

DYAD MODEL AS A CARING INNOVATION IN HIGH RISK PREGNANCY

^{1,2} Sri Wahyuni, ³ Moses Glorino Rumambo Pandin

¹ Doctoral Program, Nursing Faculty, Universitas Airlangga

² Departemen of Maternitu Nursing, Nursing Faculty, Universitas Islam Sultan Agung

³ Departemen of English Literature, Faculty of Humanities, Universitas Airlangga

Corresponden Author : Sri Wahyuni

Email: sri.wahyuni-2020@fkip.unair.ac.id

ABSTRACT

Background Pregnancy is a process of maturity for women that requires adaptation to the changes in their new roles. Adjustment to a new role is not easy, especially if the pregnancy is accompanied by risks, so it is necessary to get treatment to minimize complications. Dyad models that optimize husband or family support are very important to prevent the risk of complications and adapt mothers to their new roles. **The purpose** of this study was to determine the effect of the dyad model on high-risk pregnancies. **The method** used with a literature review is through the collection of articles from Scopus, ebsco, ProQuest and PubMed. **The results** obtained were articles from Scopus 9, Ebsco 107, PubMed 214 and ProQuest 85 which carried out identification, screening and eligibility for 25 articles. Overall results mention. Journals are categorized into 4 groups, Dyad Model and social support, high-risk pregnancy, maternal role and Self Efficacy. **Conclusion**, there is an effect of the dyad model on care for high-risk pregnancies.

Key Word: Dyad Model, Caring, High Risk Pregnancy

1. Background

Pregnancy is part of the process of female maturity which can cause changes in all body systems as well as have a psychological impact. Pregnancy does not always run normally, we often encounter pregnancies with a variety of risks that accompany it or are called high-risk pregnancies. Pregnancy with complications that can affect the health of both the mother and the fetus. Types of risk in pregnancy such as pregnancy with HIV positive, diabetes mellitus, hypertension in pregnancy, obesity, multiple pregnancies, pregnancy too young or too old, biological factors, social factors such as age, social status, parity, obstetric history, occupation, factors Psycho-social and nutritional status also influence health conditions during pregnancy ¹.

The incidence of high-risk pregnancy is a very dangerous condition and can increase both maternal and infant mortality rates. Data from WHO states that every day a number of 810 mothers die due to pregnancy and childbirth, 75% of them die due to complications that occur during the pregnancy period. ². The prevalence of high-risk pregnancies was 14.4%. Based on the

color-coded risk stratification, 7.5% of the women were categorized as red, 6.9% yellow, 72.0% green, and 13.6% white. Women with high-risk pregnancies were 4.2 times more likely to develop illnesses and other risky conditions during labor ³.

High-risk pregnancies can cause various health problems for the mother and the fetus during the perinatal period. High-risk pregnancies with impaired blood pressure have the potential to cause preterm labor and low birth weight as a result of hypoperfusion and decreased uteroplacental perfusion. Mothers who have a pregnancy with diabetes mellitus and a history of obesity are at the highest risk of experiencing complications in pregnancy ⁴. Pregnancy with obesity and Diabetes Mellitus can also lead to complications in both the mother and the fetus. Complications can include hydramnios, preterm labor, severe hypoglycemic, diabetic ketoacidosis, hypertension in pregnancy, pre-eclampsia, labor dystocia, macrosomia and intensive neonates.

Mothers with pregnancy conditions that are full of risks are stressors in themselves but need adaptation to carry out their new roles as mothers who are very important in the care and development of babies or maternal attachments. Adjustment to this change in role is not an easy thing, especially when the pregnancy is a high-risk pregnancy that actually or has the potential to interfere with the health of both the mother and the fetus ⁶. High-risk pregnancy with various health threats causes affects the psychological response of the mother. The mother will feel fear, sadness, feel guilty and sometimes even experience frustration throughout her pregnancy ⁷. This condition will increasingly have a negative impact on the health of the mother and the fetus and affect the mother's ability to adapt to her new role.

Women who are not ready to become mothers will feel depressed and helpless starting from pregnancy, pregnancy, delivery and during the care of the baby in their new role. Barriers that help a woman in carrying out her role will have an impact on the inability to become a mother who can cause stress or depression while carrying out her new role which will also have an impact on the growth and development of the child ⁸. As for the research conducted by ⁹ Which states that failure to become a mother can lead to depression and have an impact on the ability of mothers to maintain pregnancy and child care. The mother's ability to adjust roles and manage problems can reduce various problems experienced during her pregnancy period ¹⁰. Adaptation to roles with experienced pregnancy conditions requires special programs, social and family assistance and support to reduce anxiety and increase the bond between mother and fetus¹¹.

Efforts to improve antenatal care in high-risk pregnancies to prevent negative impacts can be made through initial screening of the risk of hypertension and modification of antenatal care. Delays in detection and treatment will increase the incidence of complications in the perinatal.¹² Monitoring and treatment for high-risk conditions needs to be focused on both the mother and the fetus, the so-called Dyad method¹³. The Dyad method is a method that involves the interaction between two people in certain situations such as the involvement of the mother and the fetus in an action to achieve the goal of the intervention. Antenatal care and monitoring performed on the mother and fetus can monitor as soon as possible the health condition experienced by both the mother and the fetus¹⁴. In research conducted by¹⁵ States that the Dyad Model for high-risk pregnancies needs to be carried out between the mother and the fetus considering that in high-risk pregnancies there are physiological disorders which are feared to interfere with the closeness of the relationship between the mother and the fetus. The Dyad model by providing interventions on the interaction between mother and fetus is best done to prevent complications that may occur in high-risk pregnancies, but this model needs to be developed by involving partner support to increase attachment and optimize one's ability to overcome problems or what is called Self Efficacy.

The involvement of a partner in the Dyad model is very important considering that the husband's pregnancy also feels anxiety, especially in a risky pregnancy. Research conducted¹⁶ States that anxiety in a pregnancy can occur both to wives and husbands, anxiety that occurs in partners can result in attachment disorders that have an impact on the condition of fetal well-being. It is not enough just with the mother and the fetus, but support from the closest people, such as husbands, is needed to save the lives of mothers and babies. Partner support in the Dyad model is support for improving psychological conditions, partner adjustment and quality of life.¹⁷ The anxiety and psychological conditions felt by the couple need special intervention to increase calm and reduce the tension that occurs due to the disturbance in the pregnancy they are experiencing. Educational information during the antenatal period given to partners will be easier to understand and couples can plan for their pregnancy together.¹⁸

2. METHOD

2.1 Research Design

This research is a research using literature study method or literature review. Literature studies can be obtained from various sources including journals, books, documentation, the internet and libraries. The literature study method is a series of activities related to the method of collecting library data, reading and taking notes, and managing writing materials (Nursalam, 2016). The type of writing used is a literature review study that focuses on the results of writing related to the topic or a variable of writing.

2.2 Data Collection Method

The data used in this research comes from the results of research that have been conducted and published in national and international online journals. In conducting this research, the researchers conducted a search for research journals published on the internet using the Scopus, Ebsco, ProQuest and PubMed search engines, with keywords: Dyad Model, Maternal Role, Self Efficacy and High Risk Pregnancy.

2.3 Inclusion and Exclusion Criteria

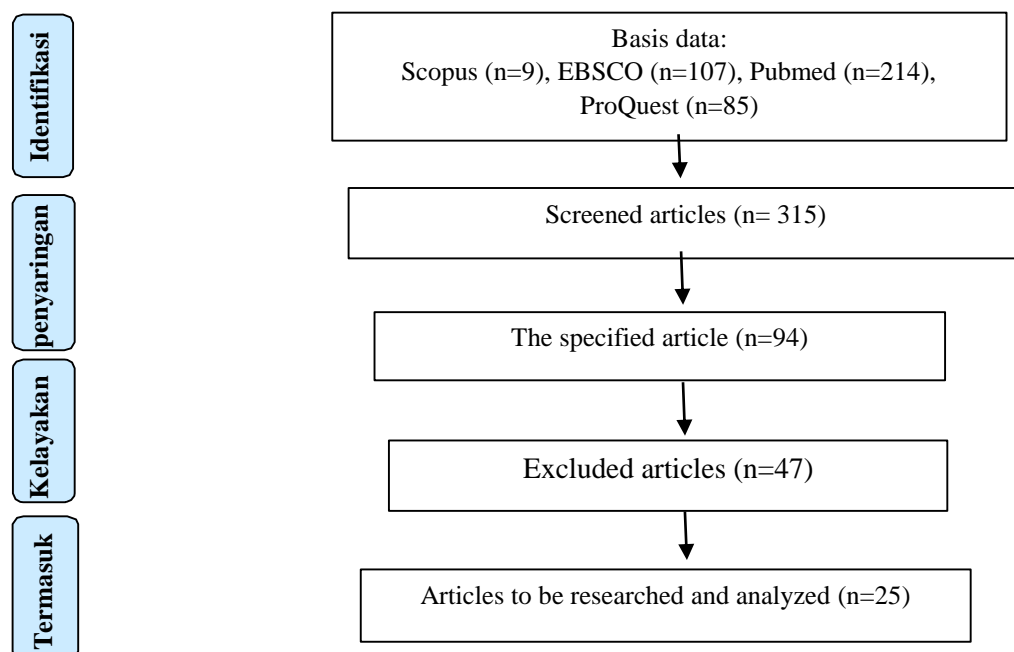
The inclusion and exclusion criteria of this Systematic Review are taken with several criteria which include problem, Intervention, Comparison, Outcome, Study Design, Time Period, Language, Type of Article and Content Theme.

In detail, the inclusion criteria that the researchers took are illustrated in the following table:

Table 2.1 The inclusion criteria for this literature are:

Criteria	Inklusi
<i>Problem</i>	International journals from different databases and with regard to research variables
<i>Intervention</i>	Pemberian Dyad Model
<i>Comparison</i>	There is no comparison factor
<i>Outcome</i>	The influence or impact of giving the Dyad Model
<i>Study design</i>	<i>Qualitative</i> , <i>Pra-eksperimental</i> and <i>Systematic/Literature review</i>
Time period	Articles published from 2019 to 2021
Language	English Language
Article Type	<i>Full text article</i>
Content theme	<i>Dyad Model</i> High Risk Pregnancy

After collecting data through the database, the researchers used the PRISMA (Preferre Reporting Items for Systematic Reviews and Meta Analysis) method to get the desired articles to be researched which are described in the chart below:



Literature review begins with the written material which is considered sequentially from the most relevant, relevant, and sufficiently relevant. Then read the abstract, each journal first to provide an assessment of whether the problems discussed are in accordance with what is going to be solved in a journal. Nothing about the important points and their relevance to the research problem. To keep from getting caught up in the plagiarism element, the author should also note the sources of information and include a bibliography. If indeed the information comes from other people's ideas or writing. Make notes, quotes, or information that are arranged systematically so that writing can easily be searched back if any time needed (Nursalam, 2020).

Each journal that has been selected based on the criteria, a conclusion is drawn that describes the Dyad Model explanation in maternity services. Before the author makes conclusions from several literature results, the author will identify in a brief summary form a table containing the author's name, year of writing, study design, samples, instruments (measuring instruments), and research results. After the writing results from much literature have been collected, the author will analyze the application of the Dyad Model in High-Risk Pregnancy.

2.4 Metode Analisis Data

Research journals that match the inclusion criteria are then collected and a journal summary is made including the name of the researcher, the year of publication of the journal,

study design, research objectives, samples, instruments (measuring instruments) and a summary of the results or findings. The summary of the research journal is entered in a table sorted according to the title and year of publication of the journal and according to the format mentioned above.

To further clarify the abstract analysis and full text of the journal, read and observe it. The journal summary is then analyzed for the content contained in the research objectives and the results/ research findings. The analytical method used is using journal content analysis.

3. RESULTS AND DISCUSSION

3.1 Results

The literature review was conducted to find out about the Dyad Care Model in high-risk pregnancies which was carried out through the collection of existing literature. The literature was collected using a critical appraisal table to answer the objectives of the measurement and compare with the simple measurement results.

Table 3.1 Critical Appraisal Journals

No	Title of Literature	Literature Analysis	Source
1	Anxiety, depression, dyadic adjustment, and attachment to the fetus in pregnancy: Actor-partner interdependence mediation analysis	Providing services with the Dyad model is able to increase accountability and service as well as improve the results of care for patients.	Brandão, T., Brites, R., Pires, M., Hipólito, J., & Nunes, O. (2019). Anxiety, depression, dyadic adjustment, and attachment to the fetus in pregnancy: Actor-partner interdependence mediation analysis. <i>Journal of Family Psychology</i> , 33(3), 294–303.
2	Maternal personality, social support, and changes in depressive, anxiety, and stress symptoms during pregnancy and after delivery: A prospective-longitudinal study	The support given to the mother during the pregnancy period will be able to increase the mother's knowledge, understanding and insight so that there is an increased understanding of the health conditions of herself and the fetus in the womb.	¹⁹ <i>PLoS ONE</i> , 15(8 August), 1–18. https://doi.org/10.1371/journal.pone.0237609

3	Dyadic coping in couples: A conceptual integration and a review of the empirical literature. <i>Frontiers in Psychology</i>	Pada Ibu hamil intervensi Dyad dapat mengoptimalkan keterlibatan antara ibu dan janin atau antara ibu dan suami untuk mendapatkan tindakan yang dilakukan secara bersama-sama	Falconier, M. K., & Kuhn, R. (2019)., <i>10</i> (MAR), 1–23. https://doi.org/10.3389/fpsyg.2019.00571
4	The Role of Social Support in Reducing Anxiety Among High Risk Pregnant Women in Third Trimester	Dyad bagian dari support sosial atau dukungan sosial yang dapat diambil dari pasangan, orang terdekat ataupun lingkungan	Vidayanti, V., & Pratiwi, D. A. A.(2019) <i>International Respati Health Conference (IRHC)</i> , 1, 610–615.
5	Social support—a protective factor for depressed perinatal women?	A good understanding will be able to create thought patterns and build positive perceptions of pregnancy and their abilities. Such conditions can minimize stressors experienced by mothers, reduce the risk of depression that can occur in the antenatal and post-natal periods and accelerate the adaptation process to achieve new roles.	Milgrom, J., Hirshler, Y., Reece, J., Charlene, C. H., & Gemmill Alan, A. W. (2019). <i>International Journal of Environmental Research and Public Health</i> , 16(8). https://doi.org/10.3390/ijerph16081426
6	²⁰	Social support that has a positive impact on the mother's understanding and level of knowledge can also increase self-confidence. The high level of mother's self-confidence has a positive correlation with the mother's ability to make decisions about her own health	Narges Rafiei ¹ , Mostafa Amini-Rarani ² , Fahimeh Eizadi ¹ , Hassan Rafiey ³ , N. S. S. A. (2019) <i>Pacific AffairsInt J BioMed Public Health</i> , 2(4), 75–80. https://doi.org/10.2307/2752507
7	Research recommendations from the national institutes of health workshop on predicting, preventing, and treating preeclampsia	Monitoring and treatment for high-risk conditions needs to be focused on both the mother and the fetus, the so-called Dyad method	Maric-Bilkan, C., Abrahams, V. M., Arteaga, S. S., Bourjeily, G., Conrad, K. P., Catov, J. M., ... Roberts, J. M. (2019) <i>Hypertension</i> , 73(4), 757–766. https://doi.org/10.1161/HYPERTENSIONAHA.118.11644
8	Maternal health care wearing equipment based on fetal information monitoring	The Dyad method is a method that involves the interaction between two people in certain situations such as the involvement of the mother and the fetus in	Peng, J., Huang, Y., Yu, K., Fan, R., & Zhou, J. (2019). <i>Journal of Infection and Public Health</i> . https://doi.org/10.1016/j.jiph.2019.07.031

		an action to achieve the goal of the intervention. Antenatal care and monitoring performed on the mother and fetus can monitor as soon as possible the health condition experienced by both the mother and the fetus	
9	Analysis of the NANDA-I taxonomy “maternal-fetal dyad” concept in high-risk pregnancy: integrative review	The Dyad model for high-risk pregnancies needs to be carried out between the mother and the fetus considering that in pregnancies there is a high risk of physiological disorders which are feared to interfere with the closeness of the relationship between the mother and the fetus.	Gomes, R. C. M., Lopes, M. V. de O., Perrelli, J. G. A., Pontes, C. M., Linhares, F. M. P., & Mangueira, S. de O. (2020). <i>Revista Brasileira de Enfermagem</i> , 73(Suppl 4), e20190649. https://doi.org/10.1590/0034-7167-2019-0649
10	Dyadic coping, marital adjustment and quality of life in couples during pregnancy: an actor-partner approach	Dyad is a support to improve psychological condition, partner adjustment and quality of life	Brandão, T., Brites, R., Hipólito, J., Pires, M., & Nunes, O. (2020). <i>Journal of Reproductive and Infant Psychology</i> , 38(1), 49–59. https://doi.org/10.1080/02646838.2019.1578950
11	The Effect Of Prenatal Attachment Health Education With Audiovisual On Readiness To Be Parents At Sleman Primary Health Care	Educational information during the antenatal period given to partners will be easier to understand and couples can plan together for their pregnancy	Sariyani, D. (2019). The Effect Of Prenatal Attachment Health Education With Audiovisual On Readiness To Be Parents At Sleman Primary Health Care, 104–106.
12	Serratia marcescens as a cause of unfavorable outcome in the twin pregnancy	A good prenatal will be able to minimize complications for both mother and baby	Kljakić, D., Milosavljević, M. Z., Jovanović, M., Popović, V. Č., & Raičević, S. (2021). <i>Open Medicine (Poland)</i> , 16(1), 81–86. https://doi.org/10.1515/med-2021-0205
13	Experiences of the maternal role and support in mothers with cognitive limitations who have children in placement	failure to become a mother can lead to depression and have an impact on the mother's ability to maintain pregnancy and child care	Janeslätt, G., Jöreskog, K., Lindstedt, H., & Adolfsson, P. (2019). <i>Child and Family Social Work</i> , 24(4), 494–502. https://doi.org/10.1111/cfs.12629
14	Mother-Adolescent Conflict	The mother's ability to adjust roles and manage problems can reduce	Van Bommel, D. M. H., Van der Giessen, D., Van der Graaff, J., Meeus, W. H. J., & Branje, S. J. T. (2019).

	Interaction Sequences: The Role of Maternal Internalizing Problems	various problems experienced during her pregnancy period	<i>Journal of Research on Adolescence</i> , 29(4), 1001–1018. https://doi.org/10.1111/jora.12441
15	Effects of a supportive program on uncertainty, anxiety, and maternal-fetal attachment in women with high-risk pregnancy.	Adaptation to roles with experienced pregnancy conditions requires special programs, social and family assistance and support to reduce anxiety and increase the bond between mother and fetus.	Kim, H. J., & Chun, N. (2020). <i>Korean Journal of Women Health Nursing</i> , 26(2), 180–190. https://doi.org/10.4069/kjwhn.2020.06.17
16	Maternal Role: A Concept Analysis	Maternal Role is the role of a mother where this new role is not an easy thing for women, and it needs mentoring, social and family support or mentoring so that the process experienced can run well.	Shrestha, S., Adachi, K., A Petrini, M., & Shrestha, S. (2019). <i>Journal of Midwifery and Reproductive Health</i> , 0(0), 1–10. https://doi.org/10.22038/jmrh.2019.31797.1344
17	Factors affecting utilization of antenatal care in Ethiopia : A systematic review and meta-analysis.	Care during the antenatal period is influenced by the level of education of the mother and husband, planned pregnancy, exposure to social media, economic status and distance to antenatal care	Id, T. T., Chojenta, C., Smith, R., & Loxton, D. (2019). Factors affecting utilization of antenatal care in Ethiopia : A systematic review and meta- analysis, 1–24.
18	Stress, Depressive Symptoms, and Maternal Self-Efficacy in First-Time Mothers: Modelling and Predicting Change across the First Six Months of Motherhood	Self-Efficacy is a belief, perception and belief in one's abilities	Law, K. H., Dimmock, J., Guelfi, K. J., Nguyen, T., Gucciardi, D., & Jackson, B. (2019). <i>Applied Psychology: Health and Well-Being</i> , 11(1), 126–147. https://doi.org/10.1111/aphw.12147
19	Professional self-efficacy and job satisfaction: The mediator role of work design	Good self-esteem will reduce individual stress and be able to improve the quality of maternal health during pregnancy. Self-efficacy is related to the success of the mother in the perinatal period	Bargsted, M., Ramírez-Vielma, R., & Yeves, J. (2019). <i>Revista de Psicología Del Trabajo y de Las Organizaciones</i> , 35(3), 157–163. https://doi.org/10.5093/jwop2019a18
20	Increasing of Pregnancy Education on the Self Efficacy of Pregnant Women	Educational given during pregnancy significantly increases self-esteem, whether the mother is	Chalid, M. T., & Hasanuddin, U. (2019). <i>International Journal of Sciences : Increasing of Pregnancy Education on the Self Efficacy of Pregnant Women in Group</i> , (February).

	in Groups Accompanied by Their Husbands and Groups Unaccompanied	accompanied by her husband or not	
21	Intervention intended to improve public health professionals’ self-efficacy in their efforts to detect and manage perinatal depressive symptoms among Thai women: A mixed-methods study	Self-Efficacy can be influenced by four important sources, namely performance achievement, experience, verbal persuasion and sources of information	Phoosuwan, N., Lundberg, P. C., Phuthomdee, S., & Eriksson, L. (2020). <i>BMC Health Services Research</i> , 20(1), 1–12. https://doi.org/10.1186/s12913-020-5007-z
22	Anxiety and Fear Level toward Childbirth among Primigravida versus Multigravida	The low self efficacy will cause anxiety in the mother. This is because pregnant women experience anxiety in facing their new roles, especially primigravida mothers who have no experience	Mahmoud, T. M., Obstetrics, A., Nursing, G., & Nursing, F. (2019). * Madiha Mohamed Tosson , ** Azza Mohamed Elsayed Atwa , 8(2), 36–44. https://doi.org/10.9790/1959-0802023644
23	Professional self- efficacy and job satisfaction: The mediator role of work design.	Good self-esteem will reduce individual stress and be able to improve the quality of maternal health during pregnancy. Self- efficacy is related to the success of the mother in the perinatal period	Bargsted, M., Ramírez-Vielma, R., & Yeves, J. (2019). <i>Revista de Psicología Del Trabajo y de Las Organizaciones</i> , 35(3), 157–163. https://doi.org/10.5093/jwop2019a18
24	Impact of maternal HIV infection on pregnancy outcomes in southwestern China – A hospital registry based study	HIV-infected pregnancies can cause perinatal disorders associated with the birth of babies in poor conditions, namely preterm birth, low birth weight, and intrauterine fetal growth disturbances. Fetuses were born to pregnant women who are HIV positive have the potential to experience low APGAR scores as a result of asphyxia that occurs because maternal infection inhibits surfactant synthesis and secretion.	Yang, M., Wang, Y., Chen, Y., Zhou, Y., & Jiang, Q. (2019). <i>Epidemiology and Infection</i> , 147. https://doi.org/10.1017/S0950268818003345
25	Impact of overweight and obesity on pregnancy outcomes in	Counseling before or during pregnancy can reduce the risk of pregnancy disorders such as macrosomia and	Machado, C., Monteiro, S., & Oliveira, M. J. (2020). <i>Archives of Endocrinology and Metabolism</i> , 64(1), 45–51. https://doi.org/10.20945/2359-3997000000178

	women with gestational diabetes – Results from a retrospective multicenter study	large of gestational age (LGA).	
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The results of the analysis of 25 literature states that either the H_a or alternative hypothesis is accepted, which means that there is an effect of the Dyad Model on nursing care in high-risk pregnancies.

3.2. Discussion

The results of the review of 25 journals are categorized into 4 groups with details, the first group is a journal that focuses on the Dyad Model and 7 titles of social support, the second group of journals that discuss high-risk pregnancy is 6 titles, the third group of journals that discuss maternal role as much 6 titles and the fourth group of journals discussing Self Efficacy as many as 6 titles.

The dyad Model is a method of giving intervention that involves the interaction between two people in certain situations such as the involvement of the mother and fetus or husband and wife in an action to achieve the goal of the intervention.¹⁷ Providing services with the Dyad model is able to increase accountability and service as well as improve the results of care for patients. The Dyad Model can be applied to mothers with a high risk of pregnancy by optimizing the interuse between the mother and the partner or husband in providing interventions. The provision of interventions will be more optimal and provide mutual support in increasing understanding of pregnancy, understanding the role of parents, adapting roles and increasing confidence in their ability to maintain the health of their pregnancy.¹⁶

Pregnancy with a high risk condition is a pregnancy with complications that result in health problems for both the mother and the fetus. High risks in pregnancy include pregnancy with HIV positive, diabetes mellitus, hypertension in pregnancy, obesity, multiple pregnancies, pregnancies that are too young or too old¹. High-risk pregnancy conditions can cause complications to both the mother and the fetus during the perinatal period. Women who experience high-risk pregnancy conditions must have the resilience to struggle in facing their new roles or maternal roles.

Maternal Role is the role of a mother where this new role is not an easy thing for women, and the need for assistance, social and family support or escort so that the process is experienced can run well²¹.

The dyad model is an intervention model that can be provided by involving two people. This intervention is the development of social support or social support. In pregnant women, Dyad intervention can optimize involvement between mother and fetus or between mother and husband to get action done together.²² This intervention is carried out with the aim of increasing comfort, reducing psychological anxiety, increasing self-potential and preventing the emergence of various kinds of disorders that can occur during the period of maternal pregnancy. Dyad is part of social support or social support that can be taken from a partner, loved ones or the environment²³

The support given to the mother during the pregnancy period will be able to increase the mother's knowledge, understanding and insight so that there is an increased understanding of the health conditions of herself and the fetus in the womb.¹⁹. A good understanding will be able to create thought patterns and build positive perceptions of pregnancy and their abilities. Such conditions can minimize stressors experienced by mothers, reduce the risk of depression that can occur in the antenatal and post-natal periods and accelerate the adaptation process to achieve new roles.²⁴.

Social support that has a positive impact on the mother's understanding and level of knowledge is also able to increase self-confidence or what is called self-efficacy. Self-Efficacy can be increased through increasing knowledge of pregnant women. And understanding of their health conditions during pregnancy will be able to reduce individual stressors during pregnancy and prepare themselves to become mothers. Research conducted by²⁵ Mentioned that the education given during pregnancy significantly increases self-Efficacy, whether the mother is accompanied by her husband or not. ²⁵[25](Chalid & Hasanuddin, 2019)(Chalid & Hasanuddin, 2019)(Chalid & Hasanuddin, 2019). Self-Efficacy can be influenced by four important sources, namely performance achievement, experience, verbal persuasion and sources of information²⁶. Achieving these components properly will increase the confidence and motivation of pregnant women in carrying out maternal roles. The low self efficacy will cause anxiety in the mother. This is because pregnant women experience anxiety in facing their new roles, especially primigravida mothers who have no experience²⁷.

The high level of mother's self-confidence has a positive correlation with the mother's ability to make decisions about her own health²⁰. The mother is able to make decisions about her health condition by considering the safety aspects of both herself and the fetus in the womb. What

actions will be taken, how to plan for her pregnancy and the solution to the problems she is experiencing will be decided.

4. Conclusion

The dyad model is part of the intervention from social support or social support. The development of this model led to an intervention in the form of an action that involved two people. Two people can be a mother with a fetus or a mother and a father when the activity is applied to a pregnancy.

Providing social support or a good Dyad model will be able to reduce the level of anxiety when the mother is facing pregnancy, childbirth and the period of breastfeeding. This ability can reduce stressors which have positive implications for the mother's ability to adapt to her new role or maternal role.

Social support in the form of a Dyad care model is also able to increase understanding of pregnant women so that mothers become more confident in the pregnancy period, face childbirth and achieve new roles. The condition in which the mother is more confident will increase the mother's ability to make decisions about her health status.

5. Suggestion

The need for efforts to increase the understanding of the spouse or family of the importance of social support in providing services, especially for pregnant women. It is necessary to develop the provision of interventions by involving the support of partners or families in providing nursing care to pregnant women both at the clinical and community levels. It is necessary to establish services for pregnant women in the form of prenatal classes with the development of a Dyad Care program that optimizes support from husbands or partners in a structured manner.

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