

INFLUENCE OF PSYCHOSOCIAL FACTORS ON PSYCHOLOGICAL WELL-BEING AMONG PREGNANT WOMEN IN ADEOYO HOSPITAL IBADAN, OYO STATE

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ABSTRACT

For women, being pregnant and waiting for the birth of their child are fascinating times. It has also been demonstrated that this is a sensitive period when women may be more vulnerable to psychological problems. Therefore, this study examines the influence of psychosocial factors on psychological well-being among pregnant women in Adeoyo hospital Ibadan, Oyo state. Nigeria

The study utilized cross-sectional survey design and one hundred and forty-five participants were purposively selected from a government hospital in Ibadan south-west local government. Data were collected using a 51-item structured questionnaire with five scales.

One hypothesis was tested using multiple regression analysis at $p < 0.05$ level of significance. The result revealed that there was significant joint influence of social support, marital satisfaction, job satisfaction and psychological wellbeing [$F(4, 145) = 6.50$, $R^2 = .12$; $p < .05$] with the variables accounting for 12% of the variance in psychological wellbeing. Further results show that marital satisfaction ($\beta = -.45$; $p < .01$) significantly independently predicted psychological wellbeing.

The result showed that women who are not maritally satisfied, who lacks social support and who are not satisfied with their job will experience psychological distress and this result revealed how these factors predicted psychological wellbeing. Therefore, psychologist, and other professionals should put measures in place to reduce marital dissatisfaction among couples in order to have a healthy psychological wellbeing during pregnancy so that their mental health will be preserved to avoid peripartum depression.

Key words: pregnant women, psychological well-being, marital satisfaction, psychosocial factors and psychological distress.

INTRODUCTION

An individual's general mental health as well as the existence of good emotions and attitudes are referred to as psychological well-being. It includes all facets of an individual's existence, such as their social, emotional, and mental health. Psychological well-being, according to Ryff, is the pursuit of excellence in realising one's true potential (Ryff, 2014). According to Ryff, wellbeing is multifaceted and includes aspects like self-acceptance, positive relationships with others, environmental mastery, personal progress, autonomy, and a purpose in life (Winefield et al., 2012). The findings of earlier research demonstrate that the state of psychological wellbeing and its constituent parts varies with life stage and with respect to demographic traits, and that a number of factors can affect an individual's level of psychological wellbeing (Michaeli 2011).

Pregnancy has a significant impact on a woman's physical and mental health and has an impact on all aspects of her life, including her psychological wellbeing (O'Leary 2015).

Since psychological well-being is a positive state in people, it follows that everyone should value it, especially the study's target population of pregnant women. Pregnancy is a condition that includes, among other things, increased stress, physical changes, and mood swings. Women undergo biochemical, physiological, and anatomical changes during pregnancy, which is a time of transition (Abduljalil et al., 2012). Organisational factors (family-friendly work practices, role models), societal influences (Hennekam et al., 2019), and individual factors (partner support, professional objectives) all have an impact on the transition to motherhood. Certain expectant mothers cope effectively with these modifications by preserving their ideal physical state, cultivating wholesome interpersonal connections, and receiving assistance from their relatives and medical professionals (Soma-Pillay et al., 2016; Weissgerber et al., 2006; Rosnani et al., 2022). Pregnant women are susceptible to social, emotional, and physical disorders during this transition, which can occasionally be uncontrollable (Lonstein et al., 2014; Moya et al 2014).

The psychological well-being of pregnant women is greatly influenced by psychosocial factors, which are the marital satisfaction, work satisfaction, and social support variables that will be examined in this study. There may be a relationship between psychological health and marital satisfaction, particularly during pregnancy when there are a lot of big life changes. It's crucial to remember that every partnership is different and that their specific situation may change. Keeping up a solid, encouraging marriage throughout pregnancy is beneficial to the expectant mother's health and lays a solid basis for her future parenting experience. Strengthening the link between couples can be achieved via open communication, empathy, and a collaborative approach to overcoming the obstacles of pregnancy. One measure of a high-quality marriage is marital satisfaction, which is the sincere joy, contentment, and pleasure that a husband and wife feel when they take into account every facet of their union. Pregnant women's mental health and general well-being may be significantly impacted by the level of satisfaction they experience in a number of ways (Karney & Bradbury, 2020). Additionally, it is expected that pregnant women who are happy in their marriage will report feeling better overall than those who are dissatisfied (Shahsiah et al. 2011).

Social support is another component that can affect pregnant women's psychological well-being in addition to marital contentment. The idea and experience of being cared for, having help available from others, and being a part of a helpful social network is known as social support. These resources can be intangible (like personal guidance) or physical (like financial aid), emotional (like nurturing), informational (like advice), companionship (like a sense of belonging), or informational (like advice). Therefore, the perception of having help accessible, the actual aid received, or the degree of integration into a social network can all be used to measure social support. Pregnant women's psychological well-being is positively impacted by social support, which has several benefits. A happy and meaningful pregnancy experience can be facilitated by establishing and preserving strong social ties, which can build emotional fortitude and prepare a person for the joys and trials of parenthood.

Job satisfaction is another aspect that may have an impact on pregnant women's psychological health. An employee's positive and upbeat emotional state regarding their work is referred to as job satisfaction (Judge & Klinger, 2008). As per Spyniewska (2013), an employee's favourable attitude towards their company, coworkers, and the job itself is the definition of job

satisfaction. Given that it encompasses behavioural, cognitive, and emotional aspects, job satisfaction is a crucial aspect of pregnant women's wellbeing (Saari & Judge, 2004). Being a working pregnant woman increases the likelihood of experiencing stress. This gets worse if the expectant mother is dissatisfied with her work, as this increases her perceived stress levels and the resulting reports of her poor psychological health. Pregnant employees and employers must work together to balance work and pregnancy. Employers have a significant impact on fostering cultures that prioritise pregnant women's well-being and are supportive of their work, which can lead to favourable psychological effects and increased job satisfaction.

There are various psychological and environmental factors that interact to influence the psychological state of pregnant women. A pregnant woman has a lot of responsibilities already with the state of being pregnant. This is a temporary, yet challenging period, where if stress is added, might lead to poor psychological well-being. It is, therefore, expected that the aforementioned factors will predict the psychological well-being among pregnant women. Consequently, the following research question to be answered in this study is; Will social support, marital satisfaction and job satisfaction have significant joint and independent influence on psychological well-being of pregnant women?

METHODS

Design

The study utilized ex-post facto method using cross-sectional research design. This is because the variables of interest, psychological well-being, marital satisfaction, social support and job satisfaction had already occurred or happened in nature prior to the commencement of the study. The researcher gathered the necessary data needed for the study in order to draw inferences about these variables. This means data were collected from pregnant women of different age group simultaneously. Questionnaire was used to gather data from the respondents on the influence of the independent variables (Job satisfaction, marital satisfaction and social support) on the dependent variable (Psychological well-being).

Setting

The study was conducted in Adeoyo general hospital in Ibadan, Oyo state. Adeoyo General Hospital in Ibadan is a government-owned hospital located in Ibadan, Oyo State, Nigeria. It is one of the prominent healthcare facilities in the region, serving as a general hospital that provides a range of medical services to the community.

Sampling Technique

Purposive sampling technique was adopted in this study. This is because the population which sample will be taken are pregnant women. A total of 145 pregnant women participated in this study. Frequency distribution revealed that more of the pregnant women 55 (37.9%) were 35 years and above, 34 (23.4%) were between 25 and 29 years old, 30 (20.7%) were between 20 and 24 years old, 20 (13.8%) were between 30 and 34 years old, while the other 6 (4.1%) were less than 20 years old. Also, religion distribution shows that more of the respondents 83 (57.2%) were Muslims, 55 (37.9%) were Christians, while the other 7 (4.8%) indicated to be traditionalists.

Family type revealed that more of the pregnant women 97 (66.9%) were from monogamous family, while the other 48 (33.1%) had polygamous family background. More of the pregnant

women 112 (77.2%) were married, 14 (9.7%) were divorced, 11 (7.6%) were single mothers, 7 (4.8%) were separated, while the other individual (0.7%) indicated to be a widow. More of the pregnant women 69 (47.6%) indicated to belong to the Yoruba ethnic group, 41 (28.3%) were from the Igbo clan, while the other 35 (24.1%) were Hausas. Finally, more of the pregnant women 59 (40.7%) were in second trimester, 50 (34.5%) were in third trimester, while the other 36 (24.8%) were in their first trimester.

Instruments

Data were collected through the means of a structured questionnaire.

Section A comprised of socio-demographic variables such as Age, marital status, religion, ethnicity, pregnancy stage, family background.

Section B measured Psychological Well-Being using The Psychological Well-Being scale (PWB), an 8-item scale was developed by Diener et al., (2010). The PWB correlated very strongly with the total scores for the other psychological well-being scales, at 0.80 and 0.69. In this study, the scale was found to have an internal consistency of ($\alpha = 0.617$). The response overall score on the scale ranges from 8 to 48 with high score indicating high psychological wellbeing and low scores indicating low psychological wellbeing.

Section C measured Perceived Social Support using a 12-item perceived social support (MSPSS). The scale was jointly developed by Dahlem, Zimet, and Farley, (1988). The Cronbach's Alpha of .72 for this research. The response overall score on the scale ranges from 12 to 84 with high score indicating low perception of social support and low scores indicating high perception of social support. It has a good validity, and a fairly stable factorial structure.

Section D measured Marital Satisfaction with a 15-item ENRICH Marital Satisfaction Scale, developed by Fowers and Olson (1993). The response overall score on the scale ranges from 0 to 20 with high score indicating high marital satisfaction and low scores indicating low marital satisfaction.

Section E measured Job satisfaction using a 10-item Job satisfaction scale developed by Macdonald and MacIntyre, (1997). The scale showed good reliability of alpha coefficient of .88

Procedure

The researcher got an introduction letter from the department of psychology and proceeded to apply for ethical approval from the Oyo state ministry of health. An ethical clearance was issued with ethical approval number AD/13/479/466B. This was subsequently taken down to Adeoyo general hospital where permission was gotten from the director's office to proceed with the data collection. Antenatal care in Adeoyo general hospital holds three times every week. These days were targeted in order to meet the pregnant women in large numbers. This was done consistently for 4 weeks. 200 copies of questionnaire were distributed and only 146 were retrieved and utilized for data analysis.

Ethical Consideration

Series of ethics were considered before and during data gathering. This includes; beneficence, non-maleficence, informed consent and confidentiality.

Beneficence refers to the benefits of the respondents for participating in the study. This study offered no tangible benefit to the participants and this was clearly stated before recruitment to participate in the study. However, the findings of the study can be shared with participants who indicate interest.

Non-maleficence refers to whether there were risks for participating in the study. There are no risks involved, hence, this was stated. There was no need for blood samples, pain administration or collection of any physical sample from respondents.

Further, respondents needed to approve that they willingly participate in the study by signing the informed consent form. Finally, respondents were guaranteed of the confidentiality of their submission. There was no need for personal information collation.

RESULTS

This section presents results of gathered data on psycho-social factors predicting psychological well-being among pregnant women in Adeoyo hospital, Ibadan, Oyo state. Data was gathered from one hundred and forty five ($n = 145$) pregnant women in Ibadan. Results are presented in sections.

1.1 Socio-demographic distribution

Table 1: Socio-demographic distribution of respondents

SN	Variables	Response	Frequency	Percentage(%)
1	Age <i>Mean = 30.88</i> <i>SD = 7.82</i>	Less than 20 years	6	4.1
		20-24 years	30	20.7
		25-29 years	34	23.4
		30-34 years	20	13.8
		35 years above	55	37.9
2	Religion	Christianity	55	37.9
		Islam	83	57.2
		Traditional	7	4.8
3	Family type	Monogamous	97	66.9
		Polygamous	48	33.1
4	Marital status	Married	112	77.2
		Divorced	14	9.7
		Separated	7	4.8
		Widowed	1	0.7
		Single mother	11	7.6
5	Ethnicity	Yoruba	69	47.6
		Igbo	41	28.3
		Hausa	35	24.1
6	Pregnancy stage	First trimester	36	24.8
		Second trimester	59	40.7
		Third trimester	50	34.5

Table 1 shows that more of the pregnant women 55 (37.9%) were 35 years and above, 34 (23.4%) were between 25 and 29 years old, 30 (20.7%) were between 20 and 24 years old, 20 (13.8%) were between 30 and 34 years old, while the other 6 (4.1%) were less than 20 years old.

Distribution according to religion shows that more of the pregnant women 83 (57.2%) were Muslims, 55 (37.9%) were Christians, while the other 7 (4.8%) were traditionalists. More of the pregnant women 97 (66.9%) indicated to be from monogamous family, while the other 48 (33.1%) were from polygamous family.

Further, more of the pregnant women 112 (77.2%) were married, 14 (9.7%) were divorced, 7 (4.8%) were separated, 11 (7.6%) were single mothers, while the other individual (0.7%) indicated to be widowed. Ethnicity distribution revealed that more of the pregnant women 69 (47.6%) were from the Yoruba ethnic group, 41 (28.3%) were from the Igbo group, while the other 35 (24.1%) belong to the Hausa ethnic group.

Finally, more of the pregnant women 59 (40.7%) indicated to be in their second trimester, 50 (34.5%) were in their third trimester, while the other 36 (24.8%) indicated to be in their first trimester.

Hypothesis one

Social support, marital satisfaction, and job satisfaction will have significantly independently and jointly influence on psychological well-being of pregnant women. This was tested using multiple regression analysis and the result is presented on Table 2;

Table 2: Multiple regression analysis summary table showing results on the predictors of psychological well-being among pregnant women

Predictors	β	t	p	R	R ²	F	p
Social support	-.15	-1.13	>.05				
Marital satisfaction	.45	3.51	< .01	.35	.12	6.50	< .01
Job satisfaction	.12	1.51	> .05				

Table 2 presents results on the joint and independent influence of social support, marital satisfaction and job satisfaction on psychological well-being among pregnant women in Ibadan. It is shown that social support, marital satisfaction and job satisfaction were significant joint predictors of psychological well-being among pregnant women [$R = .35$; $R^2 = .12$; $F (df = 3, 141) = 6.50$; $p < .01$]. Collectively, social support, marital satisfaction and job satisfaction accounted for about 12% variance in psychological well-being among pregnant women. However, only marital satisfaction had significant independent influence on psychological well-being among pregnant women ($\beta = .45$; $t = 3.51$; $p < .01$). This confirms the stated hypothesis.

Table 3: t-test for independent samples summary table showing results on marital satisfaction differences in psychological well-being

Marital satisfaction	N	Mean	SD	T	df	p
High	71	44.03	2.60			
				2.71	143	< .05
Low	74	42.88	2.50			

Table 3 presents results on the influence of marital satisfaction on psychological well-being among pregnant women. It is shown that marital satisfaction had significant influence on psychological well-being of pregnant women [$t(143) = 2.71$; $p < .05$]. Further, pregnant women with high level of marital satisfaction reported highest on psychological well-being (Mean = 44.03; SD = 2.60) compared to those with low level of marital satisfaction (Mean = 42.88; SD = 2.50). This confirms the stated hypothesis.

DISCUSSION

The study at Adeoyo Hospital in Ibadan, Oyo state, examined the influence of psychosocial factors on the psychological wellbeing of pregnant women.. First hypothesis: pregnant women's psychological well-being will be significantly influenced, both independently and jointly, by social support, marital satisfaction, and job satisfaction. Multiple regression analysis was used to investigate this, and the results showed that social support, marital contentment, and job satisfaction all significantly influenced pregnant women's psychological well-being jointly. Pregnant women's psychological well-being was significantly influenced by marital satisfaction independently. This supports the proposed theory. As a result, the theory is verified. Likewise, research in the literature showed a favourable relationship between psychological well-being and marital satisfaction (Joshnloo & Daemi, 2014; Wills, 2019; Zullig, Ward, & Horn, 2016).

Besral et al.'s (2023) study examined the relationship between pregnant women's psychological well-being and marital satisfaction, and the results indicated a strong correlation between the two. Furthermore, it was reported by Alipour et al. (2019) that a noteworthy and affirmative correlation exists between pregnant women's psychological well-being and job satisfaction. Furthermore, Yalcintas and Pike (2021) found a strong and positive correlation between psychological well-being and marital satisfaction.

Conclusions

From this study social support, marital satisfaction and job satisfaction were significant joint predictors of psychological well-being among pregnant women. Further, this study concludes that only marital satisfaction had independent influence on psychological well-being of pregnant women such that pregnant women with high marital satisfaction reported higher levels of psychological well-being than those with low marital satisfaction. Further, it could be concluded from this study that job satisfaction and marital satisfaction had incremental influence on the psychological well-being of pregnant women. Specifically, when marital satisfaction and job satisfaction increases, it contributes to better psychological well-being of pregnant women.

Finally, it is concluded from this study that marital satisfaction had significant independent influence on psychological well-being of pregnant women. Further, pregnant women with high level of marital satisfaction reported highest on psychological well-being compared to those with low level of marital satisfaction.

Recommendations

The following recommendations were made based on the findings of the study;

It was discovered that the higher the social support of pregnant women, the higher their level of psychological well-being. it is recommended that relatives, spouses and significant others around pregnant women should offer quality support such as providing company and offering advice on

what to expect and what not to engage in. This will go a long way in providing a sense of not being alone during pregnant.

It was also, discovered that marital satisfaction had significant influence on psychological well-being such that the more pregnant women feel satisfied in their marriage, the higher their psychological well-being, It is therefore recommended that policies that gives spouses orientations on the need to ensure quality marital relationship with the wife especially during pregnancy should be made and emphasized on. Also, spouses should expect that pregnancy causes cravings in the pregnant woman, which if satisfied, could be interpreted as a feeling of been loved and subsequently satisfied. Therefore, spouses should try as much as possible to provide the needs of their pregnant wife. Also, Psychologists should be involved in counseling couples to experience a satisfactory marriage. Finally, it is recommended that more studies should be carried out on other factors that could contribute to the psychological well-being of pregnant women, This will help to offer more practical recommendations to assist the pregnant women.

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