
Social Capital and Self Efficacy of Pregnant Women

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Received: 03/01/2018; published: 05/08/2019

Abstract

Background: Mental health disorders, namely anxiety and depressive symptoms, are common in pregnant women due to physical and hormonal changes. Social support, family environment conditions and the neighboring social environment are components of social capital that contribute to the health of pregnant women. The Indonesia Healthy Family-Program Approach (HIP-FA) supports efforts to empower families to provide social support to pregnant women, thereby increasing self-efficacy in pregnancy that will lead to giving birth to healthy babies. This paper aims to describe the social capital and efficacy of pregnant women. **Method:** This study was a qualitative study that described social capital, empowerment, and self-efficacy of pregnant women during pregnancy. The article search was through PubMed, ProQuest, and Google Scholar databases. The keywords used to search the articles included: pregnant women, self-efficacy, social capital, and empowerment. The author examined and synthesized various kinds of literature that were closely related to social capital in providing self-efficacy for pregnant women. **Results:** Social capital affects health and is the main determinant of health. The important social capital is social support for pregnant women by empowering families to give better attention during pregnancy. A healthy Indonesian program with a family approach (HIP-FA) is organized in order to increase the government's attention in overcoming health problems by involving family directly in planning activities, monitoring and evaluation processes, so that the families understand well the health problems of pregnant women in their families and can provide social support in dealing with mental health disorders of pregnant women and increasing self-confidence to be mothers and parent. **Conclusion:** Social support is a social capital that can improve family empowerment by paying more attention to the health of pregnant women. Social capital in the form of family cohesion and family environment can improve the self-efficacy of pregnant women and prevent pregnancy complications to prepare for the birth of a healthy baby.

Keywords: Social Capital, Family Empowerment, Self-Efficacy, Pregnant Women

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1. Introduction

Every woman wants to be able to undergo the reproductive process of pregnancy and childbirth naturally. Pregnancy and childbirth can be a fun and positive experience but can also be stressful and difficult.⁽¹⁾ Maternal health conditions during the reproductive period are reflected in the high complication of pregnancy that is the cause of maternal mortality. Complications include: bleeding 30.3%, hypertension 27.1%, infection 7.3%, prolonged labor and 0% abortion, and others 40.4%. This cause can be minimized if the quality of antenatal care is carried out properly.⁽²⁾ There are a number of conditions that cause unhealthy pregnant women, among others: giving birth under the age of 20 with 54.2 per 1000 women, giving birth at the age of 40 years old with 207 per 1000 live births. This problem is aggravated by

the fact that there is still a first marriage at a very young age (<20 years) with a total of 46.7% of all married women.⁽³⁾

Pregnancy is a period of increased vulnerability, because many experience physiological and psychological changes due to hormonal changes, so that pregnant women can experience physical and mental health problems. Mental disorders that commonly occur during pregnancy are anxiety and symptoms of depression. This disorder can continue and become severe after labour into postpartum depression or better known as postpartum blues. This shows the need for the provision of items to perform psychosocial assessment (both before and after) in accordance with the clinical best practices.⁽⁴⁾

A pregnant woman who is happy to accept her pregnancy will be able to undergo her pregnancy in a healthy and smooth manner. Women's health during pregnancy needs special attention because she experiences physical and psychological changes. During pregnancy, the woman will bear a heavy burden on her stomach. This causes discomfort in activities. Physical changes in pregnant women and hormonal changes cause feelings of discomfort, and sometimes also lead to unhappiness and can cause emotional disturbances (psychologically pregnant women). Pregnant women need more attention, especially from their husbands and close family. Good attention from close neighbors and surrounding friends can also support pregnant women. Helping to find psychosocial problems in pregnant women in early pregnancy can be very important in preventing later psychosocial problems and postpartum.⁽⁵⁾

One family function in a healthy Indonesian guideline family approach according to Friedman (1998), is to maintain the health condition of family members in order to continue to have high productivity, where one of them is a reciprocal relationship between family and health facilities.⁽³⁾ Thus, the family is a resource and social capital owned by pregnant women in maintaining physical and mental health during pregnancy. Pregnancy will make a woman happy because she can live a woman's natural nature. However, not all women can undergo it well. Good trust and self-efficacy in pregnancy will be able to help pregnant women maintain their health so that they can give birth to a healthy baby. The self-efficacy of pregnant women needs to get support from their environment, including from their husbands, families and neighbors. This study aimed to describe and discuss social capital and the self-efficacy of pregnant women.

2. Method

This literature review study used descriptive methods. In this review, the authors interpreted various literature optimally by summarizing, analyzing, evaluating and synthesizing research articles and other sources. The materials used in this study were in the form of literature on scientific journals, books, regulations and narratives issued by institutions whose credibility was recognized. The article search used PubMed, ProQuest, and google scholar databases. The article searches used the following keywords: women pregnancy, self-efficacy, social capital, social support, trust, social networking, and family empowerment. Selected articles were from 2007-2017.

3. Results and Discussion

3.1 Results

Family empowerment is one of the important things in maintaining and improving the health of pregnant women. As a result, it is expected that pregnant women have the confidence to undergo a healthy pregnancy and prepare for labour so that the pregnancy is without problem and healthy. Social conditions, social relations and neighbouring environments are components of social capital and are determinants of the importance of health.⁽⁶⁾

Social capital is defined as the resources possessed by individuals as a result of membership of a network or a group. The definition of social capital emphasizes mostly two images, namely resources, and social relations.⁽⁷⁾ Regarding health during pregnancy, the study results in Sri Lanka have described the framework for analyzing social capital in pregnancy. Social capital has been identified, consisting of 10 cognitive coachings and five structural coachings. The development of cognitive social capital, both positive and negative aspects of social capital in pregnancy consists of bonding, domestic cohesion, neighbourhood cohesion, environmental trust and distrust, reciprocity, social support, and a sense of belonging.

Bridging and linking, in the form of trust in institutions, namely health services and religious institutions. Bonding social capital is in the form of domestic cohesion from the husband, namely the emotional bond that family members have about social capital. This form of cohesion is a determinant of the importance of health to each other and the degree of individual autonomy and individual experience in the family system. This cohesion is a behaviour, such as: feeling happy when the husband is around her, being protected by the husband, being treated by the husband when sick, expressing love for husband, disagreeing and having a conflict with the husband. Bonding social capital is in the form of domestic cohesion from the family, including the following behaviours: trust from in-laws, family members providing time for discussion/chat together, family members working together, family members being concerned with the arrival of the newborn, feeling good at home when you are sick, being in harmony with the in-laws (family ties are not good) and the birth of a new baby being treated as a burden (family ties are not good).

Domestic cohesion of neighborhood, namely the trends of a group to unite, is when the members of the neighbourhood work towards a goal or to satisfy their emotional needs. The environmental cohesion, in the form of behavior, includes: the feeling of being noticed by the surrounding environment, spending time with the environment/relative/friends and tolerance to environmental diversity. Furthermore, another form of social capital is environmental trust, namely the belief in the honesty, integrity and reliability on neighbors. This form of trust is a favorable environment to adopt a child. Group dynamics establish trust process. Belief forms social support, so this allows the guarantee and the development of self-confidence of women.⁽⁸⁾ Environmental distrust is usually characterized by suspicions of neighbors, and it usually refrains people from visiting or talking to neighbors (disbelief). Reciprocity is the action that depends on the helpful reaction than others and it stops when the expected reaction will not come again.

This form of behavior helps neighbors one another.⁽⁹⁾ The form of social capital in the form of informal social controls is the reactions of individuals and groups that bring conformity to norms and laws. Related to pregnant women, the form of behavior is that people in the community prioritize pregnant women, for example by providing seating in transportation. This represents a bond and bridge communities. The next one is the forms of social capital in pregnancy. In the form of ownership, feeling accepted as a member of a group is needed.⁽¹⁰⁾ In addition, the form of solitude, the depressing feeling that occurs when social relations are considered less satisfactory than desirable, often happens. Feeling loneliness is associated with increased mortality risk.⁽¹¹⁾

This form of loneliness occurs when being alone at home and missing family/relatives. Most social capital is in the form of social support in pregnancy, the system of formal and informal relationships in which individuals receive emotional support, material or information to cope with emotional stress situation. Social support is usually in the form of being supported in terms of household work (instrumental support), having people who are close to share feelings (emotional support), having people who provide financial support when needed (instrumental support), no one caring when sick (poor instrumental support), no one willing to

accompany (less individual bond) and A lack of support for domestic work (bad instrumental support). Other social capital in pregnancy can be in the form of social responsibility/contribution, that is, the individual's obligation to act in the interest of the community, the individual's obligation to act. Social capital is usually in the form of: household responsibilities, the responsibility for religious activity in the neighborhood, the responsibility for the education of the youth and the responsibility of holding organization in the village.⁽⁹⁾ The form of social capital of trust in institutions for pregnant women is how people see how well these institutions operate or running in the forms of health systems, educational resources, organizational religious, small credit organizations and policies.

Structural social capital in pregnant women consists of bonding, bridging, and also linking. Bonding and bridging consist of informal social networks, social participation, participation/membership in organizations, and meanwhile, linking consists of access to health and access to other resources. The cohesion actions are actions that give these groups directly to their interests via an organization. Currently, the relationship between mental health and social networks are increasingly recognized by public health as a topic of interest. Social networks, the influence of specific social relationships, and how the type and quality of support can address women's mental health outcomes.⁽¹²⁾ Informal social networks are networks of relationships that people use to exchange resources and services.⁽⁹⁾ In Ibarra's opinion (1993), informal network is different from the formal network because it is not officially recognized by the organization and because of the content of its exchanges can be related to work, personal, or social matters.⁽⁹⁾ Meanwhile, social participation in the form of social engagement and interaction with others includes activities such as volunteering, donating, participating in sports and recreational activities. It will form a link between the citizens so that when there are pregnant women, they will give support and help to maintain the health of the pregnant women.

Social capital can affect health during pregnancy, especially through increased psychosocial resources conducted by social cohesion in small communities and by environmental public health services. Individual social capital is low during pregnancy, and is considered as social support and social networks, which are independently associated with low self-esteem health numbers, but social support neighborhoods had no impact on their own health during pregnancy and postpartum.⁽⁶⁾ This suggests that social support from neighbors can help pregnant women to trust and believe that abortion is healthy, so it helps grow self-efficacy in pregnant women.

Environmental social support in pregnant women can foster empowerment. Empowerment among women in the context of romantic relationships has an effect on access to the use of reproductive health services.⁽¹³⁾ A study in Ghana showed that women who had experienced physical and emotional abuse, had a higher probability in the use of inadequate care than pregnant women who did not experience physical abuse did.⁽¹³⁾ Thus, support from the immediate environment of a pregnant woman, that is a husband or partner, determines how pregnant women will behave in gaining access to pregnancy services.

Reproductive health and women's empowerment in the context of intimate partner relationships is predicted as a partnership, the intervention of the male partner is very important to improve reproductive health outcomes. Improving education to female teenager in the context of empowerment is a powerful approach to improving reproductive health and the impact of the low resistance of empowerment among women. Self-efficacy is defined as the public trust on a person's ability to produce designated levels of performance and influence on events that affect his/ her life. Self-efficacy determines how people feel, think, motivate themselves and behave. Such beliefs produce diverse effects through four major processes. These include cognitive, motivational, affective and selection processes. Self-efficacy and perceived social support of women can affect women's health.⁽¹⁴⁾

Social support and self-efficacy can influence behavior related to health and play an important role in the ability of mothers to adapt to pregnancy. The results of intervention studies in Iran showed that educational interventions based on support and self-efficacy effectively improved maternal prenatal care behavior.⁽¹⁵⁾ Self-efficacy is a principle that links knowledge, attitudes and beliefs on a person's ability to perform something. A person who has knowledge about the reasons for doing something is not enough, but someone must believe that he/ she is able to do it.⁽¹⁴⁾ Therefore, the design of health programs to improve perceived self-efficacy, social support and the behavior of maternal prenatal care have a great influence. The family healthcare system and society are responsible for providing facilities to increase social support and perceived self-efficacy in pregnant women and their contribution to improving maternal care before childbirth and complications of pregnancy.⁽¹⁵⁾ The role of the family is very important in creating and maintaining the health of family members, especially the health of pregnant women. Therefore, the relationship between family members determines the health of a pregnant woman, either physical or mental health. Strong social support applies to the etiology of mental disorders in perinatal women, especially the mental qualities and the family environment.⁽¹⁶⁾ Family structure is a potential change that is important but rarely happens. Poor quality relationships between key family members are strongly associated with third-trimester antenatal depression.⁽¹⁶⁾

A pregnant woman who has a very bad experience during their lifetime has a risk for major depression in pregnancy. Poor social support contributes to antenatal depression.⁽¹⁷⁾ Therefore, pregnant women need strong support from their families and communities. Support can assist them in generating and maintaining self-confidence to be able to live healthily and safely. However, the question is how a pregnant woman can get a good support from the environment, if they cannot submit a complaint, or express something to her husband, families and communities. In fact, some women cannot express their feelings of depression during pregnancy. This will have a bad effect that can damage the family and the baby. Women who feel isolated and vulnerable, need to get special care at home and need a nurse or midwife's resources who can maintain it continuously. This can be done by providing social support from midwives and the closest family or community. Couples also sometimes need support and adjustments. Low-tech interventions, namely peer support, can make models with social capital and real social empowerment. The model of peer social support during pregnancy creates a structure for a trusting relationship between the volunteer and vulnerable women.⁽¹⁸⁾

In addition to strong social support from the family and environment, a woman is also expected to have the ability to carry out her role during her reproductive period. Women's empowerment is an empowering process that is an effort to make a woman's power or ability do something or the ability to act.⁽¹⁹⁾ Women's empowerment provides opportunities for helpless women to increase their abilities and confidence in making decisions that affect their lives. Women's capacity to be aware of psychological changes during pregnancy, make decisions about pregnancy, care, and financial authority, affect women's mental health.⁽²⁰⁾

In the context of the reproductive period, a woman is able to plan her pregnancy, undergo a pregnancy, look for health services during pregnancy to find childbirth assistance and go through labour. A systematic review shows that most studies find that, for the most part, empowerment measures and interventions that support empowerment are associated with reduced symptoms of perinatal depression and decreased rates of premature birth and low birth weight (LBW). Most concepts related to empowerment may protect the symptoms of perinatal depression and premature birth or LBW.⁽²¹⁾

Women empowerment also has a major impact on the use of reproductive health services, as has been found in research in Ghana. It is shown that improving reproductive health will require reducing partner abuse and increasing women empowerment in low and middle-

income countries, especially among women who do not have formal education. Furthermore, because reproductive health and empowerment in the context of intimate partner relationships are both based on partnerships, the involvement of a husband or partner is very important to improve reproductive health outcomes. Empowerment is related to women education. Therefore, increasing education among girls is a strong approach to improving reproductive health and inhibiting the impact of low women empowerment.⁽¹³⁾

Efforts to empower women through education, counselling and work will ultimately help women achieve equal opportunities in getting jobs, so women can finance themselves without having to depend on their husbands. This is another important issue that must be considered. Empowering women in the community can be done through regular visits and counseling by nurses; using community leaders, and women's associations in collaborative activities; building empowerment programs that directly teach and train women in decision-making; increasing their confidence, and making positive self-concepts about themselves and involving them in the decision-making process.⁽²²⁾

Currently, the national health development program focuses more on the family approach. One important factor that influences a person's health condition, including pregnant women, is social support, especially family support. Therefore, in the healthy indonesia development family approach (HID-FA), it is stated that health development starts with the smallest unit of society, namely the family. The family approach is one of the ways for the public health center to increase the reach of the target and bring them closer to improve access to health services in their working areas by visiting families.⁽³⁾ The family tasks in health care contained in the HID-FA guidelines include: getting to know the health development disorders of each family member, making decisions for appropriate health measures, providing care to sick family members, maintaining the atmosphere of a home that is beneficial to health and the personality development of family members, maintaining reciprocal relationships between family and health facilities. Therefore, based on this family assignment, health efforts are needed, which must be done with community empowerment, which is a part of the function of community health efforts from the health centre. Because the family is the smallest institution of society, community empowerment must begin with family empowerment.⁽³⁾

3.2. Discussion

The health problems of pregnant women need to get great attention because pregnant women are a vulnerable group of people. A pregnancy process is a natural event in human reproduction. Pregnancy can provide a positive experience that pleases and delights every woman and family. However, there are some women who experience health problems during pregnancy. Physical disorders usually occur because of changes in body shape that have to bear a heavy burden on the stomach which causes discomfort. Mental disorders of pregnant women usually occur due to changes in hormonal function, followed by other risk factors, such as conditions of not being ready to accept the pregnancy. Pregnant women need social support in carrying out their pregnancy, to feel comfortable and to maintain the good health of themselves and their fetuses. Low social support is significantly correlated with antenatal depression.⁽²³⁾

The government is currently paying a great attention on maternal and child health (MCH). As an effort to reduce the maternal mortality rate (MMR), which is still quite high compared to other Asian countries, the Indonesian government has mobilized the HIP-FA. With this program, it is expected that attention to the health of pregnant women is increased so that it can reduce the risk of complications and also can reduce maternal mortality. The success of this program does not only depend on the role of the government as a health service provider but also requires the role and support of all parties, namely family, friends and the community. The role and social support of pregnant women are in the form of social capital

to maintain their health. Social capital means a statement of social relations and society, known as a major determinant of health. Social capital can affect health during pregnancy. Social capital and its pathway to the health of pregnant women in the form of informal social networks and social participation is an effort to reduce physical illness in pregnancy, while cognitive social capital is a meaningful effort to improve mental well-being.⁽⁹⁾

Social capital in pregnant women, also in the form of environmental cohesion, is the closest neighbor in the form of assets for mental well-being. Pregnant women who feel they get love and protection from their neighbors will have a good mental well-being. Social support to improve physical and mental well-being includes instrumental support in the form of financial availability to guarantee emergency care. In addition, the form of emotional support is when close neighbors often visit pregnant women at home. Furthermore, it connects to social capital that is experienced through health services to promote women's health during pregnancy. In the preventive care system, mothers receive care in the form of home visits and clinics. All mothers strongly believe in midwives at the health care center. Pregnant women strongly believe in all health workers who work in health centers and clinics, both nurses and midwives. The clinic also provides information support needed by pregnant women. The antenatal clinic also provides an opportunity to meet other pregnant women and increase the strength of social capital. It can be seen that social capital is an individual characteristic, which can contribute to health promotion by adding new knowledge about the best social network interventions, which might be designed to meet the needs of target groups, such as pregnant women in preventing complications of physical health and also preventing mental health disorders.⁽²⁴⁾

Strong social capital in the community for pregnant women is also an effort to increase empowerment. Social support from the family, friends, and neighbors can foster a woman's ability to act so that they are empowered in maintaining health in general, especially reproductive health during pregnancy and childbirth. A woman who is empowered and has the ability to act in terms of health will have self-efficacy that she is able to overcome health problems that may arise during pregnancy such as complications and anxiety problems or depression symptoms. With good self-efficacy, a pregnant woman can undergo a reproductive period well, have optimal health and mental well-being, so she can give birth to a healthy baby. Family support is important in improving the self-efficacy of the mother and positively influencing mental health for the first 6 weeks after giving birth.⁽²⁵⁾

4. Conclusion

Women's health during pregnancy needs to get attention and social support from the family and the surrounding environment because pregnant women are a group that is vulnerable to health problems. This is one of the important concerns in the healthy indonesia program with a family approach (HIP-FA). Social support is one of the social capitals that can affect health and contribute to the determinants of the physical and mental health of pregnant women. One of social capital in pregnant women is in the form of increasing family empowerment in maintaining the health of pregnant women. Family empowerment can be done in various ways that are in accordance with the conditions of families and communities in their respective regions. HIP-FA strongly supports efforts to empower families in overcoming family health problems, especially the health of pregnant women, and increasing self-efficacy, so that pregnant women can undergo a happy and healthy pregnancy period. The government should better mobilize the HIP-FA in overcoming the health problems of pregnant women so that pregnant women get better attention from their families and their environment. Optimizing family and community empowerment in controlling the problems of physical and mental health complications of pregnant women where the community is directly involved start from analyzing problems, understanding the condition of pregnant

women to monitoring the implementation of HIP-FA on the health of pregnant women. There is a need for mental health promotion to increase public awareness of the mental health of pregnant women.

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