

**BEHAVIORAL AND EMOTIONAL CHANGES IN PREGNANCY: AN INTERVIEW BASED
ANALYSIS****Mayank Kumar^{*1}, Shalini Dhoundiyal², Naghma Nazrana³, Neeta Arya⁴**¹PG Scholar, Department of Master of Public Health, Shri Dev Suman University, Tehri Garhwal, Uttarakhand
Combined (PG) Institute of Medical Science and Research, Kuanwala, Dehradun.²Assistant Professor, Hospital administration, CIMS&R, Dehradun.³Assistant Professor, CIMS&R, Dehradun.⁴M.D. (AYU) Rishikul, Medical Officer, Ayush wing Joshyura, Nainital.***Corresponding Author: Dr. Mayank Kumar**PG Scholar, Department of Master of Public Health, Shri Dev Suman University, Tehri Garhwal, Uttarakhand
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ABSTRACT

Pregnancy is a dynamic phase in a woman's life that brings significant physiological, psychological, emotional, and social changes. Along with physical adaptations, many women experience noticeable behavioral and emotional variations that may influence their daily activities, interpersonal relationships, mental well-being, and overall quality of life. The present study aims to assess and analyze behavioral and emotional changes occurring during pregnancy through an interview-based approach. This descriptive study was conducted among pregnant women attending antenatal visits to the hospital. Data were collected using structured interviews designed to evaluate common emotional and behavioral changes experienced during different trimesters of pregnancy. The interview schedule included questions related to mood fluctuations, anxiety, irritability, stress, sleep disturbances, social interaction, food cravings, emotional sensitivity, fear regarding childbirth, and family support. Participants from varied age groups, educational backgrounds, and socioeconomic statuses were included to obtain a broader understanding of pregnancy-related behavioral responses. The findings revealed that emotional and behavioral changes were highly prevalent during pregnancy. Mood swings, increased emotional sensitivity, anxiety about fetal health and childbirth, irritability, altered sleep patterns, and changes in appetite were among the most commonly reported experiences. Many participants also reported enhanced emotional attachment toward family members and increased need for social and emotional support. The intensity and nature of these changes varied across trimesters and were influenced by factors such as family environment, previous pregnancy experiences, and level of social support. The study emphasizes the importance of acknowledging emotional and behavioral changes as a normal yet significant aspect of pregnancy. Early identification and supportive counseling by healthcare professionals can contribute to improved maternal mental health and better pregnancy outcomes. The interview-based assessment approach provided valuable insight into the subjective experiences of pregnant women and emphasized the need for holistic antenatal care addressing both physical and psychological well-being.

INTRODUCTION

Pregnancy is considered a highly sensitive and vulnerable phase in a woman's life. Along with common medical conditions such as gestational diabetes, hypertension, and anemia, mental health concerns also represent a significant challenge during this period. Depression is recognized as one of the leading causes of disability

among women worldwide, and pregnancy has been linked with an increased risk of developing depressive episodes. Although postpartum depression is a widely recognized condition, research has demonstrated that depression frequently occurs during pregnancy as well, with nearly 12.7% of pregnant women experiencing an episode of major depression. Studies have further reported that

approximately 23% of women diagnosed with postpartum depression had already developed depressive symptoms during the antenatal period. Antenatal anxiety disorders have also been identified as significant risk factors for maternal mental health problems.

Among anxiety disorders during pregnancy, generalized anxiety disorder has been reported as the most prevalent, affecting around 8.5%–10.5% of pregnant women, followed by panic disorder (1.4%–5.2%) and obsessive–compulsive disorder (1.2%–5.2%). Additionally, several psychosocial and environmental factors contribute to mental health morbidities during pregnancy. Stressful life events, inadequate social support, and a prior history of depression are considered major risk factors. Other moderate-risk factors include childcare-related stress, pregnancy and obstetric complications, poor partner relationships, and low socioeconomic status. Therefore, mental health problems during pregnancy should be identified and managed at an early stage. Effective interventions aimed at improving maternal mental well-being during pregnancy play a crucial role in preventing adverse health and developmental outcomes in newborns and children.

MATERIAL AND METHODS

A self-structured questions prepared after extensive review of literature regarding psychological and behavioral changes during pregnancy. The domains of the questionnaire were developed using concepts adapted from standardized assessment tools including Edinburgh postnatal depression scale, Perceived stress scale, and Beck anxiety inventory.

The interview schedule consist of four sections

1. Socio-demographic details
2. Obstetrics history
3. Structured questions related to emotional and behavioral changes
4. Open-ended questions regarding personal experiences during pregnancy.

Section A

1. Age:
2. Marital duration:
3. Educational qualification:
4. Occupation:
5. Types of family: Nuclear/joint
6. Socioeconomic status: lower/middle/upper
7. Residence: urban/rural

Section B

1. Gravida:
2. Parity:
3. Trimester: first/second/third
4. Planned pregnancy: yes/no
5. Previous history of abortion/miscarriage: yes/no
6. Any pregnancy complications: yes/no

Section C

Included questions related to emotional, behavioral,

psychological, and social changes during pregnancy such as mood swings, anxiety, irritability, sleep disturbance, appetite changes, emotional dependency and fear regarding child birth.

Response record by using a 5 point likely:

1. Never
2. Rarely
3. Sometimes
4. Often
5. Always

Included subjective questions regarding personal experiences, concern during pregnancy, and expected family support.

1. Do you experience frequent mood swings:
2. Do you feel emotionally sensitive more than usual:
3. Do you feel anxious about your pregnancy or baby's health:
4. Do you experience irritability during pregnancy:
5. Do you feel stressed without a specific reason:
6. Do you experience sadness or low mood:
7. Do you fear labor pain or childbirth:
8. Do you feel emotionally dependent on family members:
9. Have your sleeping patterns changed during pregnancy:
10. Have you noticed changes in appetite:
11. Do you experience food cravings:
12. Do you prefer isolation or reduced social interaction:
13. Do you become angry more easily than before pregnancy:
14. Do you require more emotional support from others:
15. Has your relationship with family members changed during pregnancy:
16. Do financial concerns affect your emotional well-being:
17. Do you worry about future parenting responsibilities:
18. Do you feel confident about becoming a mother:
19. Do you feel emotionally attached to your unborn baby:

Section D

- (a) What major emotional change have you noticed during pregnancy ?
- (b) What type of support do you expect from your family members?
- (c) What are your greatest concerns during pregnancy?

RESULT

Interpretation on scores

| Score Range | Interpretation |
|-------------|-------------------------------------|
| 22 – 44 | Mild behavior/emotional changes |
| 45 – 77 | Moderate behavior/emotional changes |
| 78 – 110 | Severe behavior/emotional changes |

The proposed study is expected to identify various behavioral and emotional changes experienced by pregnant women during different trimesters of pregnancy. Commonly anticipated findings may include

mood swings, anxiety regarding fetal health and childbirth, emotional sensitivity, irritability, altered sleep patterns, appetite changes, and increased emotional dependency on family members.

It is also expected that emotional and behavioral changes may vary according to trimester, family support, socioeconomic status, and previous pregnancy experiences. Pregnant women with better social and emotional support may demonstrate lower stress and anxiety levels compared to those with inadequate support systems.

DISCUSSION

Pregnancy is associated with multiple physiological and psychological adjustments that can influence a woman's emotional and behavioral status. The proposed study is expected to demonstrate that emotional disturbances such as anxiety, stress, mood fluctuations, and fear related to childbirth are commonly experienced during pregnancy. The study is also expected to highlight the importance of family support and emotional care during pregnancy. Women receiving adequate support from family members and partners may exhibit better emotional stability and coping abilities.

The use of a self-structured interview schedule may provide detailed insight into subjective experiences and personal perceptions of pregnant women, thereby helping healthcare professionals understand the psychological needs of antenatal mothers more effectively.

CONCLUSION

Early identification of these changes through interview-based assessment may help healthcare professionals provide timely counseling, emotional support, and holistic antenatal care.

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