

Original Article

Supportive Educative in Improving the Readiness of the Anticipatory Phase of Primigravida Towards Achieving the Maternal Role

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ABSTRACT

Background: Primigravida mothers experience psychological changes, especially before delivery, related to the readiness of the anticipatory phase towards achieving the maternal role. Providing supportive education by health workers, husbands, and families can be a supporting factor in the readiness of pregnant women for the anticipatory phase. This study aims to determine the effect of supportive education on the readiness of the anticipatory phase in primigravida mothers towards achieving the role of mothers in the work area of the Pogalan Health Center, Trenggalek Regency.


Methods: This research design was pre-experimental, involving 42 respondents through total sampling. The independent variable was supportive education, and the dependent variable was the readiness of the anticipatory phase towards achieving the mother's role, which is measured using a questionnaire

Results: The results showed that the criteria for the readiness of the anticipatory phase before being given supportive educative intervention were mostly (66.7%) of respondents in the high category, and after the intervention, the majority (86.7%) of respondents had high readiness. Analysis with the Wilcoxon test obtained a value of = 0.008 (< 0.05), indicating a supportive educative effect on the readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles.


Conclusion: Supportive Educative can increase the mother's knowledge so that her understanding of pregnancy improves, her perception becomes positive, and she feels more confident that she is more prepared to undergo pregnancy and ready for the delivery process. Supportive education can be one method for improving the process of adaptation to the achievement of the mother's role

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
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Introduction

Most pregnant women are often accompanied by fear of childbirth or the role of motherhood. The mother's condition is influenced by several changes that occur

in the mother, such as changes in the mother's physical, psychological, and social changes (Pangesti & Pangesti, 2018). Various changes in the condition of pregnant women can be a problem for the



mother, both physiologically, psychologically, and socially ([Jaarsma, 1998](#); [Maulida et al., 2017](#)). Physical problems include shortness of breath, asthma, and hypertension; shortness of breath occurs because the uterus presses on the diaphragm, and hypertension for unknown reasons, which will have an impact on the occurrence of preeclampsia and eclampsia ([Swindle et al., 2020](#)).

Psychological problems in the alertness of mothers waiting for the birth of a baby, mothers will feel worried about their babies if later there are abnormalities in the baby or there are difficulties in giving birth, this condition is exacerbated. Pregnant women do not understand the importance of the anticipatory phase, so mothers are not ready to carry out their role before delivery ([Rohmawati et al., 2019](#)). The psychological condition of the mother requires support in achieving the role of a mother during pregnancy, family, social, and health support. This is because pregnant women need to be given access to integrated physical and psychological care and acceptance of their behavior during their pregnancy without any psychological complaints that accompany pregnancy ([Armer et al., 2011](#); [Pangesti & Pangesti, 2018](#)).

Pregnancy is a process of physiological changes in a woman's life cycle commonly occurring in every woman. For primigravida mothers (first pregnant mothers), pregnancy is the first experience in their period of life. This situation can cause drastic changes in the mother's physical, psychological, and social changes ([Folden, 1993](#); [Mail, 2020](#)). Pregnancy affects physical changes such as the reproductive, endocrine, urinary, digestive, cardiorespiratory, hematological, musculoskeletal, and integument ([Saifudin, 2017](#)).

Psychological changes experienced by pregnant women include the early stages of becoming a mother in psychological adjustment to becoming a mother, emotional changes (mood) occur in the form of feelings of happiness, pleasure, confusion, worry, and not being ready to fulfill a new role before becoming a mother ([Afiyah et al., 2020](#); [Doornbos et al., 2018](#)). Most primigravida pregnant women are psychologically not fully ready to achieve their role in adjusting themselves ([Yuswanto et al., 2017](#)).

Data on psychological disorders of pregnant women in Indonesia in 2020 were 109,000,000 or 29.4% of them in the form of anxiety that occurred in pregnant women before the delivery process ([Saputri & Yudianti, 2020](#)). There are 25 people out of 100 pregnant women who experience psychological disorders such as complaining of anxiety 70%, fear 25%, and stress 5%. Meanwhile, according to the Trenggalek District Health Office, there is no data on psychological disorders of pregnant women in the Trenggalek district; there is no official data regarding this—a preliminary study conducted by researchers on January 27, 2023. In the Work Area of the Pogalan Health Center, Trenggalek Regency, the data for the last three months of October-December 2022 showed 462 pregnant women. From these data, there were 142 primigravida pregnant women. Furthermore, the researchers dug up data on 20 pregnant women by asking informally about their first pregnancy, and there were around six mothers (30%) who said they did not experience fear because they had received a lot of information from print and electronic media and saw firsthand the experiences of others from their older siblings. And the mother in caring for the baby. Meanwhile, 14 mothers (70%) said they felt anxious about their pregnancy. Some mothers were afraid

because they had no previous experience, were afraid that the baby would be disabled, labor was not normal, and had to undergo surgery and did not have the readiness to carry out their first role as a mother to take care of the baby such as bathing. Child, change clothes.

Physiological, psychological, and social changes influence the anticipation of the mother's readiness to achieve her role as a mother; the role at the beginning of becoming a mother will be more achievable through the efforts made that focus on increasing knowledge related to pregnancy, childbirth, and caring for babies, namely diligently reading the forms of roles. Preparation for becoming a mother through social media, asking midwives, and attending classes for pregnant women so that mothers get a lot of information to achieve their roles.

Changes in pregnancy will certainly cause specific symptoms according to the stages of pregnancy. Therefore, pregnant women must know how to deal with physiological and psychological changes. Mother's knowledge that is not supported by supporting information sources can make mother's knowledge less in any changes that occur because of the lack of education and knowledge that she has, which can have an impact on the mother's unpreparedness to carry out the role, her sense of competence is also disturbed. There is no trust before and after the birth of the baby. In pregnant women who do not understand the importance of the anticipatory phase, the mother is not ready to carry out her role before becoming a mother to children, family, and also to herself; this condition can have an impact on the mother in psychological adjustment as a mother ([Angesti & Febriyana, 2021](#); [Burns & Smith, 1991](#); [Khatiban et al., 2014](#)) When the mother carries out her role in the new busy life of being a mother, such

as taking care of a baby psychologically, it has an impact on depression, such as the mother experiencing postpartum blues; if this continues, it can have a greater impact on the mother becoming stressed, which in the end has an impact on the baby being neglected. Do not want to take care of the baby, bathe the baby, or breastfeed the baby ([Yuswanto et al., 2017](#)). The impact of problems in carrying out a role that makes the readiness of the anticipatory phase not be carried out properly can be minimized by several efforts, including KIE regarding changes in pregnancy both psychologically, psychologically, and socially so that mothers can adjust themselves to support the anticipatory phase, one form of IEC in the form of supportive educative given to pregnant women, in undergoing the anticipatory phase, the mother can go through the phase of receiving the biologics of pregnancy, the phase of the mother accepting the fetus as something separate from herself, and the realistic phase of preparing to give birth and caring for her baby, as according to T. the achievement of roles such as anticipatory which means that mothers learn everything needed to be a mother and are also given educational support from the family given to pregnant women in the form of preparation during pregnancy. As long as pregnant women prepare for birth, they need educative support, namely the act of teaching to convey teaching messages to create an environmental system that allows the learning process to occur through support-educative activities, guidance, teaching, and support, contact between clients and staff is more intensive, any problems encountered the client can be corrected and assisted in its completion, eventually the client will voluntarily, based on awareness, and understandingly change his behavior ([Angesti & Febriyana, 2021](#)).

Supportive education received by mothers can be from health workers and families such as husbands or other family members for primigravida mothers in readiness to undergo the anticipatory phase; this is because in Supportive education, there is support, guidance, teaching, which is assistance given to mothers, adjustments occur in Problem-solving helps to become a responsible individual for himself. Supportive education given to the mother as a supporting factor from health workers, the family, or the mother's husband concerned can support readiness in the anticipatory phase of pregnant women by providing input or actions that can calm and make mothers understand and accept their first pregnancy. In addition to this, the process of achieving its role can be achieved by mothers by increasing information through participation in classes for pregnant women in which there is various information on changes that occur in mothers, such as physical, psychological, and stress management changes, participation in classes for pregnant women in the hope that mothers will gain knowledge. Sufficiently the mother understands the various information conveyed to pregnant women through the class.

In the anticipatory phase, which plays a role in mastering the mother's role before a woman becomes a mother, women begin to make social and psychological adjustments by learning everything needed to be a mother. Anticipatory stages starting during pregnancy include social and psychological data, adjustment during pregnancy, maternal expectations of the role, learning to play a role, and the relationship with changes in the fetus in the uterus ([Pangesti & Pangesti, 2018](#)). The anticipatory phase towards achieving its role before becoming a mother is something that a primigravida pregnant woman must

undergo, and she needs supportive education to be ready to undergo her pregnancy. Mothers who receive supportive education will be more ready to accept their new role as mothers, taking care of babies, such as bathing babies and breastfeeding babies in the process of achieving their role, because when supportive education is received, mothers learn everything needed to be a mother ([Angesti & Febriyana, 2021](#)). This study aims to determine the effect of supportive education on the readiness of the anticipatory phase of primigravida mothers towards achieving the role of mothers in the work area of the Pogalan Health Center, Trenggalek Regency.

Methods

This study uses a pre-experimental design involving a sample of 42 respondents obtained through purposive sampling with inclusion criteria: Third-trimester primigravida women in the Work Area of the Pogalan Health Center, Trenggalek Regency who are willing to be respondents and exclusion criteria: Pregnant women who are unable to attend, due to signal disturbances. The Independent variable in this study was supportive education, which was carried out virtually three times a week for two weeks with a duration of 30 minutes for each meeting. The dependent variable was the readiness of the anticipatory phase of primigravida mothers towards achieving the mother's role, which was measured by the *questionnaire*. *Ethical Clearance from STIKES Karya Husada (182/EC/LPPM/STIKES/KH/I/2023)*.

Results

Readiness of the Anticipatory Phase of Primigravida Mothers Towards Achieving the Role of Mothers Before Interventions

Table. 1 Distribution of the Anticipatory Phase Readiness of Primigravida Mothers Towards Achieving the Role of Mothers Before Intervention

| Readiness | n | % |
|--------------|-----------|------------|
| High | 30 | 71,4 |
| Medium | 10 | 23,8 |
| Low | 2 | 4,8 |
| Total | 42 | 100 |

The results of the research in the table above show that the criteria for the readiness of the anticipatory phase of primigravida mothers towards achieving the mother's role before being given Supportive educative intervention found that most (71.4%) respondents had high readiness.

Readiness of the Anticipatory Phase of Primigravida Mothers Towards Achieving the Role of Mothers After Providing Supportive Educative Interventions in the Work Area of the Pogalan Health Center, Trenggalek Regency

Table 2 Frequency Distribution of Primigravida Mother's Anticipatory Phase Readiness Towards Achieving Maternal Role After Providing Interventions

| Readiness anticipatory Criteria | n | % |
|---------------------------------|-----------|------------|
| High | 36 | 86,7 |
| Medium | 6 | 14,3 |
| Low | 0 | 0 |
| Total | 42 | 100 |

The results of the research in the table above show that the criteria for the readiness of the anticipatory phase of primigravida mothers towards achieving

the role of mothers after being given a Supportive educative intervention found the majority (86.7%) of respondents had high readiness.

Analysis of the Effect of Educative Support on the Readiness of the Anticipatory Phase in Primigravida Mothers Towards Achieving the Role of Mothers in the Work Area of the Pogalan Health Center, Trenggalek Regency

Table 3 Cross Tabulation of the Effect of Educative Support on the Readiness of the Anticipatory

| Readiness anticipatory Criteria | Pre Test | | Post Test | |
|---------------------------------|-----------|------------|------------|------------|
| | n | % | n | % |
| High | 30 | 71,4 | 86,7 | 86,7 |
| Medium | 10 | 14,3 | 14,3 | 14,3 |
| Low | 2 | 0 | 0 | 0 |
| Total | 42 | 100 | 100 | 100 |
| P value 0,046 | | | | |

Phase in Primigravida Mothers Towards Achieving the Role of Mothers in the Work Area of the Pogalan Health Center, Trenggalek Regency

Based on the cross-tabulation, it shows that the readiness of the anticipatory phase in primigravida mothers towards the achievement of the role of the mother before the Supportive educative intervention showed that most of the respondents (66.7%) had good criteria. After the Supportive educative intervention, most respondents (86.7%) had good criteria.

The results of the research analysis of the influence of Supportive educative on the readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles in the Work Area of the Pogalan Health Center, Trenggalek Regency in 2021, namely from

the results of statistical tests using Wilcoxon obtained a sig (2-tailed) p-value $0.046 < 0,05$ this shows that there is a Supportive educative effect on the readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles in the Pogalan Health Center Work Area, Trenggalek Regency in 2023, with a large value of influence Mean Pre: 45.00 Post: 47.38 so that the provision of information to mothers primigravida in 1 week in groups in 3 sessions, carried out for 30 minutes per session, session 1 with material on the readiness of the anticipatory phase, physical changes in pregnant women, session 2 with material on the readiness of the anticipatory phase of psychological change, session 3 with material on Changes in the Role of Pregnant Women, given online via whatshaap group has an effect on penin Increased readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles.

Discussion

Identification of the Readiness of the Anticipatory Phase of Primigravida Mothers Towards Achieving the Role of Mothers Before Providing Supportive Educative Interventions

Based on the results of the study, which showed that the criteria for the readiness of the anticipatory phase of primigravida mothers towards achieving the role of mothers before being given Supportive educative intervention, it was found that most (66.7%) respondents had high criteria, less than half (23.8%) of respondents had moderate criteria, and some had moderate criteria. Small (9.5%) respondents have low criteria.

Pregnancy is the event of fertilization or union of spermatozoa and ovum and is followed by nidation or implantation. When calculated from fertilization until the baby's

birth, a normal pregnancy will occur within 40 weeks (Jeepi, 2019). The identity of achieving the mother's role is the view of a woman who has been integrated within herself to become a birth mother (Widayati et al., 2022). Indicators of achieving a mother's role identity are self-confidence, satisfaction in carrying out the mother's role, and the bond of mother-infant love. The indicator of the identity of the mother's role is important to achieve optimally because, in the end, it can impact the child's outcome.

There is a research fact that the readiness of the anticipatory phase of primigravida mothers towards achieving the role of the mother before being given Supportive educative intervention obtained most of the high criteria; this is because mothers can show feelings of happiness during pregnancy, filled with joy, especially at the end of pregnancy, accept with feelings of pleasure welcoming the birth, the mother is also preparing for childbirth.

In addition, after the baby is born, the mother is also ready to take care of the baby, has actively prepared for the baby's birth, and fulfills all the baby's needs. Readiness is also influenced by the higher education factor of the mother, as with higher education, the mother makes it easier to receive information and has a better understanding, including the readiness of the anticipatory phase of primigravida mothers towards the achievement of maternal roles, the higher a person's level of education can have more acceptance effects than expected. Low education, besides the mother's age factor, also supports readiness in the anticipatory phase. With maturity, the mother's age increases in understanding and maturity in responding to something, including readiness to undergo the anticipatory phase of the new role of becoming a mother. Thus, primiparous mothers undergo a transitional role in

supporting the readiness of the anticipatory phase in accepting new situations, which the mother has obtained in undergoing her pregnancy leading up to delivery.

In addition to this, the presence of primigravida mothers towards the achievement of maternal roles before being given educative support interventions found that most of them had high criteria because they were influenced by other factors such as husbands and other families providing support to mothers such as husbands providing information and mothers' families providing experiences they had during pregnancy. Until delivery so that the experience is transmitted to the mother. In the end, although primigravida mothers have not received Supportive educative intervention from researchers, they already have high criteria for achieving maternal roles.

The readiness of the anticipatory phase of primigravida mothers towards achieving the role of mothers before being given Supportive educative interventions is also influenced by age, as in general data from 21 respondents, most of the respondents (86.7%) were aged 20-35 years.

Several factors influence the readiness to achieve the mother's role, one of which is age; the mother's age is directly related to the level of developmental maturity and individual experience. Maternal age is associated with increased physical risks that may affect the mother's health and ability to establish a relationship with her baby ([Sartika et al., 2020](#)). Mothers in their teens may experience higher health risks, developmental conflicts, and role conflicts related to parenting ([Yuswanto et al., 2017](#))

Most of the respondents are 20-35 years old. This is because as they get older, the understanding and maturity of a person increase in responding to something, including the ability to undergo an

anticipatory phase, so that mothers have feelings of sensitivity to the situation of taking on a new role as a mother. Meanwhile, on the characteristics of mother's education, most of the respondents (66.7%) had a high school education. As in the education factor owned by the respondents, most of the high school students include secondary education, so they have a supportive understanding in approaching new situations in their families; the anticipatory readiness before the birth of the baby, the higher a person's level of education can have a more acceptance effect than education. This is because of this education; mothers are more receptive to information and have a better understanding, including the readiness of the anticipatory phase of primigravida mothers towards the achievement of maternal roles. A mother's knowledge, supported by supporting information sources, can make her knowledge good in any changes because her education and knowledge can impact her readiness to take on the role ([Sari & Riawati, 2019](#)). Pregnant women understand the importance of the anticipatory phase, so mothers are better prepared to carry out their role before becoming a mother to their children, family, and also to the mother herself; this condition can have an impact on the readiness of the mother in psychological adjustment as a mother.

The readiness of respondents from primigravida mothers in the anticipatory phase towards achieving the role of mothers is by Mercer's statement that health workers and families such as husbands and other family members for primigravida mothers in their readiness to undergo the anticipatory phase can support the adjustment of individuals who are responsible for themselves enable mothers to understand and accept their first pregnancy ([Widayati, Hayati, et al., 2018](#)).

Identification of the Readiness of the Anticipatory Phase of Primigravida Mothers Towards Achieving the Role of Mothers After Providing Supportive Educative Interventions

The results showed that the criteria for the readiness of the anticipatory phase of primigravida mothers towards the achievement of maternal roles after being given Supportive educative intervention showed that most (86.7%) respondents had high readiness and a small proportion (9.5%) had moderate readiness criteria.

According to Mercer, a person's role identity can be achieved when the mother has integrated the role into her self-esteem, is comfortable with her identity as a mother, and emotionally can feel harmony, satisfaction, and ability to play a role. Mercer determined that role identity has internal and external components, an internalized self-view identity, and the role is an external component, a behavioral component ([Sulistiyowati et al., 2018](#)). According to T. Mercer, the stages of achieving roles, such as anticipatory, which means mothers learn everything needed to be a mother and are also given educational support from the family given to pregnant women, can be in the form of preparation during pregnancy. As long as pregnant women prepare for birth, they need Supportive education, namely the act of teaching to convey teaching messages to create an environmental system that allows the learning process to occur through support-educative activities, guidance, teaching, and support, contact between clients and staff is more intensive, any problems encountered the client can be corrected and assisted in its completion, eventually the client will voluntarily, based on awareness, and understandingly change his behavior ([Nuari & Widayati, 2021](#)).

Supportive educative received by mothers can be from health workers and families such as husbands or other family members for primigravida mothers in readiness to undergo the anticipatory phase, while educative support given to respondents is carried out for 30 minutes per session, session 1 with material on the readiness of the anticipatory phase, physical changes pregnant women, session 2 with material on the readiness of the anticipatory phase of psychological change, session 3 with material on Changes in the Role of pregnant women, which is given online via WhatsApp p group affects increasing the readiness of the anticipatory phase in primigravida mothers towards achieving the role of mothers, this is because in Supportive educative there is support, guidance, teaching which is the assistance given to the mother, there is an adjustment in problem-solving helping to become an individual who is responsible for himself. Educational support given to mothers as one of the supporting factors from health workers, the family, or the mother's husband can support readiness in the anticipatory phase of pregnant women by providing input or actions that can calm and make mothers understand and accept their first pregnancy ([Sulistiyowati et al., 2018](#)).

There is a fact from the results of this study that the readiness of the anticipatory phase of primigravida mothers towards the achievement of maternal roles after being given a Supportive educative intervention found that most of the respondents had high readiness, this was because the Supportive educative intervention given by the researcher to the respondents had an impact on increasing maternal readiness, supportive educative received by the mother in readiness to undergo the anticipatory phase, can calm and make the mother understand and accept her first

pregnancy, besides that the mother is also very happy during her pregnancy, filled with joy, especially at the end of pregnancy, accepts with great pleasure in welcoming the birth, ready to care for after the baby birth and also the mother has prepared for the birth of the baby by actively preparing for labor and the needs of the baby, thus primigravida mothers undergo a transitional role in supporting the readiness of the anticipatory phase in receiving sit The new situation has been obtained by the mother in carrying out her pregnancy, which can be maximized after getting educative support, this condition is an illustration that most of the parameters are achieved by the respondent. However, there are still a small number of respondents who have moderate criteria; this happens because of the joy at the end of pregnancy; the mother receives a feeling of pleasure in welcoming the birth, the mother is not fully ready for the transition, so that she still has moderate readiness, the condition is still quite good, there is an increase because initially a small number of mothers Those who have low readiness experience a change to moderate readiness after receiving educative support intervention, this condition is an illustration that the respondent has not achieved the parameters.

As for other things that underlie the mother's readiness for the high criteria anticipatory phase after being given educative support interventions, it is also shown that the mother is ready to welcome the birth, even though the mother has no experience in pregnancy, she still looks happy at the end of pregnancy, the mother does not seem to feel anxious because she always discusses with her husband of choice. In the place of delivery and preparation of everything for the baby, the mother is still a good wife and gets closer to her husband during pregnancy; this

condition is evident as an illustration that the mother is highly prepared in the anticipatory phase of her pregnancy. In addition, the readiness of primigravida mothers in the anticipatory phase towards achieving maternal roles after being given educative support interventions means that the mother has succeeded in learning everything needed to become a mother at the end of her pregnancy.

There is an increase in the achievement of the role of primigravida mothers after being given Supportive educative intervention also because of the influence of husband's support and support from the family so that mothers can be more prepared in the anticipatory phase in accepting new situations, and vice versa without support from husbands or from families it is possible to prepare mothers has not been able to increase to the maximum.

The readiness of the anticipatory phase of primigravida mothers is indirectly influenced by factors of age, education, and work carried by the mother and living with her husband and parents, as in the opinion of researchers, the age of most mothers is 20-35 years old, where that age is mature. Compared to those aged <20 who are still unstable, they are not ready psychologically or for organs, so they are ready during the anticipatory phase. While on the education factor, most of them with high school education can support the readiness of the anticipatory phase of primigravida mothers, as the education is identical with knowledge including knowledge about how to carry out the role as a new mother, with understanding and knowledge that mothers have can support readiness in accepting new situations compared to education. as low as elementary and middle school. As for the work carried out by the mother, it also has an impact on the readiness of the anticipatory phase of primigravida mothers

as most of the respondents do not work, so they have a lot of free time and are not tied to time, such as mothers work outside the home so that mothers are more leverage in the anticipatory phase of readiness. In addition, in the characteristics of living together, mothers live with their husbands as husbands support them so that they are more prepared in the anticipatory phase. Primigravida mothers have high criteria. Moreover, mothers also live with their parents, so they will be able to maximize their readiness in the anticipatory phase because there are people If you are old, the past experiences of parents who have been new mothers will provide advice and input to primigravida pregnant women in undergoing the anticipatory phase of readiness to become new mothers. Mother's high anticipatory phase readiness is also influenced by living together. As in this study, some mothers lived with their husbands and biological parents; they tended to provide a lot of guidance and direction so that the mother's readiness could be better; on the other hand, mothers who lived with in-laws or only with husbands tended to less than the maximum readiness of the anticipatory phase.

Analysis of the Effect of Educative Support on the Readiness of the Anticipatory Phase in Primigravida Mothers Towards Achieving the Role of Mothers

The results of the research analysis of the influence of Supportive education on the readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles, namely from the results of statistical tests using Wilcoxon, obtained a sig (2-tailed) p-value $0.046 < 0.05$. This shows that there is a Supportive educative effect on the readiness of the anticipatory phase in primigravida mothers towards the

achievement of maternal roles in the Pogalan Health Center Work Area, Trenggalek Regency in 2022, with a large value of influence Mean Pre: 45.00 Post: 47.38 so that the provision of information for primigravida mothers in 1 day in 3 sessions, carried out for 30 minutes per session given as a peer group has an effect on increasing the readiness of the anticipatory phase in primigravida mothers towards achieving maternal roles. Meanwhile, based on the cross-tabulation, it shows that the readiness of the anticipatory phase in primigravida mothers towards achieving the role of mothers before the Supportive educative intervention was found to be mostly (66.7%) of respondents with good criteria and after the support educative intervention most (86.7%) of respondents had good criteria.

Supportive-Educative was first introduced by Orem in 1971. Support-educative consists of 3 techniques: support and support-educative activities; contact between clients and staff is more intensive, every problem the client faces can be corrected and solved, and voluntary understanding will change his behavior. Guidance (Guidance) is the assistance given by one person to another in making choices and adjustments in problem-solving to help grow one's freedom and ability to become an individual responsible for himself. Teaching to teach actions, convey teaching messages, and create teaching and learning facilities and infrastructure to increase knowledge and understanding ([Widayati, 2021](#)).

Supportive education for pregnant women in the Anticipatory Phase readiness for motherhood: 1) Readiness to welcome birth 2) Identification of mother's role 3) Preparing for the birth of a baby, mothers need support. The availability of social support for the psychosocial well-being of pregnant women is an important factor.

During pregnancy, mothers need advice through educative support from family, husband, health workers, and peer support. Supportive educative forms for pregnant women can be support, guidance, and teaching. The forms of educative support given to pregnant women are: 1) Family/husband fulfills the physical and psychological needs of pregnant women and helps by providing useful information to deal with problems and situations so that mothers can have self-care through the anticipatory phase preparation. 2) Health workers provide counseling / IEC education about pregnancy problems in undergoing the anticipatory phase of readiness for the role of a mother so that through the IEC that you get, mothers can learn to form self-care towards achieving their role. 3) Peers/peers provide support by providing information on experiences she has gone through in the anticipatory phase so that mothers have self-care from the peer experiences they get.

This study shows that there is a Supportive educative effect on the readiness of the anticipatory phase in primigravida mothers towards achieving the role of mothers in the Work Area of the Pogalan Public Health Center, Trenggalek Regency; this proves that the readiness of the anticipatory phase of primigravida mothers towards maternal role readiness before being given Supportive educative interventions to primiparous mothers has an impact on readiness the anticipatory phase of primipara mothers, so that the provision of information to primigravida mothers in 1 day in 3 sessions, carried out for 30 minutes per session given as a peer group affects increasing the readiness of the anticipatory phase of primigravida mothers towards the achievement of maternal roles. In addition to this, the Supportive educative intervention provided by the researcher to the respondents had an impact on the majority of the high-readiness respondents

because the mother had obtained the readiness of the anticipatory phase in accepting new situations in undergoing her pregnancy. It means that almost all parameters can be achieved by the mother well.

However, there are still a small number of respondents who have moderate criteria; this happens because of the joy at the end of pregnancy, the mother accepts with a happy feeling of welcoming the birth, the mother is not fully ready for the transition, so that she still has moderate readiness, the condition is still quite good, there is an increase because initially a small proportion The mother has low readiness to change to moderate readiness after receiving educative support intervention, this condition is an illustration that the respondent has not achieved the parameters. Thus, it is true that mothers in the anticipatory phase of readiness need a Supportive educative intervention for primigravida mothers towards maternal readiness; according to T.Mercer's theory, the role achievement stage is anticipatory, which means that the mother learns everything needed before becoming a mother, which means mother Entering the anticipatory phase requires guidance, so that the readiness of the anticipatory phase of primigravida mothers can be achieved higher because of the Supportive educative that helps provide useful information to deal with problems and situations in undergoing the anticipatory phase during pregnancy before becoming a mother.

In addition to the above, there is a Supportive educative effect on the readiness of the anticipatory phase in primigravida mothers towards the achievement of maternal roles and an increase in the readiness of the mothers in the anticipatory phase because of the effect of the Supportive educative intervention given to the mother, which can be accepted

by the mother well ([Widayati, Nuari, et al., 2018](#)). it means that the mother understands her condition after receiving the intervention because the intervention is given in 3 sessions, each with a different discussion and a different leaflet, so that the mother can gradually understand the intervention given by the researcher.

Conclusion

Supportive education can increase the readiness of the anticipatory phase in primigravida mothers towards achieving maternal roles in the Pogalan Health Center Work Area, Trenggalek Regency, from mostly in the high category to the majority in the high category.

Authors Contributions

In this study, the first is a correspondence author responsible for the research process to publication by writing articles adjusted to journal guidelines. The second author assisted in the research process and data analysis. The other authors help research in the data collection process—all authors have discussions to make good manuscripts.

Conflicts of Interest

There is no conflict of interest in this study project. All components can work well according to their respective duties and as a team. The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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