

OVERVIEW OF MOTHER'S ANXIETY LEVEL IN PARTING IN THE ROMAULI CLINIC IN 2025

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ARTICLE INFO	ABSTRACT
Diterima: 05 September 2026 Direvisi: 10 September 2026 Disetujui: 18 September 2026 Tersedia Daring: 25 September 2026	This study aims to analyze the description of the anxiety level of mothers giving birth at the Romauli Clinic in 2025. Based on the results of the analysis and processing of data regarding the anxiety level of mothers giving birth at the Romauli Clinic in 2025, the following can be concluded: Based on the findings of the research that has been conducted regarding the anxiety level experienced by mothers giving birth at the Romauli Clinic in 2025, it was found that more mothers experienced severe anxiety and some experienced moderate anxiety. This is caused by mothers being too anxious, afraid and lacking information about childbirth. To deal with these problems, emotional and spiritual support is provided, providing loving care for mothers, and encouraging mothers so that mothers feel comfortable, calm, not alone, and more confident in facing childbirth. Referring to research findings related to the level of anxiety experienced by mothers giving birth at the Romauli Clinic in 2025, it is known that in terms of age characteristics, there were 14 respondents in the age range of 20–35 years (100), based on education, the majority were high school graduates (93%), and a minority of college graduates (7%). Based on parity, the majority were primigravida mothers (57%), and the minority were multigravida mothers (43%). Based on occupation, the majority were housewives (14) (100%). So, based on the description of the characteristics above, it proves that maternal anxiety in childbirth is also influenced by education, age, parity, and occupation. And to handle the above problems, mothers are given an understanding of the birthing process, as well as providing good support and health services, so that mothers feel that childbirth is not as scary as they think.

ABSTRACT
Kata kunci: <i>Gambaran, Tingkat Kecemasan, Ibu, Bersalin</i> Penelitian ini bertujuan untuk menganalisis Gambaran Tingkat Kecemasan Ibu Bersalin Di Klinik Romauli Tahun 2025. Berdasarkan hasil analisis dan pengolahan data mengenai tingkat kecemasan ibu bersalin di Klinik Romauli tahun 2025, dapat disimpulkan hal-hal berikut: Berdasarkan temuan dari penelitian yang telah dilakukan terkait tingkat kecemasan yang dialami oleh ibu bersalin di klinik romauli tahun 2025, dimana didapat kan lebih banyak ibu yang mengalami kecemasan berat dan sebagian mengalami cemas sedang. Hal ini disebabkan karena ibu terlalu cemas yang berlebihan, takut dan kurangnya mendapat informasi tentang persalinan Untuk menangani masalah tersebut diberikan dukungan emosional, spritual, memberikan asuhan sayang ibu, serta memberikan semangat kepada ibu supaya ibu merasa nyaman, tenang, tidak merasa sendiri, dan semakin percaya diri dalam menghadapi persalinan. Mengacu pada temuan penelitian terkait tingkat kecemasan yang dialami ibu bersalin di Klinik Romauli pada tahun 2025, diketahui bahwa dari segi karakteristik usia, terdapat 14 responden

yang berada dalam rentang usia 20–35 tahun (100), berdasarkan pendidikan mayoritas SMA 13 orang (93%), dan minoritas perguruan tinggi 1 orang (7%). Berdasarkan paritas mayoritas ibu primigravida 8 orang (57%), dan minoritas ibu multigravida 6 orang (43%). Berdasarkan pekerjaan mayoritas ibu IRT 14 orang (100%). Jadi berdasarkan gambaran karakteristik diatas membuktikan bahwa kecemasan ibu bersalin juga dipengaruhi oleh pendidikan, usia, paritas, dan pekerjaan. Dan untuk menangani masalah diatas diberikan pemahaman kepada ibu mengenai proses persalinan, serta memberikan pendampingan dan pelayanan kesehatan yang baik, agar ibu merasa bahwa persalinan tidak seseram yang dia pikir kan.

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1. INTRODUCTION

Normal delivery is the process of a baby leaving the womb, occurring at full-term gestation, between 37 and 42 weeks, and occurring spontaneously through the vagina. This process generally occurs with a cephalic presentation (the baby's head is down) and lasts a maximum of 18 hours. Normal delivery is not accompanied by complications for either the mother or the fetus (Norlina, 2022) Anxiety is an emotional state characterized by feelings of helplessness, an inability to act rationally, and excessive fear and worry. This condition can affect the body's physiological responses and impact the labor process. Women who are dependent, anxious, or have a high level of fear tend to experience longer labors. Psychological stress, which is a form of emotional stress response, has been shown to have a significant physical impact on the labor process. Generally, both first-time mothers (primigravida) and those with experience still feel anxious and panicky during labor (Fransisca & Tahun, 2023).

Anxiety is an unpleasant emotional state characterized by restlessness, tension, and the appearance of abnormal hemodynamic symptoms. These symptoms arise as a result of activation of the sympathetic, parasympathetic, and endocrine nervous systems. Anxiety is usually caused by uncertain situations, resulting in feelings of worry, unease, and even fear. Anxiety can also be defined as a psychological and behavioral response manifested through subjective worry and excessive tension. This condition often arises as a form of an individual's inability to control situations perceived as threatening or emotionally challenging (Rorrong et al., 2021).

Psychological factors play a crucial role in determining the success of labor. A mother's fear and anxiety can be a major contributor to prolonged labor. This is related to increased cortisol levels due to stress, which can lead to inadequate uterine contractions, thus inhibiting cervical dilation. Fear and anxiety are also known to be major causes of intense pain during labor. This emotional tension can impact the effectiveness of uterine contractions and delay cervical dilation, prolonging labor and increasing the risk of complications (Arfiah, 2018)

According to research conducted by Arisona, the majority of respondents (8 people or 57.15%) experienced moderate anxiety, while a small portion of respondents (2 people or 14.28%) experienced high levels of anxiety out of a total of 14 respondents. Various factors such as age, education level, and the information available also influence the level of anxiety. Anxiety is an emotional condition that causes individuals to feel uncomfortable, which appears in the form of feelings of unhappiness, worry, and unease. Based on existing theory, all of these factors have an influence on a person's anxiety level. The results above are approximate, all mothers giving birth (13 people or 92.85%) were in the age range of 20–45 years. Researchers argue that the older the mother, the higher the pattern of thinking and acting. This makes individuals better able to face and anticipate problems, including in managing anxiety. In line with the theory that has been explained, maturity of age supports a more mature mindset and readiness in facing various situations, including the birth process, thus helping to reduce anxiety levels (Prabawani, 2015).

Based on the research results based on the respondents' educational characteristics, it was found that the majority of respondents, namely 9 people (64.29%) of the total 14 respondents, had a high school education. The higher the education level of the mother giving birth, the easier it is for her to receive information provided, including information about the birth process. Although low formal and informal education can be a barrier to understanding important values, individuals with higher education still show the ability to respond to anxiety in a more focused manner. A good education allows someone to better understand the information received, including information about the stages of labor, thereby helping to reduce the level of anxiety felt.

Anxiety itself is a feeling of worry or uncertainty that has no specific object, and is often accompanied by feelings of helplessness. Although anxiety reactions persist in primigravida mothers in labor, most respondents experience moderate levels of anxiety. This is influenced by factors such as maturity and relatively high levels of education, as well as prior information or news they have received about the labor process. This knowledge, coupled with the ability to accept direction from health professionals, also helps reduce the level of anxiety in laboring mothers (Ns Agustin & Kep, 2022).

A preliminary survey conducted at the Romauli Clinic in Medan Marelan found that most mothers presenting during the first stage of labor experienced high levels of anxiety. This anxiety not only impacts the mother's psychological well-being but also directly impacts the delivery process. Some cases even indicate complications in the form of prolonged labor. This prolonged labor occurs because increased anxiety can inhibit effective uterine contractions, thus delaying cervical dilation. Consequently, labor takes longer and poses potential risks to both the mother and the fetus (Ramie & Kep, 2022).

Based on the background described above, the author is interested in conducting research on the level of anxiety among women giving birth at the Romauli Clinic in 2025, specifically starting from the preparation stage for childbirth. This research is expected to provide useful information regarding the extent to which anxiety affects the labor process and the factors that influence this level.

2. RESEARCH METHODS

Research on the Description of the Anxiety Level of Mothers Giving Birth in the Clinic Romauli 2025, namely nature Descriptive with objective For know level anxiety Mother giving birth based on a number of characteristics Mother. Population is all over amount object or subjects who have characteristics and qualities certain conditions determined by researchers For studied and drawn the conclusion. which becomes population that is all over Mother giving birth who did childbirth at the clinic Romauli during in 2025. (Roflin et al., 2021) .

Population in study This is Mother childbirth undergoing childbirth at the clinic Romauli in the period from May 26 to June 1, 2025. The sample is part from population that has characteristics certain and considered can represent overall population. Taking sample conducted so that research more efficient, without must involving all over member population. (Roflin et al., 2021) . The number of sample of 14 people. Taking technique sample in study This done in a way *accidental sampling*. *Accidental sampling* is technique taking samples taken in a way coincidence, that is with choose respondents who are No on purpose or spontaneous encountered by researchers and meet the requirements criteria that have been determined. (respondent). (Henny, 2024) This matter become focus main in research Because own influence to the phenomenon being studied and has value that can be measured or observed. Variable is all something that can measured or observed and have variation. (Et al., 2024). In the research this, the variable used that is variables single, appropriate with approach study descriptive purposeful For give description or description to something condition or phenomenon (Qiftiyah, 2018).

Definition operational is description or description from variables research that can measured in a way real and clear through indicators certain. The purpose of definition operational is For clarify meaning variables so that can used as base in data collection, measurement, and analysis in study. Measurement done use instrument in the form of questionnaire that has been arranged based on theory or guidelines standard anxiety with method observational (Asmara et al., 2017)

Instruments used that is Hamilton Rating Scale for Anxiety (HARS-A) questionnaire. In questionnaire There are 14 question items that describe various symptom anxiety, good in a way psychological and somatic (physical), which is felt by the respondent. Each item in questionnaire containing a number of indicator or symptom anxiety certain, and respondents requested For identify the symptoms they have experience. Container where For get data through place Where researching. (Syarif, 2023) this done in the clinic Romauli For research level anxiety Mother giving birth. Research May 26- June 1, 2025 in Kinik Romauli 2025.

Data collected in a way direct through primary data obtained in the field. Researchers obtain data with method do observation use questionnaires given to respondents (Hardika & Arwiyantasari, 2024).

At the stage this, is called as a strategy against subject study For get information or required characteristics in accordance with objective research. This process aim For get accurate, relevant and usable data accountable. (Nursalam, 2015). This research use

method observation use questionnaire. Observation done use monitor in a way direct condition respondents moment is in the Clinic, while questionnaire utilized For obtain data regarding level anxiety Mother giving birth in the first stage, with use Hamilton Rating Scale for Anxiety (HARS-A) instrument. The data collection process was carried out after researchers get permission official from responsible party answer at the clinic Romauli Bd. Romauli Silalahi, SST., M.KM.

Before data collection was carried out, researchers moreover formerly take care of and get ethical test approval study from authorized agency. This is aim For ensure that study done in accordance with principle ethics, including aspect confidentiality, consent participants, and protection to subject study (Pattola, 2019).

3. RESULTS AND DISCUSSION

This research carried out at the Clinic Romauli, which is located at Zeze Futsal, Gang Sepakat, Marelan Pasar 4, during period March to May 2025. Clinic Romauli equipped with 1 room inspection public which has 1 bathroom and 1 place Sleep patient (bed). AC, while in the VK room it consists of from 2 beds Sleep with curtain cover, 1 incubator, 1 table resuscitation, 1 AC, 1 Sterilization Equipment, 1 USG, 2 rooms For patients inside each of them room there is fans, and air conditioners, as well en - suite bathroom, wardrobe small, and Gymball. In the front porch hallway room patient there is 1 TV, 1 dispenser. Clinic Romauli have an open area that is used For prenatal yoga activities. Health workers at the clinic This consists of from one midwife main and seven midwives clinic staff provide various service care roads, including inspection pregnancy, 2D ultrasound, prenatal yoga class, elderly exercise, massage babies, postpartum care, services contraception (KB), pregnancy programs (promil), and immunization. Patients who come No only originate from environment around clinic, but also from a fairly large area Far like Martubung, Belawan, Jakarta, Pekanbaru, and various area other (Henny, 2024).

Research result

This research involving 14 respondents who became subject in study regarding the description of the level of anxiety of mothers giving birth in the clinic Romauli 2025.

Frequency distribution of respondents based on the description of the level of anxiety of mothers giving birth at the Romauli Clinic in 2025.

Table 1. Frequency Distribution of the Level of Anxiety of Mothers Giving Birth at Romauli Clinic in 2025

No. Anxiety	Amount
	F %
1. Light 0 0	
2. Medium 5 36	
3. Weight 9 64	
4. Panic 0 0	
Total 14 100	

Referring to the data presented in the table above, you can know that the level of image anxiety Mother giving birth at the clinic Romauli 2025 found majority level Severe anxiety 9 people (64%), and a minority level Moderate anxiety 5 people (36%) (Abdullah & Ikraman, 2021).

Distribution frequency respondents related level anxiety Mother giving birth at the clinic Romauli 2025 reviewed from factor age, level education, number parity, and type work.

Table 2. Distribution Frequency Characteristics of the Anxiety Level of Mothers Giving Birth in the Clinic Romauli 2025 Based on Education, Parity, Age and Occupation.

Education f %	
1. Junior High School	0 0
2. SMA	13 93
3. Higher Education	1 7
Total	14 100
Parity	
1. Primigravida	8 57
1. Multigravida	6 43
2. Grandemultipara	0 0
Total	14 100
Age	
1. <20 years	0 0
2. 20-35 years	14 100
3. >35 years	0 0
Total	14 100
Work	
1. Housewife	14 100
2. Teacher	0 0
3. Self-employed	0 0
Total	14 100

Based on the information listed in the table above, you can concluded that frequency characteristics description level anxiety Mother giving birth at the clinic Romauli 2025. Based on education, the majority were high school graduates (13 people) and college graduates (1 person) (7%). Based on parity, the majority were primigravida mothers (57%), and the minority were multigravida mothers (43%). Based on age characteristics, the majority were 20-35 years old (14 people) (100%). Based on occupation, the majority were housewives (14 people) (100%) (Agatha & Siregar, 2023).

Discussion of Research Results

After it is done studies about description level anxiety in mothers. giving birth at the clinic Romauli 2025, involving 14 respondents, was obtained a number of findings. findings the will analyzed and discussed based on relevant theories following This.

Description of the Anxiety Level of Maternity Mothers at the Romauli Clinic in 2025.

Based on results Research on the Description of Anxiety Levels of Maternity Mothers in Clinics Romauli 2025 found level anxiety Majority: Heavy 9 people (64%), and minority: Medium 5 people (36%).

Anxiety is something condition marked emotional with feeling No comfortable, anxious, tense, and not uncertain. Feelings This usually appear consequence an unavoidable situation Certain or No known in a way clear, so that cause worry, uneasiness, or fear. Anxiety can also viewed as response psychological reflection in various behavior, which arises Because existence tension over-worry and worry subjectively perceived individual (Ningrum, 2023).

Feeling anxiety, fear, loneliness, and excessive stress can trigger improvement hormone stress like cortisol and epinephrine. Hormones This influential to smooth muscle in the uterus. Increased hormone levels can hinder contraction uterus, which ultimately can slow down the labor process. Labor that is taking place too long (prolonged labor) is risky cause bleeding, good during the labor process (inpartu) or after postpartum (Susanti Tria Jaya et al., 2023).

Based on research conducted by Hardika (2024), it is known that in PMB Atika Dolopo, Regency Madiun, almost half from Mother primipara giving birth experienced level anxiety currently until heavy, namely 13 people (40.6%), while part small other experience anxious light namely 6 people (18.8%). Findings This show that part primiparous mothers face anxiety currently or heavy. Anxiety tend increased at the stage First labor (first stage), and at stage second (second period) there is risk complications like asphyxia, bleeding, and infection. (Hardika & Arwiyantasari, 2024)

According to findings research conducted by Lestari and colleagues (2023), of 21 mothers childbirth that becomes respondents, some big experience anxiety heavy as many as 12 people (42.9%). A total of 9 respondents (32.1%) indicated level anxiety moderate, 7 respondents (25%) experienced anxiety light, and not found respondents who do not experience anxiety The same once. According to researchers that psychological factors hold role important in determine success of the delivery process. The fear and anxiety felt Mother can become reason main duration time childbirth. This is related with improvement hormone cortisol consequence stress, which results in uterine contractions (his) that are not adequate so that inhibit the opening process cervix. Feeling fear and anxiety are also known as reason main the onset of intense pain during labor. Tension emotional This can influence effectiveness contraction uterus and slow down dilation cervix, so that extend duration childbirth and improve risk complications (Djannah & Handiani, 2019).

Based on results observation researchers in the field that description level anxiety Mother giving birth at the clinic Romauli 2025 majority experiencing severe anxiety levels. From observations researchers that Mother giving birth in the first stage of the majority experience anxiety, which is where in matter This Still Lots Mother fear of giving

birth facing the labor process so that cause tension, emotional that can influence contraction uterus and slows down dilation cervix.

In observation in the field mother in the 1st period of majority given technique relaxation in the form of playing gym ball, Rebozo, walking squatting, relaxation of the back and stomach, provides ginger drink, teaches Mother technique good and correct breathing with method blow blow, so that there is minimal tearing and the delivery process is faster due to midwife helper always help Mother giving birth with give directions do technique relaxation breath although There is a number of Mother giving birth No capable centralized right focus on the painful area when do technique breath so that Mother emit power more big. And relaxation This applies to all patients who experience anxiety, because matter this also affects anxiety Mother when Mother No capable arrange breathing with good. With Mother capable do technique breath with okay then can help reduce tension muscles, increase flow oxygen, mother feel relaxed, calm, comfortable and increase confidence Mother in face childbirth. In addition, it can also help reduce the pain felt as well as speed up the labor process (Diana, 2019).

Feelings of anxiety experienced Mother giving birth caused by Because Mother feel afraid, no believe self, worry to baby his Where Mother Afraid baby his defective, no healthy, or No good luck, and always think whether Can become good mother after child his born. This is related with characteristics Mother based on Age 20-35 years The majority is 14 people (100%). Where, the age is increasing old more intense will feel anxious and difficult follow mother 's instructions hear from helper childbirth. Based on educational characteristics, the majority were high school graduates (13 people) (93%), and the minority were college graduates (1 person) (7%). With so, mother with level more education tall tend more capable in make related decisions with himself alone. On the other hand, mother with more education low tend experience difficulty in make decision personal, as well as more often need advice or help For appropriate examination and treatment from power health. Condition This can increase level stress experienced, where stress and anxiety the often caused by limitations information held mother. Based on Parity majority 8 primigravida mothers (57%), and a minority 6 multigravida mothers (43%). where the mothers with parity first (primigravida) tends to experience level more anxiety tall compared to Mother with parity more from one (multipara), because lack of experience in the process of labor previously. Based on Work majority 14 housewives (100%). where mom does n't work (for example Mother House stairs) tend own level more anxiety tall compared to working mothers Because limitations access information, lack of interaction social, and the lack of experience face external pressure House (W. F. H., 2024).

So for reduce anxiety mother, midwife give relaxation so that Mother feel comfortable, calm, relaxed, increasingly believe self as well as the more Spirit in face labor nya. With relaxation provided by midwives can also help reduce anxiety and fear in mothers so that speed up the labor process.

Overview of Maternal Anxiety Levels During Childbirth at Romauli Clinic in 2025 Based on Education, Parity, Age and Occupation.

Based on distribution frequency description level anxiety Mother giving birth based on Characteristics Age 20-35 years the majority 14 people (100%) and Severe Anxiety 11 people (79%).

Sustainable in his research state that range age 20–35 years can increase risk occurrence disturbance health during pregnancy, which is the end can trigger improvement level anxiety Mother approaching the labor process. (Lestari, et al., 2023).

Based on research conducted by Hipson, as many as 64 respondents (77.1%) were Mother with range Age 20–35 years. Age under 20 years and over 35 years moment give birth to known own risk higher maternal mortality tall compared to with group age others. This is possibility caused by immaturity of the reproductive organs in the mother pregnant women not enough from 20 years. While that, the mother who is aged more from 35 years tend experience more Lots complaints, such as easy tired, which can influence condition the uterine muscles become not enough strong For contract. In addition, less than optimal mental readiness can also impact negative, so that increase risk miscarriage, baby born with low birth weight (LBW), and the occurrence of unplanned labor smoothly (Hipson & Anggraini, 2021).

Based on Observation researchers majority Mother majority age 20-35 years experience level anxiety weight and minority experience level anxiety Where increasing age old more intense will feel anxious and difficult follow mother 's instructions hear from helper childbirth (Hipson & Anggraini, 2021)..

Based on education, the majority were high school graduates (13 people) (93%), and the minority were college graduates (1 person) (7%).

According to Lestari, et al., 2023 said that Based on characteristic data education Of the 28 respondents, it was found that that as many as 5 people (17.8%) have education Most recently, 14 people (50%) graduated from high school, and 9 people (32.1%) had a college education. One person with level more education tall tend own opportunity more big For look for service counseling, examination, and treatment from power professional and appropriate medical with conditions experienced, so that handling become more appropriate (Sutcliffe et al., 2023). Mother with education tall usually more independent in take decision related her health. On the other hand, mother with education low tend experience difficulty in take decisions and more often need directions as well as help For access service appropriate health conditions. This can trigger improvement stress and anxiety, which are common due to limitations the information they have (Lestari et al., 2023).

Based on observation researchers that majority mother who does not educated tall experience level anxiety heavy. Where is mother? grimace in pain, crying, and feeling Afraid moment face labor his Because not enough his information yag obtained about health related pregnancy his (Lautan & Savitri, 2021).

Based on Parity majority 8 primigravida mothers (57%), and a minority 6 multigravida mothers (43%).

Based on research conducted by Khoiriah, characteristics respondents seen from amount parity show that Mother with parity high (giving birth) more from three children) totaling 30 people (53.6%), the number of which more big compared to Mother with parity low (gave birth to 3 children or less) namely as many as 26 people (46.4%). Researchers interpret that height amount Mother pregnant with parity tall possibility influenced by culture South Sumatran people who believe that Lots child means Lots fortune. In addition, the low use of the Family program Planning (KB) and lack of knowledge Mother about risk pregnancy and childbirth in parity tall participate play a role. Conditions This can psychological impact mother, improve level anxiety, even potential cause death If No handled with good . Therefore that 's important for Mother For understand risk in order to be able to undergoing the labor process with calm and without anxiety (Djannah & Handiani, 2019). Based on Observation of Anxiety Level Mother giving birth assumed influenced by parity, where the mother with parity first (primigravida) tends to experience level more anxiety tall compared to Mother with parity more from one (multipara), because lack of experience in the process of labor previously (Sutcliffe et al., 2023)

Based on Work majority 14 housewives (100%). According to study Patolla, that the research results are known that characteristics respondents based on work obtained respondents who do not working /housewives as many as 23 respondents (66%), while respondents who work as many as 12 people (34%). (Pattola, 2019)

Anxiety level Mother giving birth influenced by employment status, where mothers who do not work (for example Mother House stairs) tend to own level more anxiety tall compared to working mothers Because limitations access information, lack of interaction social, and the lack of experience face external pressure House (Jaya et al., 2023).

CONCLUSION

Based on the results of the analysis and processing of data regarding the level of anxiety of mothers giving birth at the Romauli Clinic in 2025, the following conclusions can be drawn:

1. Based on the findings of a study conducted on the level of anxiety experienced by mothers giving birth at the Romauli Clinic in 2025, it was found that more mothers experienced severe anxiety and some experienced moderate anxiety. This was caused by excessive anxiety, fear, and a lack of information about childbirth. To address these issues, emotional and spiritual support, loving care, and encouragement were provided to mothers so they felt comfortable, calm, less alone, and more confident in facing childbirth.
2. Referring to research findings related to the level of anxiety experienced by mothers giving birth at the Romauli Clinic in 2025, it is known that in terms of age characteristics, there were 14 respondents in the age range of 20–35 years (100), based on education, the majority were high school graduates (13 people) (93%), and a minority of college graduates (1 person) (7%). Based on parity, the majority were primigravida mothers (57%), and a minority were multigravida mothers (43%). Based on occupation, the majority were housewives (14 people) (100%). So, based on

the description of the characteristics above, it proves that maternal anxiety during childbirth is also influenced by education, age, parity, and occupation. And to address the above problems, mothers are given an understanding of the childbirth process, as well as providing good assistance and health services, so that mothers feel that childbirth is not as scary as they think.

REFERENCES

- Abdullah, V. I., & Ikraman, R. A. S. (2021). *Monograf Penanganan Kecemasan Pada Ibu Hamil Menggunakan Teknik Relaksasi Autogenik*.
- Agatha, S., & Siregar, T. (2023). *Atasi Kecemasan Perawat dengan Terapi Self Healing*.
- Arfiah, A. (2018). Pengaruh Pemenuhan Nutrisi dan Tingkat Kecemasan terhadap Pengeluaran ASI pada Ibu Post Partum Primipara. *Jurnal Kebidanan*, 8(2), 134–137.
- Asmara, M. S., Rahayu, H. S. E., & Wijayanti, K. (2017). Efektifitas Hipnoterapi dan Terapi Musik Klasik terhadap Kecemasan Ibu Hamil Resiko Tinggi di Puskesmas Magelang Selatan Tahun 2017. *URECOL*, 329–334. <https://journal.unimma.ac.id/index.php/urecol/article/view/1389>
- Diana, S. (2019). *Buku Ajar Asuhan Kebidanan Persalinan Dan Bayi Baru Lahir*.
- Djannah, R., & Handiani, D. (2019). Faktor Faktor Yang Mempengaruhi Tingkat Kecemasan Ibu Hamil Menghadapi Persalinan. *Jurnal Ilmu Kesehatan Karya Bunda Husada*, 5(1), 1–8.
- Dkk, W. F. H. (2024). Buku Ajar Metodologi Penelitian. In *UKI Press* (Issue January, pp. 1–90).
- Fransisca, D., & Tahun, O. D. (2023). Pengaruh Komunikasi Terapeutik Bidan dengan Tingkat Kecemasan Ibu Bersalin di Klinik Budi Medika Tahun 2023. *SIBATIK JOURNAL: Jurnal Ilmiah Bidang Sosial, Ekonomi, Budaya, Teknologi, Dan Pendidikan*, 2(8), 2427–2436.
- Hardika, M. D., & Arwiyantasari, W. R. (2024). Kecemasan Ibu Bersalin Primipara dalam Menghadapi Kala I Persalinan Berdasarkan Skor Hamilton Anxiety Rating Scale (Hars). *Jurnal Kebidanan*, 14(1), 47–52. <https://doi.org/10.35874/jib.v14i1.1346>
- Henny, S. (2024). Panduan Praktis Penulisan Karya Tulis Ilmiah. In *Angewandte Chemie International Edition*, 6(11), 951–952. (Issue March, pp. 5–24).
- Hipson, M., & Anggraini, E. K. (2021). Analisis Faktor-Faktor Yang Berhubungan Dengan Persalinan Normal. *Babul Ilmi Jurnal Ilmiah Multi Science Kesehatan*, 13(2), 89–100.
- Jaya, S. T., Susiloningtyas, L., & Nofyanti, E. (2023). Literatur Review: Kecemasan Ibu Dengan Persalinan Lama (Prolong) Kala 1 Fase Aktif. *Jurnal Ilmiah Pamenang*, 5(2), 84–89.
- Lautan, L. M., & Savitri, E. W. (2021). Tingkat Kecemasan Perawat di Masa Adaptasi Kebiasaan Baru. *Jurnal Ilmiah Kesehatan Pencerah*, 10(2), 224–231.
- Norlina, S. (2022). Hubungan Komunikasi Terapeutik Bidan Dengan Kecemasan Ibu Bersalin Di Puskesmas Berangas Kabupaten Barito Kuala Tahun 2021. *Jurnal Keperawatan Suaka Insan (Jksi)*, 6(2), 112–115. <https://doi.org/10.51143/jksi.v6i2.294>

- Ns Agustin, R., & Kep, M. (2022). *Mekanisme Koping, Pengetahuan Dan Kecemasan Ibu Hamil Pada Masa Pandemi Covid-19*. Deepublish.
- Pattola, P. (2019). Gambaran Pengetahuan Ibu Hamil Tentang Persalinan Normal Di Uptd Puskesmas Palakka Tahun 2018. *Jurnal Ilmiah Kesehatan Diagnosis*, 14(2), 160–163. <https://doi.org/10.35892/jikd.v14i2.152>
- Prabawani, E. (2015). *Gambaran Tingkat kecemasan pada ibu post partum di rumah sakit pku muhammadiyah sukoharjo*.
- Qiftiyah, M. (2018). Studi Tingkat Kecemasan Ibu Post Partum Terhadap Kelancaran ASI Pada Ibu Nifas Hari Ke-5 (Di BPM Asri Dan Polindes Permata Bunda Tuban). *Asuhan Kesehatan: Jurnal Ilmiah Ilmu Kebidanan Dan Keperawatan*, 8(2). <https://ejournal.rajekwesi.ac.id/index.php/jurnal-penelitian-kesehatan/article/view/175>
- Ramie, N. A., & Kep, M. (2022). *Mekanisme Koping, Pengetahuan Dan Kecemasan Ibu Hamil Pada Masa Pandemi Covid-19*. Deepublish.
- Roflin, E., Liberty, I. A., & Pariyana. (2021). *Populasi, Sampel, Variabel Dalam Penelitian Kedokteran - Eddy Roflin, Iche Andriyani Liberty, Pariyana - Google Buku* (p. 62).
- Rorrong, J. F., Wantania, J. J. E., & Lumentut, A. M. (2021). Hubungan Psikologis Ibu Hamil dengan Kejadian Hiperemesis Gravidarum. *E-CliniC*, 9(1). <https://doi.org/10.35790/ecl.v9i1.32419>
- Sutcliffe, K. L., Levett, K., Dahlen, H. G., Newnham, E., & Mackay, L. M. (2023). How Do Anxiety and Relationship Factors Influence the Application of Childbirth Education Strategies During Labor and Birth: A Bowen Family Systems Perspective. *International Journal of Women's Health*, 15, 455–465.
- W. F. H., D. (2024). *Buku Ajar Metodologi Penelitian* (Issue January). UKI Press.