

COMPILATION OF A COUNSELING BOOK FOR PRIMIGRAVID COUPLES (NULLIPARA) IN FACING LABOR AND ITS PREPARATION: A QUALITATIVE-INSTRUCTIONAL RESEARCH WITH ADDIE

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ABSTRACT

Introduction: Antenatal Care (ANC) is essential in improving maternal health, especially after delivery by providing women with the opportunity to identify and manage pregnancy complications. **Objectives:** This research aims to create a set of books containing in-depth education about the period of pregnancy before giving birth, the period of childbirth, to the postpartum period by involving all theories and applied practices. **Methods:** The R&D method with the ADDIE theory is used to produce the guidebook. Sampling was carried out using the snowball sampling technique with a sample size of 4 couples. The data were analyzed descriptively to evaluate the effectiveness of the book. **Results:** The product in this study has gone through a validation process by experts in 3 stages and received good reviews in the third stage. The evaluation results showed that all respondents gave positive reviews of the guidebook, where this guidebook helped pregnant women feel safer and overcome anxiety during pregnancy and increased husbands' awareness in providing support and presence. **Conclusions:** This study successfully produced a guidebook for young couples facing childbirth, covering husband involvement, pregnancy exercises, and motivation in reducing anxiety. The respondents' experiences showed that this book successfully helped them feel calm and more involved.

Keywords: Antenatal Care; Husband; Wife

ABSTRAK

Pendahuluan: Perawatan Antenatal (ANC) sangat penting dalam meningkatkan kesehatan ibu, terutama setelah melahirkan dengan memberikan kesempatan kepada wanita untuk mengidentifikasi dan mengelola komplikasi kehamilan. **Tujuan:** Penelitian ini bertujuan untuk menghasilkan satu set buku yang berisi edukasi mendalam tentang masa kehamilan menjelang melahirkan, masa bersalin, hingga masa nifas dengan melibatkan seluruh teori dan praktik terapan. **Metode:** Metode R&D dengan teori ADDIE digunakan untuk menghasilkan buku panduan. Pengambilan sampel dilakukan dengan teknik snowball sampling dengan jumlah sampel 4 pasangan. Data dianalisis secara deskriptif untuk mengevaluasi efektivitas buku. **Hasil:** Produk dalam penelitian ini telah melalui proses validasi oleh para ahli dalam 3 tahap dan mendapat ulasan baik pada tahap ketiga. Hasil evaluasi menunjukkan bahwa seluruh responden memberikan review positif terhadap buku panduan, dimana buku panduan ini membantu ibu hamil merasa lebih aman dan mengatasi kecemasan selama kehamilan serta meningkatkan kesadaran suami dalam memberikan dukungan dan kehadiran. **Kesimpulan:** Penelitian ini berhasil menghasilkan buku panduan bagi pasangan muda dalam menghadapi persalinan,

meliputi keterlibatan suami, senam hamil, dan motivasi dalam mengurangi kecemasan. Pengalaman responden menunjukkan bahwa buku ini berhasil membantu mereka merasa tenang dan lebih terlibat.

Kata Kunci: *Perawatan Antenatal; Suami; Istri*

INTRODUCTION

Antenatal Care (ANC) plays a crucial role in enhancing maternal health outcomes, particularly after childbirth, which marks the culmination of care from preconception through the postpartum period. During ANC sessions, women can identify and address underlying issues or early signs of potential pregnancy complications. This proactive approach can lead to greater utilization of timely and organized emergency obstetric services, thereby motivating women to deliver in health facilities (Hatherall et al., 2016).

In Indonesia, socio-cultural factors on the one hand in urban areas, such as the cultural perception of pregnancy as a healthy state, are also changing, where many women no longer visit midwives but prefer to go directly to obstetricians. On the other hand, traditional beliefs about practices during pregnancy, reluctance to disclose pregnancy too early, the need for a woman to get permission from her partner or close relatives to visit ANC, and the stigma of pregnancy outside of agreement are also problems in rural or remote areas. The phenomena mentioned above should be of concern to midwives as 'normal experts' that pregnancy and childbirth are physiological (Relyea, 1992). In this case, ANC is provided both in public health centers and private clinics by skilled providers, usually midwives, as a facility for women to get 'comfort' in their natural reproductive process. During the visit, many things about pregnancy to postpartum and even parenting patterns can be done (Ahrne et al., 2019) Tetanus toxoid vaccination and preventive management of anemia and preeclampsia, provision of health information related to danger signs during pregnancy, and prevention of transmission of diseases, such as HIV from mother to child (PMTCT) can also be provided (Lundberg et al., 2018).

The involvement of male partners in ANC visits, on this issue, is one very important thing in the psychological accumulation of women in facing childbirth. Therefore, campaigns intended to encourage male participation, and seek to prioritize women who come to ANC with their partners (World Health Organization, 2012) are highly recommended. The involvement of men in ANC has been described as a process of social and behavioral change necessary for them to play a more responsible role in maternal health care with the aim of ensuring the well-being of women and children. Men who accompany their wives to ANC and other maternal health services are

an important factor contributing to the reduction of maternal morbidity and mortality by increasing the likelihood of skilled midwives (Rizkianti et al., 2020).

Various factors can influence or determine the involvement of male partners in ANC. These factors include sociodemographic factors, cultural factors and health facility factors. (Manzi et al., 2014). Socio-cultural factors that are considered to influence male involvement in ANC are beliefs, community norms, gender norms in the community and traditional approaches to ANC. Health facility factors related to ANC in this study were staff attitudes, waiting times, provisions made for men in antenatal clinics and men allowed in the labor ward during labor. The outcome variable (male involvement in ANC) was measured by five main variables. These variables are accompanying partners to health facilities, discussing maternal health problems with partners, providing financial and physical support to partners and planning for emergencies, labor and postpartum care. This became the basis for starting this study which focused on creating a guideline for pregnancy consultations before and after labor involving husbands.

Fear of childbirth (FOC) is a specific and distressing emotion that affects the daily lives of women and men (Dencker et al., 2019). This main thing must be overcome, especially when the woman who is going to give birth is a woman with her first experience. This must be anticipated well in advance so that the outcomes of pregnancy and childbirth can guarantee the welfare of women and newborns. Of course, this requires careful planning to compile a guide to preparing for childbirth for couples who are going to have their first childbirth. The purpose of this study is to create a set of books containing antenatal education guides for couples for better pregnancy and childbirth outcomes as well as the implementation of these guides by referring to a list of structured interview questions to explore the phenomena felt by the respondents in this study. By taking a research and development framework, this study is expected to provide a very large contribution to the welfare of women in Indonesia, especially in approaching childbirth as a very important part of their lives.

METHOD

This research is divided into two stages: development and implementation, with a focus on producing valid and reliable products. In the development stage, researchers followed the Research and Development (R&D) method based on the Borg & Gall model, using the ADDIE theory (Analyze, Design, Develop, Implement, Evaluate) as a framework. ADDIE stands for Analyze, Design, Develop, Implement, and Evaluate (Ozdilek and Robeck, 2009). The ADDIE concept is applied to build performance-based learning, with the philosophy that effective

learning must be learner-centered, innovative, authentic, and inspiring. The process begins with a needs analysis, where researchers evaluate the gap between the need for educational information for couples who are about to give birth and the available materials. After that, researchers design a guidebook, develop content, and validate the product by involving experts in the field of obstetrics.

This research was conducted from March to June 2023. The population that is the focus of the study is couples who are about to give birth. The sample was taken based on certain inclusion criteria, namely couples who voluntarily visit the Depok Jaya Clinic. The sample was taken using the snowball sampling technique. Researchers used this approach because the COVID-19 pandemic conditions limited direct interaction and accessibility. In this study, researchers focused on couples who came for examination in the third trimester before giving birth. Determination of the number of samples in this study was carried out in stages, with an approach that relied on initial participant references. The number of samples will be stopped after the researcher feels that the information obtained is sufficient, namely when the data found begins to show consistent similarities or data saturation is reached.

The sample in this study were 4 couples who came for a check-up in the 3rd trimester before giving birth. The research variables included the effectiveness of the guidebook developed, as well as respondents' perceptions of the material presented. For data collection techniques, this study utilized in-depth interviews. The instruments used were a guidebook as educational material and a question to gather feedback. The researcher gave two questions to the samples, namely "What do you get from applying this birth preparation guidebook for couples?" and "What do you get from applying this birth preparation guidebook for couples?". The data obtained were analyzed descriptively to assess the advantages and disadvantages of the product and its effectiveness in providing education to couples.

RESULTS AND DISCUSSION

Product Development Stages

The development of this product follows the rules in R&D research, through three main stages: product development, product validation by experts, and product revision. In accordance with R&D provisions, at least this development goes through 3 cycles to obtain the final product at this stage before the product may undergo improvements at the next stage.



Figure 1 Physical Form and Product Content Snippets (a) Stage 1, (b) Stage 2, and (c) Stage 3. The results shown in this first stage are still in the form of a 'raw' product, displaying all the material that has been collected and compiled to be validated by obstetrics experts. In the second stage, the product has been validated by experts to obtain the necessary input in the revision. Content gets more serious attention at this stage, considering that content is the message to be conveyed to the reader. In the third stage, the product has been validated twice and the input provided becomes a source of improvement. The appearance of the product becomes much more attractive and more colorful compared to stages 1 and 2.

Validation from experts is a reference for product revision. This first stage of validation revolves around the physical form of the book, the content of the book, and how the book is presented. These three things are the main focus of the experts because the product is used by respondents who are 'laymen' in midwifery science so the product must represent this 'laymanship'.

Table 1. Product Validation by Obstetricians

Validation	Expert		
	J.M. Metha, Skep, MmedEd	Sri Rejeki, SST, Mkes	Dra. Jumiarni Illyas, MKes
1	Physical Form of the Product		
	<i>"This book looks ordinary, making it less interesting to read anywhere. It would be better if the physical design was made more pleasing so that husbands would be</i>	<i>"I believe that even though the physical appearance of a book is not always significant, its appearance still influences reading interest. For respondents</i>	<i>"The target of this product is to be read at leisure, so the physical needs to be made attractive, with more images. The design of the</i>

interested in reading it in their spare time and remind them of their new role as fathers. Using original photos or images can increase the visual appeal, and if using images from other sources, it is important to include references.”

who will become new fathers and mothers, a unique physical design can attract their attention.”

book does not have to be formal or boxy, but can be made more relaxed and informal. This needs to be rethought.”

Product Content

“This book is still a copy-paste or translation that is more suitable for midwives, not for laypeople. Adjustments are needed so that the contents of the book are easily understood by the general public. If it is too theoretical, laypeople will not be interested in reading it, so that the creation of this product is in vain. The content must be truly adjusted to the target respondents to be more relevant and interesting.”

“It is important to distinguish between textbooks and socialization books, because their targets are different. Textbooks contain long theories, while socialization books must be useful for prospective new fathers and mothers. The content of the book needs to be adjusted to the interests of the respondents and must be able to arouse enthusiasm and motivation, so that it is designed to inspire readers.”

“This is a non-formal educational book, so the content should not focus on theory. It is necessary to paraphrase to convey information in an interesting way. Collaboration with a linguist who understands midwifery content is highly recommended, and I can recommend a health language expert for that.”

Product Content Presentation

“The presentation of this book should not resemble a textbook for midwifery students. Instead, the book should answer the questions and concerns of prospective mothers and fathers, and reflect our culture that is not yet fully rooted in

“The presentation of the book should be in the form of questions and answers according to the wishes of prospective fathers and mothers. The questions must be comprehensive, and researchers need to conduct

“This book should be interactive, where the respondents act as questioners and the book functions as a resource person who provides answers directly.”

reading. Therefore, the observations on the internet presentation of the book should to understand their be designed to be more concerns.” interesting and relevant to readers.”

2 Physical Form of the Product

“From the physical, this is more interesting. The boring formal impression is gone, in my opinion.”

“The color of the book can be changed to give a more enthusiastic impression. Bright color choices can increase motivation and attract the attention of readers.”.

“Yes, adding a touch of color that gives enthusiasm is very important. A photo of a husband and wife looking to the future together could be an appropriate symbol, reflecting togetherness and decisions made together. This could be a very evocative logo for the book.”

Product Content

“The content still feels heavy. For example, the philosophy of midwifery does not need to be presented in such a rigid manner, because this book is not for midwives. It should be simplified. The other content is good, but the writing about hormones needs to be reduced. Focus on important and relevant information, such as explaining that calmness requires hormones A, B, and C,

“Some sections still feel heavy and need to be paraphrased. The content should be shortened but still in-depth, encouraging, and focused on information that helps the reader know what to do in a given situation.”

“Some content, such as the flow of physical changes related to pregnancy hormones, should be removed because it is not relevant to this educational book. Other content that feels heavy has also been noted for consideration in rewriting.”

and how these hormones are present.”

Product Content Presentation

“This interactive book is already good with this kind of presentation. The content can be shortened to make it easier to understand.”

“The presentation is very interactive and I really like it. It's a great approach.”

“Good. It's good. I like it.”

3 Physical Form of the Product

“I like the book cover. Very interesting.”

“Good. I like it.”

“Very good. Very interesting.”

Product Content

“The content is as I wanted. Very easy to understand.”

“The content is light now. Good.”

“This is a suitable content for education.”

Product Content Presentation

“The presentation is better because it is given photos. I really like it.”

“I want to have this book. I will be given one later when it is published.”

“As I said before. I really like the presentation.”

From expert validation on the development of this first product, the researcher revised the product based on the comments that had been given. For the development of the product stage 2, the researcher had to work extra hard because the first product had to be completely overhauled from the physical side to the way the content was presented. However, with the comments given by the experts, the direction in product development became clearer even though there might be further revisions regarding the contents included in the product. This content is the core of the product being developed. This second validation becomes the part that determines before the development of the third or final stage in this product development stage. The revision is made at the same time as the development of stage 3. In the final validation stage, the experts gave good comments and were satisfied with the physical form of the book, the content of the book, and the way the book was presented.

Implementation and Evaluation Stage

All respondents were willing to be part of this R&D research so that the product began to enter the implementation stage. The results obtained were that all respondents were very enthusiastic in implementing what was in the product after first being given direct counseling/education by the researcher. At this stage, the sample used was 4 couples considering that the pandemic conditions caused less free activities to be carried out. For the interview, samples who had given birth and were ready to go home were asked to fill out a sheet containing questions for wives and questions for husbands. The question for the wife "What did you get from applying this couple's childbirth preparation guidebook?" when associated with three main things, namely calmness when the husband is involved, a sense of security with clear training procedures, and a sense of confidence with the motivation read.

Table 2. Respondent Evaluation of the Guidebook

Respondent Expressions	Wife		Husband	
	n	%	n	%
Peace of mind/Feelings of being involved				
Positive	4	100	4	100
Negative	0	0	0	0
Feel safe				
Positive	4	100	4	100
Negative	0	0	0	0
Feeling confident				
Positive	4	100	4	100
Negative	0	0	0	0

The results of the respondent evaluation showed that all respondents, 4 couples (100%), gave a positive assessment of the guidebook provided to help couples deal with childbirth. The counseling guidebook for primigravida (nullipara) couples created in this study can have a positive impact on couples who are about to welcome their first child. The book is equipped with pictures of how to do pregnancy exercise movements and also motivation for couples in facing childbirth together. In this case, couples can practice pregnancy exercise at home freely with the guidance of a professional midwife when needed. Pregnancy counseling is intended to adequately prepare parents-to-be and new parents for the transition to parenthood, about the elements of pregnancy itself, labor and delivery, and general parenting skills (Ahldén et al., 2012).

Table 3. Product Evaluation from a Wife's Perspective

Sample	Sample Expressions		
	Peace of mind when husband is involved	Feel safe with clear training procedures	Feeling confident with the motivation read
Wife 1	<i>“When my husband said he would accompany me during labor, I felt so happy and immediately calm, knowing that we would get through this moment together.”</i>	<i>“Physical exercise with my husband after reading the childbirth preparation guide made me feel safe and confident. My husband's support means a lot, and Mrs. Jehan's guidance is very helpful.”</i>	<i>“I am so happy that I was able to overcome my anxiety before giving birth. The motivation in the guidebook helped me and my husband feel more confident. Thank you for the knowledge we gained from this book.”</i>
Wife 2	<i>“Peace came when my husband promised to accompany me during the labor process. This made me feel happy and calm.”</i>	<i>“Daily exercise leading up to labor made me more focused on the ease of the birth process. We believe that with physical and mental preparation, birth will be smoother.”</i>	<i>“The motivation we read was very helpful, Ma'am. As new parents, we were initially anxious, but Mrs. Jehan's book made us more confident in facing childbirth. I was very touched.”</i>
Wife 3	<i>“The book we read gave my husband encouragement to accompany the labor process. His presence really supported my calmness and reduced anxiety.”</i>	<i>“Daily and weekly exercises have helped us a lot, Mom. These prenatal exercises are amazing, and I feel a more intense communication with our future baby who is still in my belly.”</i>	<i>“I was impressed with the change from anxious to excited. Through reading and practicing pregnancy exercises together, this experience is very valuable for future pregnancies and deliveries.”</i>
Wife 4	<i>“At first, I was afraid of the pandemic restrictions and worried about being alone. However, my husband's support in protecting me from COVID-19 and keeping me company was very reassuring.”</i>	<i>“We are happy with the exemplary exercises. The guidebook is very helpful and guides us after being demonstrated by Mrs. Jehan.”</i>	<i>“Our anxiety was bothering us, but the motivation we received helped change our minds. Now, we are more motivated to welcome our first child than focused on anxiety.”</i>

The evaluation results showed that the wives felt calmer and happier with the presence and support of her husband during the Antenatal Care (ANC) process. The samples also felt safer with clear procedures regarding pregnancy exercise through the guidebook and could overcome anxiety during pregnancy by reading the guidebook and the motivation provided. The results of this study are in line with Nelson (2003) study which stated that respondents were more satisfied with the preparation for childbirth so that they were more confident in facing childbirth. and felt much less helpless in relation to preparation for the early period of becoming parents (Nelson, 2003; Nolan, 1997). This proves that husbands should actually be involved in the process of explaining childbirth, during, and after childbirth. In another study, it was stated that pregnancy exercises can really help couples in facing (Robledo-Colonia et al., 2012). This exercise is said to be able to avoid anxiety before childbirth. Husbands who participated in this pregnancy exercise felt a stronger bond with their wives and their future babies and this is in line with the results of this study from the statements of the research samples.

Pregnancy is not only a very exciting time but also one of the most stressful for a woman both physically and mentally (Madhavanprabhakaran et al., 2015). Even in healthy women, pregnancy can cause a lot of anxiety due to the anticipated uncertainties associated with it. Evidence suggests that pregnancy anxiety not only affects the health of the pregnant mother but also impacts birth outcomes such as preterm labor, prolonged labor, cesarean delivery, low birth weight (Rauchfuss & Maier, 2011).

The prevalence of pregnancy anxiety varies across different trimesters of pregnancy with high levels in the first and third trimesters (Madhavanprabhakaran et al., 2015). Pregnancy-specific anxiety is defined as the worries, concerns and fears about pregnancy, labor, and the health of the baby and future caregiving. Nulliparous women’s labor fears are related to labor pain, birth-related problems and procedures. Previous studies on pregnancy anxiety have concluded that pregnancy-specific anxiety is a significant predictor of adverse labor outcomes (Rauchfuss & Maier, 2011). With limited evidence available on pregnancy-specific fears and worries, the structure of pregnancy anxiety and its impact on pregnancy outcomes warrants further research exploring pregnancy-specific anxiety and its risk factors.

Table 4. Product Evaluation from a Husband's Perspective

Sample	Sample Expressions
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	Feelings of being involved in preparation for labor and the birthing process	A sense of security in the wife's labor with clear training procedures	Husband's confidence in the motivation he read
Husband 1	<i>"Before the guidance and reading this guidebook, I didn't know what to do as a husband. Now, after getting guidance and reading, I feel happy and excited to go through every process together."</i>	<i>"The guidance given for prenatal gymnastics was something we could really do easily because we had been trained beforehand by Mrs. Jehan."</i>	<i>"I am very motivated to accompany my wife. This is very different from the situation before getting counseling and this guidebook. It is very different."</i>
Husband 2	<i>"My experience as a first-time father was amazing thanks to the professional guidance. The guidebook was communicative, making it clear to me to go through all the processes. Without it, I might still feel anxious and unprepared."</i>	<i>"We did prenatal exercises together as we were taught. This exercise really made us feel comfortable because we were sure that the delivery would be easy. This feeling of security made me calm in reality too."</i>	<i>"Before and after getting counseling, there was a huge difference in me. After getting enlightenment, I was very motivated to be involved in my wife's labor process."</i>
Husband 3	<i>"We have found this guidebook to be very helpful. I feel great because I can be fully involved in every process that my wife experiences, and this makes me feel like a responsible husband."</i>	<i>"Our routine before giving birth was more complete with prenatal exercise. I helped my wife do the movements, and we felt happy to be able to communicate as three people while following the instructions in the book."</i>	<i>"My motivation increased after reading this guide. I realized that being involved in labor is the husband's responsibility, not just the wife's. This guide really lifted my spirits."</i>
Husband 4	<i>"At first, I was skeptical about being as involved as the manual said. However, as time went by, I felt happy to see my wife calm down knowing that I would be there for her through every part of the birth process."</i>	<i>"I am happy to be able to share the moment of prenatal exercise with my wife. By following the movements from the book and helping my wife, we feel calm and confident that we</i>	<i>"Of course, my enthusiasm was extraordinary after being directed by Midwife Jehan and the guidebook provided. Extraordinary. I</i>

*can have a normal delivery became very
without any obstacles. I feel motivated.”
safe with this process.”*

Evaluation based on the husband's perspective shows that the guidance of professional midwives and the guidebook provided during the Antenatal Care (ANC) process is able to increase the husband's awareness to provide support and presence during pregnancy and the labor process. The presence of a husband during childbirth is almost universally accepted at all levels in developed countries (Sapkota et al., 2012). However, in some countries, husbands are usually not accepted in the birthing environment, both inside and outside the hospital, due to cultural and traditional beliefs (Akshaya & Shivalli, 2017). Many countries also believe that childbirth and child-rearing are traditionally the responsibility of women. It is hoped that this book will provide encouragement to husbands to provide support and accompany their wives during the process leading up to and during labor.

CONCLUSION

This study has succeeded in creating a set of guidebooks specifically designed for young couples approaching childbirth. The book discusses very important things in a communicative manner, such as the involvement of husbands in developed countries in childbirth with better outcomes, prenatal exercises that can be practiced by couples, and motivation to suppress their anxiety about childbirth so that all childbirth processes can be smooth and safe. The research respondents have provided their experiences in using the guidebooks that have been successfully developed, which relate to a sense of calm in facing childbirth, the involvement of husbands in the process of prenatal exercises and childbirth, and the motivation that led them to successfully go through childbirth together. This study has several limitations, namely that the study only involved a small number of couples, so the results may not be generalizable to a larger population. The methods used, such as interviews, have not fully explored all relevant aspects related to husband support and pregnancy anxiety. In further research, this book should go through the next Research and Development (R&D) stage, which involves a trial of the guidebook's application with a larger number of respondents. The suggestion in this study is that pregnant women who are going to give birth should attend pregnancy classes accompanied by their husbands and the counseling provided should include a guidebook on preparing for childbirth that involves the husband's assistance.

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