

Student's Assistance to Improve Pregnant Women Visit Coverage in Mataram

Irni Setyawati

Lecturer of STIKes Yarsi

Mataram, Indonesia

erny.gunawan07@gmail.com

Baiq Ricca Afrida

Lecturer of STIKes Yarsi

Mataram, Indonesia

Mustini

Students of Diploma midwifery program

STIKes Yarsi

Mataram, Indonesia

Abstract— Inadequacy antenatal care during pregnancy can caused complications to mother and her baby. Pregnant woman should do antenatal care at least four times (also known as K4) during pregnancy. Coverage of K4 in 2007 to 2015 in Indonesia, Nusa Tenggara Barat remain under target (less than 95%), including in Mataram .This study aimed to know the effect of student's assistance toward pregnant women visit coverage.

This study was quasi-experimental with longitudinal prospective approach on 56 pregnant women which divided into two groups each 28. The sampling was purposive sampling. Inclusion criteria was pregnant women who at first trimester pregnant in Mataram during December 2015 to December 2016.

There were significant differences between pregnant women visits with student's assistance and without it showed $p < 0.05$ (0,014), pregnant women with student's assistance have visit pregnant women opportunity completely 1.5 times greater than those without it. Student's assistance process can provide information on the standard of antenatal visits to raise awareness, willingness and motivation of pregnant women in antenatal visits to a health standard. A behavior requires sufficient motivation because motivation can cause of someone doing activities more obviously.

Keywords— assistance, visitation, pregnant women

I. INTRODUCTION

Demographic and Health Indonesia Survey in 2012 found the percentage of complications during pregnancy is 24% nationally, while the percentage of complications during pregnancy in West Nusa Tenggara province (NTB) is still above the national rate around 33%. Complications during pregnancy include heartburn before 9 months, excessive bleeding, fever, preeclampsia, breech position and seizures [1].

There are various factors that can cause complications during pregnancy; one of them is inadequacy in frequency of antenatal care. The frequency of antenatal care at least four times during pregnancy, with the provision of a service delivery at least one time in the first quarter, one in the second quarter, and twice in the third quarter[2][3].

Coverage of K4 2007 until 2015 in Nusa Tenggara Barat was remain under the target of 95%. K1 coverage in all districts/cities have reached the target while the K4 coverage in West Nusa Tenggara province that has reach the target only in 3 districts were East Lombok (98.55%), Dompu (95.35%) and Sumbawa (95.33%), others districts still have not reached the target of 95%, including in Mataram[4].

To solve the problems above, government of Nusa Tenggara Barat Province began to cooperating with medical institutions through student's assistance toward pregnant women who are known as student action program for thousand days of life which was started in 2015. With the assistance of these students are expected the pregnant women motivated to visit antenatal care regularly so complications in pregnancy were not occur.

The purpose of this research was to know the effect of student's assistance toward pregnant women visit coverage.

II. METHOD

This study was quasi-experimental with prospective longitudinal approach control group design, in which to learn relationship between factors by comparing the treatment and control groups. The population in this research was all pregnant women in Jempong village, Mataram. The number of samples in this research was 28 people as case group and 28 people as control group using a ratio of 1: 1. Technique of sampling in this research is purposive sampling with inclusion criteria pregnant women that in first trimester.

Independent variables in this study was student's assistance which measured using a logbook adopted from Health Office of West Nusa Tenggara province (2015), while the dependent variable was pregnant women visit coverage measured using a pregnant mother card (KIA) book..

TABLE I. DISTRIBUTION OF PREGNANT WOMEN VISITS FREQUENCY BASED ON AGE, EDUCATION AND OCCUPATION

Characteristics of respondents	Pregnant Women Visits		
	Complete N (%)	Incomplete N (%)	Total N (%)
Age			
20-35 years	40 (95.2)	8 (57.1)	48 (85.7)
< 20 years	2 (4.8)	6 (42.9)	8 (14.3)
Education			
Uneducated	1 (2.4)	1 (7.1)	2 (3.6)
Elementary School	5 (11.9)	4 (28.6)	9 (16.1)
Junior High School	17 (40.5)	8 (57.1)	25 (44.6)
Secondary School	17 (40.5)	0 (0.0)	17 (30.4)
Senior High School	2 (4.8)	1 (7.1)	3 (5.4)
Occupation			
Work	12 (28.6)	1 (7.1)	13 (23.2)
Housewife	30 (71.4)	13 (92.9)	43 (76.8)

Source : Primary Data 2016

TABLE II. THE EFFECT OF STUDENT'S ASSISTANCE TOWARD PREGNANT WOMEN VISITS

Student Assistance	Pregnant Women Visits		p	RR (IK 95%)
	Complete N (%)	Incomplete N (%)		
Assistance	25 (89.3)	3 (10.7)	0.014	1.471 (1.063-2.034)
Without Assistance	17 (60.7)	11 (39.3)		0.273 (0.085-0.874)

Description: the P value with a statistical test Chi Square test, value of significance p <0.05

This research located in Jempong Village Mataram, the research conducted in December 2015 to December 2016.

III. RESULT

Most of respondents had age of 20-35 years old (95.2% and 57.1%). Pregnant women who did a complete visitation to antenatal care had educational background of Junior high school and Secondary high school (40.5%), while the majority of respondents who did incomplete visitation of antenatal care had junior high school educational background. Most of respondents work as housewives.

There was significant differences between pregnant women visit coverage with or without student's assistance indicated with p <0.05 (0.014). Pregnant women with student's assistance had opportunity to do antenatal care visit completely greater 1.5 times than the pregnant women without student's assistance. Pregnant women with student's assistance had opportunity to not conduct antenatal care visit smaller 0.273 times compared with pregnant women who do not assisted by students.

IV. DISCUSSION

Result of this study showed that most respondents who got assistance from students conducting antenatal care visits completely (89.3%) and only 60.7% of respondents who did

not get student's assistance did antenatal care visits completely.

Antenatal care visits in this study considered complete when attained the standards that requires of frequency of antenatal care at least 4 times in one time in first trimester, at least 1 time in second trimester, and at least 2 times in third trimester[2]. Antenatal care completeness was influenced by several characteristics of respondents, such as age, educational background and occupation.

In this study, the majority of respondents who acquired and obtained student's assistance aged 20-35 years old. Age is human nature to have a major impact in ensuring causality of a disease. Pregnancy would have a higher risk if mothers aged <19 years or > 35 years [5]. Age of pregnant women affect the behavior of pregnant women in antenatal care visit. This was supported by ref [6] that stated there was significant relationship between age and pregnant women with antenatal care visits, it indicated with p value 0.037.

This study showed that the majority of respondents who did antenatal care visit had junior and secondary high school education, while respondents who did antenatal care visit incompletely had junior high school background. Educational background can influence pregnant women behavior. Mothers with higher education will be able to make choices to determine the priority on preventive measures towards better health status. These results are supported by research conducted by [6] which stated that there was a significant correlation between education background of pregnant women with antenatal care visits.

Indonesian constitution No. 20 of 2003 on the national education system defines that education is a conscious and deliberate effort so that learners can develop their potentials actively to have the spiritual power of religion, self-control, personality, intelligence, character, and skills they needed, society, nation and state[7]. According to the definition, education aims to improve the knowledge and ability of the mother to prepare for pregnancy. Higher education will facilitate a mother to receive information and knowledge on how to maintain health and prevent things that disrupt their health.

This study result showed that the majority of respondents who did antenatal care visit completely or incompletely work as a housewife. Occupation can affect the health status of the population. Occupation characteristics might reflect income, social status, education, economic status and health problems in a population group. The type of occupation of person associated with the level of education they had. Women who had better educated tend to had jobs with higher income than those with lower education background[8][9].

There was significant differences between antenatal care visit group with and without student's assistance; it indicated with p <0.05, pregnant women with student's assistance had the opportunity to visit pregnant women completely greater 1.5 times, and pregnant women with student's assistance had the opportunity to do not conduct visit smaller 0.273 times compared with pregnant women who do not assisted by students.

Antenatal care visits to the health care service is a behavior of the mother on the health during her pregnancy. Behavior is the second largest factor after the environmental factors that affect the health of individuals[10]. According to Green (1980) in ref [10], behavior influenced by three main factors predisposing factors consisting of knowledge, attitudes, traditions, beliefs, education, socio-economic, factors enabling/supporting consisting of the availability of infrastructure or health facility and reinforcing factors that consists of the attitudes and behavior of community leaders, religious leaders, and health workers.

Students who assisted was able to provide information on the standard of antenatal visits to raise awareness, willingness and motivation of pregnant women in antenatal care visits to a standard health care[10]. Ref [11] stated that a behavior required sufficient motivation in someone to perform an action to succeed; without the motivation, people could not able to do anything because the motivation can causing a person intent on doing activities, motivation raised by their knowledge, confidence (trust), which means there and felt needs.

Mentoring process undertaken by students is one form of support that can enhance motivation pregnant women. Support from husband or family had been able to increase the motivation of pregnant women to did antenatal care. Based on study in [11] showed that there was a relationship between family support/husband with mother's motivation to did antenatal care visits. Unzila research results (2007) in ref [11] also found that pregnant women who receive support from family has high motivation to do antenatal care. Ref [11] showed that the emotional support of a partner is an important factor in achieving successful pregnancy progresses. Ref [12] also obtained that pregnant women who received support from health workers 3.96 times greater chance to visit antenatal care complete compared with pregnant women who do not get the support of health workers.

V. CONCLUSIONS

There was significant differences in antenatal care visits between pregnant women with student's assistance and without student's assistance, group of pregnant women with student's assistance had the opportunity to do antenatal care

visit completely greater 1.5 times than pregnant women who did not get student's assistance.

The expected of materials, methods, and evaluation of student's assistance to pregnant women started from trimester one to trimester three can be improved and monitored on ongoing basis. The decision makers in the Department of Health expected to increase student's assistance program for pregnant women including a monitoring and evaluating system of implementation student's assistance.

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