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Women’s experiences of anxiety during pregnancy: an interpretative phenomenological analysis

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Background & Aim

- Pregnancy is a time of transformation and transition.
- Approximately 15% of women will experience clinical levels of anxiety during pregnancy.
- Identifying and treating general anxiety during pregnancy is difficult due to the current application of general diagnostic criteria.
- Focusing on antenatal anxiety is important because it is associated with higher risk of:
  - maternal postnatal depression,
  - excess production of cortisol impacting baby’s neurodevelopment,
  - disruptions in perinatal attachments between mother and baby.
- Previous qualitative studies examined antenatal anxiety collectively under the umbrella term of ‘distress’ but in-depth exploration of the experiences of anxiety during pregnancy is lacking.
- This study aimed to solely explore women’s lived experiences of anxiety.

Method

- **7 women:** recruited from antenatal clinic/online ads
- **Focus 1:** experience of anxiety during pregnancy
- **Focus 2:** communicating anxiety during pregnancy
- **Focus 3:** seeking women’s advice on how to improve healthcare support
- **Analysis:** interpretative phenomenological analysis

Inclusion:
- 18+ years and English speaker
- Any stage of pregnancy
- Self identify as experienced generalised anxiety
- Primigravida or multigravida women

Exclusion:
- Other psychiatric diagnoses
- High risk pregnancy
- Previous miscarriages or traumatic birth
- In vitro pregnancies

Results & Clinical implications

- **Generalised worries in the context of pregnancy and motherhood.**
- **Worries were general but shifted in relation to pregnancy and motherhood.**
- **Social expectations of pregnancy and motherhood increased anxieties.**
- **Women primarily described cognitive and emotional aspects of anxiety and not physical during pregnancy.**

1. Adjustment to pregnancy & motherhood & the experiences of anxiety
2. Unfamiliarity, uncertainty & uncontrollability of pregnancy influences anxiety
3. Personal & social expectations & pressures of pregnancy & motherhood
4. Relying on healthcare systems – the good & bad

- **Continuity of care is important for developing trusting relationships which promote disclosure of anxiety.**
- **Healthcare professionals have the potential to reduce anxiety by normalising and validating experiences.**
- **Information regarding the range of physical and emotional experiences during pregnancy is needed to normalise experiences and reducing uncertainty.**
- **Being primipara, within the first trimester or experiencing pregnancy complications caused uncertainty and anxiety.**

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