (1992) reviewed the researches done in 1980's and concluded that there were multiple consequences of divorce. First were the economic, social and psychological effects of divorce on individuals and the corresponding implications on society. Secondly, divorce produces a financial and institutional burden on society's legal and human service system. It also has an impact on child rearing and the future of the family. One of the most important psychological hazards associated with the prenatal period is the maternal stress that highlights general emotionality over a long period of time. It is natural to fret about what you eat, drink, think, feel, and do. It is also perfectly normal to worry about whether your baby is healthy, how this new person

will change your life and relationships, and whether you're truly up to the task of parenthood There are many causes of maternal stress, most common of which are the following: not wanting a child, marital economic difficulties, process of labor, physical discomforts that are severe, feeling of inadequacy for the parental role, fear that something will happen to the child, low socio-economic status of the family, an unaffectionate husband and single parent. Stress in mothers may cause chemical changes in secretion of endocrine system and developing muscle tensions which would affect the developing child. Intense stress is associated with a higher rate of miscarriages, premature births, low birth weights, newborn irritability, respiratory illness, digestive disturbances and complications during labor. The study indicated that stress during pregnancy is associated with preterm birth and lower birth weight and their work also indicated that maternal anxiety is related to more active and irritable new born behavior.

Random sampling procedure was adopted for the present study. The study was conducted in district Kangra of Hiamchal Pradesh A list of medical blocks was obtained from the concerned Block Development Officer and then two hospitals namely Civil Hospital, Palampur and Zonal Hospital, Dharamshala were selected. Then permission was taken from the CMO, Civil hospital, Palampur and M.S. Zonal Hospital, Dharamshala to personally interview the respondents (pregnant women) who registered themselves in the hospitals for OPD and delivery. Two blocks namely Panchrukhi and Dharamshala were randomly selected. The pregnant women in last trimester of their pregnancy were selected. A total of 150 pregnant women and their neonates formed the sample. The tools for data collection were self structured interview schedule and standardized scales. A personal interview method was used to meet the requirement of the various objectives of the present study.

Table 1 shows that majority (38.66 %) of the respondents experienced stress during past one year when there was an addition of a new family member while 16 per cent of the respondents experienced stress during the past one year when there was a trouble with neighbours, when they started or stopped working and when there was a change in working conditions. It was also noticed that 37.66 per cent of the respondents were stressed when they went on a pleasure trip and thirty per cent felt stress when self or family member was unemployed. For 24.66 per cent of the respondents, changes in sleeping habits were the stress events during the past one year. 23.33 per cent of the respondents felt stress as they had to look after an ill family member. Stress during the life time was felt by 15.33 per cent of the respondents when there was a gain of a new family member. 10 per cent of the respondent felt stress when a baby girl was born in the family. Four per cent of the respondents experienced stress when there was a change in sleeping habits, working condition, when there was trouble with the neighbours, while appearing in examination and when they went on a pleasure trip. Similarly, Fatoye *et al.* (2004) studied emotional distress and its correlates among Nigerian women in late preganacy. The results showed that pregnant women had significantly higher levels of anxiety and higher levels of depression than their non

Table 1. Stressors experienced by the respondents

Sr.No.	Stressor	Past one year (%)	Life time (%)
1	Going on field trips	37.33	4.00
2	Begins or stops work	16.66	3.33
3	Change in eating habits	34.66	1.33
4	Change in social activity	24.33	1.33
5	Reduction in number of family functions	18.00	2.66
6	Gain of new family member	38.66	15.33
7	Birth of daughter	27.33	10.00
8	Change in sleeping habits	24.66	4.00
9	Change in working conditions	16.00	4.00
10	Trouble with neighbor	16.66	4.00
11	Appearing for examination or interview	20.00	4.00
12	Self or family member unemployed	30.00	1.33
13	Illness of family members	23.33	1.33
14	Major personal illness injury	18.00	1.33

pregnant controls, where four factors (age, level of education, socio economic status and parity) were evaluated. In a similar study at Pittsburgh, USA, Stancil *et al.* (2000) found that younger age, higher income, lower education and experience of.discrimination, both racial and sexual were related to greater perceived stress which had an adverse effect on pregnancy outcomes.

Relationship of socio personal variables with anxiety

Table 2 shows that caste had a negative and significant relationship with low and high levels of anxiety. Respondents who belonged to the general caste category experienced a low level of anxiety whereas those who belonged to the scheduled caste experienced a high level of anxiety.

The findings of present study are also authenticated by Maziak *et al.* (2002) who studied socio demographic correlates of psychiatric morbidity among low income women in Syria. The study revealed that the prevalence of psychiatric distress was 55.6 per cent. Predictors of women's mental health in logistic regression analysis were physical abuse, women's education, polygamy, residence, age and age at marriage.

Table 2. Relationship of socio-personal variables with anxiety

Variable	Level of anxiety	Respondents	Correlation
Caste	Low	73 (48.66)	-0.05*
	Moderate	7 (4.66)	0.25
	High	70 (46.66)	-0.17*
Income	Low	73 (48.66)	0.22
	Moderate	7 (4.66)	-0.48
	High	70 (46.66)	-0.014*

*Significant at 5% level of the significance
Figures in parentheses are the per cent values

The data further reveal that income also had a negative and significant relationship with high level of stress. Age and qualification had non significant relationship with stress.

Similar findings were reported by Karen (2004) who studied the relationship between social support, family pressure on anxiety and stress during pregnancy. Results of the study indicated that family and income pressures were related to anxiety and stress during pregnancy and that women with an emotionally supporting husband had lower anxiety.

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