**NAZIV DISERTACIJE: UTICAJ INOVATIVNOG INTERVENTNOG PROGRAMA NA ISKUSTVO I STRAH OD PORODA TRUDNICA**

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## SAŽETAK

**Uvod:** Strah od poroda je čest i klinički relevantan fenomen koji može negativno uticati na zdravlje trudnica, incidencu straha od poroda te tok i ishod poroda. Prevalenca varira od 3,7% do 43%, a razlike se povezuju s metodološkim pristupima i različitim mjernim instrumentima. Faktori rizika su multifaktorski i uključuju fiziološke, biopsihosocijalne, opstetričke i faktore životnog stila. Zbog povezanosti sa povećanom stopom medicinskih intervencija, rana identifikacija i ciljane intervencije imaju važnu ulogu u prenatalnoj zaštiti i prevenciji.

**Cilj:** Ispitati uticaj Inovativnog interventnog programa na nivo straha od poroda i iskustvo poroda, uz analizu životnih navika i stavova o dojenju.

**Ispitanici i metode:** U prospektivnu, longitudinalnu intervencijsku studiju uključene su 194 ispitanice (≥18 godina) podijeljene u eksperimentalnu (n=97) i kontrolnu grupu (n=97). Eksperimentalna grupa je pohađala jednomjesečni program (2× sedmično, 90 minuta), dok kontrolna nije. Korišteni su upitnici: Upitnik o zdravlju i ishrani trudnica, GAQ, CFQ, CEQ uz pribavljena etička i autorska odobrenja.

**Rezultati:** Dokazano je statistički značajno smanjenje intenziteta straha od poroda u eksperimentalnoj grupi nakon primjene Inovativnog interventnog programa u svim ispitivanim domenama CFQ upitnika. Prije intervencije 28,90% ispitanica je imalo veoma visok, a 9,30% ekstreman strah od ozljede bebe medicinskom intervencijom, dok je nakon intervencije 76,30% trudnica navelo da ne osjeća nikakav strah, a 22,70% samo blagi strah. Uočeno je značajno smanjenje prosječnih vrijednosti straha od nedobivanja lijekova protiv bolova (sa M=1,18±0,75 na M=0,20±0,35) te straha od srama (sa M=0,93±0,87 na M=0,18±0,31). U postpartalnom periodu eksperimentalna grupa je ostvarila statistički značajno bolje rezultate u svim domenama CEQ upitnika, uključujući vlastiti kapacitet, profesionalnu podršku, percipiranu sigurnost i učešće u donošenju odluka ($p<0,001$), uz viši ukupni skor iskustva poroda u odnosu na kontrolnu grupu.

**Zaključak:** Inovativni interventni program značajno smanjuje strah od poroda i unapređuje iskustvo poroda, što potvrđuje opravdanost integracije strukturiranih, multidisciplinarnih prenatalnih programa i potencijalnu primjenu u sistemu prenatalne zdravstvene zaštite.

**Ključne riječi:** strah od poroda; tjelesna aktivnost; prenatalni programi

**DISSERTATION TITTLE:**

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**SUMMARY**

**Introduction:** Fear of childbirth is a common and clinically significant phenomenon that may adversely affect maternal health, as well as the course and outcomes of labor. Reported prevalence ranges from 3.7% to 43%, with variability largely attributable to methodological differences and the use of diverse measurement instruments. Risk factors are multifactorial and include physiological, biopsychosocial, obstetric, and lifestyle-related determinants. Given its association with increased rates of medical interventions, early identification and targeted interventions play a critical role in prenatal care and prevention strategies.

**Objective:** To examine the impact of an Innovative Intervention Program on fear of childbirth and childbirth experience, with additional analysis of lifestyle habits and attitudes toward breastfeeding.

**Participants and Methods:** This prospective, longitudinal interventional study included 194 participants (≥18 years), divided into an experimental group (n=97) and a control group (n=97). The experimental group participated in a one-month program (twice weekly, 90 minutes per session), while the control group received no intervention. Data were collected using the Pregnant Woman's Health and Diet Questions, GAQ, CFQ, and CEQ, with appropriate ethical and copyright approvals obtained.

**Results:** A statistically significant reduction in the intensity of fear of childbirth was observed in the experimental group following implementation of the Innovative Intervention Program across all domains of the CFQ. Before the intervention, 28.90% of participants reported very high fear, and 9.30% reported extreme fear of neonatal injury due to medical intervention. After the intervention, 76.30% of pregnant women reported no fear, while 22.70% reported only mild fear. Significant reductions were also observed in mean scores for fear of not receiving analgesia (from M=1.18±0.75 to M=0.20±0.35) and fear of embarrassment (from M=0.93±0.87 to M=0.18±0.31). In the postpartum period, the experimental group achieved statistically significantly higher scores across all CEQ domains, including personal capacity, professional support, perceived safety, and participation in decision-making ($p<0.001$), as well as a higher overall childbirth experience score compared to the control group.

**Conclusion:** The Innovative Intervention Program significantly reduces fear of childbirth and enhances the childbirth experience, supporting the integration of structured, multidisciplinary prenatal programs and their potential implementation within the prenatal healthcare system.

**Keywords:** fear of childbirth; physical activity; prenatal programs