Qualitative Study Of Knowledge And Attitudes Of Husbands In Dealing With Wives Who Have Nausea And Vomiting In The First Trimester At PMB D

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Abstract.

Background: Predisposing factors in the occurrence of emesis gravidarum are psychosocial factors. During pregnancy, attention from family members is needed by the mother, especially the attention of the husband. Small things that husbands do have significant meaning in improving psychological health in a better direction. Purpose of Writing: To obtain in-depth information about the husband's knowledge and attitudes in dealing with a wife who has nausea and vomiting in the first trimester at PMB D. Research Methods: This study used a qualitative method by conducting in-depth interviews (depth interviews) and FGD (Focus Group Discussion), namely to obtain in-depth information about the knowledge and attitudes of husbands in dealing with wives who have nausea and vomiting in the first trimester, so that it is possible to obtain implicit information (insight). Research Results: Knowledge of husbands in dealing with wives who have nausea and vomiting in the first trimester shows that there are still many informants who have poor knowledge about the causes, symptoms and complications of nausea and vomiting in pregnancy. The husband's attitude in dealing with his wife who had nausea and vomiting in the first trimester showed that most of the informants had a positive attitude as shown by paying attention, namely buying food such as fruit to relieve nausea, encouraging mothers to avoid spicy/sour foods, always accompanying mothers to check their pregnancy and being more understanding of what pregnant women feel. Conclusions and Suggestions: The results of this study are expected to provide health education about nausea and vomiting in pregnancy, especially husbands who are involved in the counseling process and outreach events for pregnant women classes.

Keywords: Knowledge, husband's attitude, first trimester nausea and vomiting.

I. INTRODUCTION

According to the World Health Organization (WHO), the incidence of emesis gravidarum is at least 15\% of all pregnant women. Nausea and vomiting can interfere and make the fluid imbalance in the kidney and liver tissue necrosis. In Indonesia, around 10\% of pregnant women have emesis gravidarum (Wima, 2018). Nausea and vomiting in pregnancy is caused by changes in the endocrine system during pregnancy, especially the increase in the hormone hCG and is a common complaint in pregnant women, almost 50-80\%. Psychologically, nausea and vomiting during pregnancy have a significant effect on quality of life. Some pregnant women feel nausea and vomiting are common during pregnancy. Some feel it as something that is uncomfortable and interferes with daily activities (Rofi'ah, 2019). Symptoms of nausea and vomiting usually last for about 6 weeks after the first day of the last menstruation and last for about 10 weeks. Nausea and vomiting occurs in 60-80\% of primigravidas and 40-60\% of multigravid women. One in a thousand pregnancies, these symptoms become more severe (Winkjosastro, 2018). Predisposing factors in the occurrence of emesis gravidarum are psychosocial factors. Pregnancy is a crisis period for a woman which can be followed by stress and anxiety. During pregnancy, attention from family members is needed by the mother, especially the attention of the husband. Small things that husbands do have significant meaning in improving psychological health in a better direction. The attention given by the husband is expected to help the mother get through the pregnancy well. Conditions of psychological stress due to the absence of support from the husband can cause the mother to experience physical health problems such as nausea and vomiting. The husband must have the knowledge to be able to help and accompany his wife in dealing with her pregnancy complaints (Wijaya, 2017). The role of the husband when his wife is pregnant is RTC (Ready to Take Care) meaning that the husband is always ready when his wife needs physical or psychological assistance. During pregnancy, the husband's role is needed to support the wife's mental and health.

There are many things a husband can do for a pregnant wife, such as accompanying his wife in undergoing health care to helping with household chores (Edno, 2019). Research conducted by Nur Afifah, et all in 2021 with the title "Knowledge and Attitudes of Husbands in dealing with Wives who have nausea and vomiting in the First Trimester at the Mamamia Maternity Clinic” shows that of the 37 husbands studied, 20

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husbands had good knowledge about nausea and vomiting, a minority of husbands had sufficient knowledge about nausea and vomiting, 17 people (45.9%) and almost all husbands had positive attitudes about nausea and vomiting, namely 34 people (91.8%), a minority of 3 negative attitudes. people (8.1%). Rismaida (2022) in her research on "The Relationship between Knowledge and Attitudes of Husbands in Dealing with Wives with Hyperemesis Gravidarum in the First Trimester at the Kasih Bunda Health Clinic revealed that there is a relationship between knowledge and attitudes of husbands in dealing with wives with hyperemesis gravidarum in the first trimester with a p-value of 0.05. The formation of husband's knowledge and attitude towards his wife cannot be separated from the information obtained by the community. Preliminary survey conducted at PMB D of 10 husbands who brought their wives in the first trimester of pregnancy, 4 husbands were positive and had good knowledge about emesis gravidarum while 6 husbands were negative and had less knowledge about emesis gravidarum. Based on this background, the researchers wanted to conduct a "Qualitative Study of Knowledge and Attitudes of Husbands in Dealing with Nausea and Vomiting Wife in the 1st Trimester at PMB D".

II. METHODS
This study used a qualitative method by conducting in-depth interviews (depth interviews) and FGD (Focus Group Discussion), namely to obtain in-depth information about the knowledge and attitudes of husbands in dealing with wives who have nausea and vomiting in the first trimester, so that it is possible to obtain implied information (insight). The informants in this study were the husbands of pregnant women who experienced nausea and vomiting in the first trimester, while the key informants were pregnant women and PMB D officers.

III. RESULT AND DISCUSSION
Knowledge
1. Opinion about first trimester nausea and vomiting
From the results of the interviews it was known that both the husbands of pregnant women who experienced nausea and vomiting or who did not say they knew the term nausea and vomiting in the first trimester of pregnant women.
"…Yes….you know that the term nausea and vomiting” (Informant d)
"I crave if the village people say... if the midwife says it's hyperemesis" (Informant i)
2. Causes of nausea and vomiting in the first trimester
Based on focus group discussions, all informants did not know the causes of nausea and vomiting in the first trimester. It can be seen from the following statements:
"I don't know what causes it" (Informant f)
“…..well…I don't understand. The problem is because of what it can cause nausea and vomiting, I don't know” (Informant a)
3. Symptoms of Nausea Vomiting
Based on the results of the focus group discussions, there were various answers regarding the symptoms of nausea and vomiting. It was found that there were still informants who did not know the symptoms of nausea and vomiting in pregnancy.
"...what is it...the symptoms besides nausea...vomiting, I don't know anymore" (Informant e)
"he said c has a headache too" (Informant c)
Pregnant women who answer according to the complaints they feel when experiencing nausea and vomiting, as follows:
"weakness .... nausea, vomiting makes the body weak” (Informant p)
4. Complications from nausea and vomiting
Based on the results of focus group discussions, most of the informants did not know the complications of nausea and vomiting experienced by pregnant women. Statements disclosed as follows:
"What are the complications... don't seem to exist, it just looks weak" (Informant k)
"As far as I know, there isn't one, isn't it... how come” (Informant h)
5. Treatment of nausea and vomiting in the first trimester of pregnant women
Based on the results of group discussions, the ability to answer informants varied on average based on their experience, as below:
"just pay more attention... usually ask me to buy something to eat" (Informant b)
The results of interviews with pregnant women when asked about handling nausea and vomiting, showed the following statements:
"food huh... just adjust the diet" (Informant p)
Based on interviews with health workers regarding the incidence of nausea and vomiting that has been handled, as follows:
"We advise pregnant women to keep eating little but often, avoid foods that stimulate nausea such as sour/spicy ones, if excessive nausea and vomiting immediately come to the midwife to get further treatment" (officer a)

Attitude
1. Husband's attitude in dealing with a wife who has nausea and vomiting in the first trimester
Based on the results of group discussions, most of the informants gave positive support to pregnant women who experienced nausea and vomiting in the first trimester, the following statements were seen:
"Just be more understanding...if you're nauseous, you can understand better" (Informant c)
Most of the informants answered the same regarding statements that husbands can make to prevent nausea and vomiting
"Buy fruit, so you don't get sick" (Informant b)
Based on the results of interviews with midwives on duty at PMB D that good cooperation is needed between husbands, pregnant women and health workers in an effort to overcome nausea and vomiting in the first trimester, the husband's role is needed especially to overcome this discomfort. Husband's support for pregnant women physically and emotionally during pregnancy is very important, which can be realized, such as: always accompanying pregnant women during control, providing encouragement, support and reassurance, good communication, for example by asking what is needed, felt and wanted and supporting pregnant women to live a healthy lifestyle, eat with balanced nutrition and exercise together. As quoted from the following interview results:
"There are not many incidents of nausea and vomiting in first trimester pregnant women at our place, only mild symptoms at the beginning of pregnancy, especially in primigravida with pregnant women who are too young or too old. The husband's role is very important in terms of making decisions related to mother's problems, husband's support in terms of cooperation and good communication about what is needed, felt and wanted by the mother really helps the mother prevent nausea and vomiting. (Officer a)

DISCUSSION
Knowledge
The results of research on husbands' knowledge in dealing with wives who have nausea and vomiting in the first trimester show that there are still many informants who have poor knowledge. Most of the informants only knew about the term nausea and vomiting in pregnancy. This resulted in a husband not understanding the extent of the husband's action or role needed in overcoming the first trimester nausea and vomiting. Most of the informants did not know about the causes of nausea and vomiting in the first trimester. The cause of nausea during pregnancy is still not known with certainty. Some claim that the feeling of nausea is the result of increased estrogen levels, because this complaint occurs in the first trimester. The physiological effect of the hormone estrogen is unclear, possibly originating from the central nervous system due to reduced gastric emptying. Adjustment occurs in most pregnant women, although nausea and vomiting can last for months. The informants' knowledge of symptoms other than nausea and vomiting was known from the answers to the results of various discussions, some said they were dizzy, weak and some only knew nausea and vomiting. According to Manuaba's theory (2018) the signs and symptoms experienced by emesis gravidarum mothers are headaches, especially in the morning, this is a natural thing experienced by pregnant women because the changes in hormones produced make blood vessels dilate. On the one hand, dilation of these blood vessels is necessary to increase blood flow to the fetus, but on the other hand, it reduces the

blood supply to the brain, causing dizziness. Likewise with knowledge of complications. Most of the informants did not know about the complications of the first trimester of nausea and vomiting. If nausea and vomiting are not treated seriously, it will become hyperemesis gravidarum.

Hyperemesis Gravidarum is a condition of nausea and vomiting in pregnancy that persists, with a frequency of vomiting more than 5 times a day, accompanied by weight loss (>5% of pre-pregnancy weight) and can cause electrolyte and acid-base imbalances, malnutrition and even death. (Irianti, 2014). Most of the informants’ knowledge about handling nausea and vomiting, namely husbands and pregnant women, did not know much about what to do. Some husbands said they only gave love while 2 pregnant women answered that they were maintaining their diet. The health worker explained the treatment that was carried out, namely adjusting the diet, administering anti-nausea drugs, recommending lots of rest and avoiding stress. Nausea and vomiting is one of the earliest, most common and most stressful symptoms associated with pregnancy. Nausea and vomiting are considered only physiological symptoms experienced by pregnant women and are signs of pregnancy. A problem that often makes a person powerless to help overcome it. The husband must have the knowledge to be able to help and accompany his wife in dealing with her pregnancy complaints so that the wife does not feel alone because the wife’s continued anxiety will cause decreased appetite, physical weakness, and excessive nausea and vomiting, which can cause disturbances in pregnancy (Ansys, 2016). Rismaida (2022) in her research on “The Relationship between Knowledge and Attitudes of Husbands in Dealing with Wives with Hyperemesis Gravidarum in the First Trimester at the Kasih Bunda Health Clinic revealed that there is a relationship between knowledge and attitudes of husbands in dealing with wives with hyperemesis gravidarum in the first trimester with a p-value of 0.05. Knowledge is one of the three components forming an attitude, namely the cognitive component. Knowledge and attitude of affiliation consistently. If the cognitive component changes, there will be a change in attitude.

Attitude
The results of the research on the attitude of husbands in dealing with wives who have nausea and vomiting in the 1st trimester show that most informants have a positive attitude as shown by giving attention, namely buying food such as fruit to relieve nausea, encouraging mothers to avoid spicy/sour foods, always accompanying mothers to check their pregnancy and being more understanding with what pregnant women feel. The attention given by the husband is expected to help the mother get through the pregnancy well. Conditions of psychological stress due to the absence of support from the husband can cause the mother to experience physical health problems such as nausea and vomiting. The husband must have the knowledge to be able to help and accompany his wife in dealing with her pregnancy complaints (Wijaya, 2017).

The role of the husband when his wife is pregnant is RTC (Ready to Take Care) meaning that the husband is always ready when his wife needs physical or psychological assistance. During pregnancy, the husband’s role is needed to support the wife’s mental and health. There are many things a husband can do for a pregnant wife, such as accompanying his wife in undergoing health care to helping with household chores (Edno, 2019). This research is in line with that conducted by Nur Affiah, et all in 2021 with the title "Knowledge and Attitudes of Husbands in Dealing with Wives who are Nauseous Vomiting in the First Trimester at the Mamamia Maternity Clinic" showing that out of the 37 husbands studied, almost all husbands had a positive attitude about nausea vomiting as many as 34 people (91.8%), a minority of negative attitudes as many as 3 people (8.1%).

IV. CONCLUSION
1. Knowledge of husbands in dealing with wives who have nausea and vomiting in the first trimester shows that there are still many informants who have poor knowledge about the causes, symptoms and complications of nausea and vomiting in pregnancy.
2. The attitude of husbands in dealing with wives who have nausea and vomiting in the 1st trimester shows that most of the informants have a positive attitude as evidenced by attention, namely buying fruit to avoid nausea, choosing a menu that does not cause nausea and always accompanying them during pregnancy check-ups and a better understanding of feelings of a pregnant wife.
REFERENCES


