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The effect of pregnancy on happiness

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Abstract

Purpose: This descriptive study aims to investigate whether pregnancy affects women's level of happiness during their pregnancy. **Methods:** The study population consisted of 247 pregnant women, who agreed to participate in the research voluntarily. Personal information form and the Oxford Happiness Questionnaire Short-Form (OHQ-SF) were used for data collection. Percentage and number distributions, averages, min-max, ANOVA, t-test, Kruskal-Wallis and Mann Whitney-U tests were used in the evaluation of the data.

Findings: It was found that, 76.9% of the pregnant women reported a planned pregnancy, 65.5% had an interval of 25 months and above between pregnancies, and 53.0% had issues in her pregnancy. In the comparison of obstetric characteristics of the pregnant women and the scores taken in the Oxford Happiness Questionnaire, getting pregnant for the first time at the age of 26-35, having no stillbirths, and having a planned pregnancy were found to increase the level of happiness, and the difference was found to be statistically significant.

Conclusion: According to the median value of the scores taken in the questionnaire, the levels of happiness of pregnant women included in the study were found to be higher during pregnancy.

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1. Introduction

Pregnancy is a physiological process characterized by extraordinary interactions and significantly increased sensitivity, in which the margin between health and disease becomes narrower. Completion of the process of pregnancy in a healthy way is a "Human Right" for every woman. Each pregnancy, however, bears potential risks. Therefore, protecting, maintaining and improving maternal and fetal health is a necessity (Köken & Yılmaz, 2007; Altıparmak, 2006; Balsak et al., 2007).

For most women, pregnancy is a stress factor (Yeşiltepe, 2004). Pregnancy is defined as a life crisis, in which a woman's biopsychosocial balance is disrupted, roles in family and workplace are changed, and a parental relationship is established between the baby and the mother (Pehlivan, 2004). Pregnancy is considered to be a developmental crisis or a critical phase by numerous researchers, and its place in a woman's life is no doubt very important. Studies state that pregnancy affects a woman irreversibly, and creates a permanent psychological shift (Pehlivan, 2004; Akdeniz & Gönül, 2004; Burt & Hendrick, 2005).

During pregnancy, reactions such as happiness, disgust, anger, anxiety, fear and depression are observed. The physiological and psychological responses that occur during any period of pregnancy may be different. Physical changes, such as coping with morning sickness, breast tenderness, physical changes, sexuality, diet and exercise, etc., become prominent in the first phase of pregnancy; the second trimester is usually a happy time for parents. A pregnant woman is focused on the condition of the baby, and she deals with the idea of having a baby. When the third trimester begins, she assumes guardianship of the baby gradually, and becomes sensitive due to fear of losing her baby. And, the fear of delivery begins as the final phase of pregnancy gets closer. She will have worrying about whether the baby will be normal, and whether there will be a healthy, problem-free birth. Even the thought of the suffering during childbirth can cause anxiety in pregnant women. They want to have a healthy baby immediately (Sadıkoğlu, 2006).

Depending on the differences that emerged during this trimester, pregnant women are affected in a positive or negative way (Chang, Chao & Kenney, 2006). However, pregnancy intent also plays a major role. A desired pregnancy leads to experience a sense of happiness and satisfaction, and the individual reacts positively to the changes in her body (Schmied & Lupton, 2001; Boscaglia, Skouteris & Wertheim, 2003).

Happiness of individuals affects their health behavior and progress of the process in a positive direction (Doğu & Berkiten 2008). Therefore, this study aims to determine the levels of happiness of pregnant women.

2. Research methodology

2.1. Type of Research

This is a descriptive study.

2.2. The Location and Time of the Study

The study was carried out between November and December 2015 in the maternity hospital clinics in the Province of Erzurum, Turkey. The maternity hospital of the study is affiliated with the Association of Public Hospitals. This hospital was selected because of its patient density and regional nature.

2.3. Population and Sample

The study population consisted of pregnant women, admitted to the specified maternity hospital in the Province of Erzurum at the above-mentioned dates. And, the sample consisted of all pregnant women, who were available and agreed to participate in the study.

2.4. Data Collection Tool

Personal information form and Oxford Happiness Questionnaire Short-Form (OHS-SF) were used for research data collection.

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