



Relationship of Mother Characteristics, Knowledge, Husband Support with Participation in Pregnant Women Classes

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Abstract

Pregnant Mother Class is a means to learn together about health for pregnant women, in the form of face-to-face groups which aims to increase the knowledge and skills of mothers regarding pregnancy, pregnancy care, childbirth, postnatal care, care for newborns, myths, infectious diseases, and birth certificates. This study aims to determine the participation of pregnant women in the class of pregnant women and the factors that influence it. This was a cross-sectional study conducted in the Catchment Area of Primary Health Center (PHC) Denpasar. A sample of 50 trimester III pregnant women, either primiparous or multiparous, who came and participated in the class of pregnant women mothers was obtained through multistage sampling. Data were gained via interviews using a structured questionnaire. Determinants were analyzed using chi-square. The results of the research found that most of them (68%) actively participated in the class of pregnant women. The results of bivariate analysis showed that there is a significant relationship between parity ($p=0.03$), knowledge ($p=0.00$), husband's support ($p=0.01$), with the participation of mothers in pregnant women classes.

Keywords: characteristics, knowledge, support, class of pregnant women

Kelas Ibu Hamil merupakan sarana untuk belajar bersama tentang kesehatan bagi ibu hamil, dalam bentuk tatap muka dalam kelompok yang bertujuan untuk meningkatkan pengetahuan dan keterampilan ibu-ibu mengenai kehamilan, perawatan kehamilan, persalinan, perawatan nifas, perawatan bayi baru lahir, mitos, penyakit menular dan akta kelahiran. Tujuan penelitian ini adalah mengetahui keikutsertaan ibu hamil mengikuti kelas ibu hamil dan faktor yang mempengaruhinya. Desain penelitian ini adalah cross-sectional analitik. Subjek penelitian menggunakan 50 ibu hamil trimester III baik primipara atau multipara yang datang dan ikut serta kelas ibu hamil di wilayah Puskesmas Kota Denpasar dengan analisis yang digunakan adalah chi-square. Hasil penelitian didapatkan sebagian besar (68,0%) responden aktif mengikuti kelas ibu hamil. Hasil bivariat menunjukkan terdapat hubungan yang signifikan antara paritas ($p= 0,03$), pengetahuan ($p= 0,00$), dukungan suami ($p= 0,01$) dengan keikutsertaan ibu mengikuti kelas ibu hamil.

Kata Kunci: karakteristik, pengetahuan, dukungan, kelas ibu hamil

Introduction

The Maternal Mortality Rate (MMR) is an important indicator of public health status. In 2015, based on data from the 2015 Inter-Census

Population Survey (SUPAS) 2015, both MMR and IMR showed a decline where MMR became 305/100,000 KH and IMR 22.23/1000 KH. In Bali Province, the number of maternal deaths in 2017

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reached 45, reaching the set target of 95/100,000 KH.

Causes of maternal death include bleeding 12.24% in 2013, 25% in 2014, 20% in 2015, 18% in 2016 and 23.91% in 2017. Most causes of maternal death in Bali Province are due to non-obstetric causes, namely causes other than pregnancy and childbirth, including in 2013 it was 59.18%, in 2014 it was 47.92%, in 2015 it was 50.91%, in 2016 it was 60% and in 2017 it was 58% (Bali, 2017).

The regional government's commitment through related regional apparatuses has also made efforts such as the existence of the Movement to Love Mothers at the sub-district level. In order to be able to reduce the IMR significantly after reaching a very low number is indeed very difficult, because infant mortality is influenced by various factors, especially maternal factors before pregnancy as well as during pregnancy and childbirth. The efforts in the health sector that have been made to reduce infant mortality and under-five mortality rates include integrated Ante Natal Care, Organizing Mother Classes, Providing Supplemental Food (PMT) for pregnant women with Caloric Energy Deficiency (KEK), Provision of iron tablets (FE) for young women, Maternity Guarantee Program in

Districts/Cities, Mother and Child Referral System, Family Planning Services.

One of the improvements in midwifery services to reduce maternal, infant, and toddler mortality is the class of pregnant women. The class program for pregnant women is a means to learn together about health for pregnant women, in the form of face-to-face meetings in groups with the aim of increasing the knowledge and skills of mothers regarding pregnancy, pregnancy care, childbirth, postpartum care, newborn care, myths, infectious diseases, and birth certificates (RI, 2011).

Factors that influence health behavior (participation of pregnant women to attend classes of pregnant women) include factors of maternal characteristics, namely age, education, employment, parity, predisposing factors including knowledge, attitudes, interests, social culture (customs), supporting factors including facilities health services, driving factors include family support, motivation, health workers and socio-economic (Notoatmodjo, 2018). Implementing classes for pregnant women at Health Centers throughout Denpasar City was carried out to reduce the maternal and infant mortality rates that occurred at that time.

Method

The design of this research is analytic with a cross-sectional approach. This research was conducted in Community Health Centers throughout Denpasar City. The sample in this study were pregnant women in their third trimester, both primiparas and multiparas, who came and took part in the class of pregnant women, totaling 50 people using a non-probability sampling technique. multistage sampling. Data were collected by interview

method using a standardized questionnaire for the knowledge variable and for the support variable questionnaire made by the researcher. Data were analyzed descriptively and bivariate with the Chi-Square test.

Result and Discussion

The results of a descriptive analysis of the characteristics of respondents at the Denpasar City Health Center can be seen in the following table:

Table 1. Frequency distribution of Respondent Characteristics at Denpasar City Health Center

Characteristics	n	%
Education		
Low Education (Elementary/Junior High School)	0	0
Higher Education (SMA-PT)	50	100.0
Age		
<35 years	47	94.0
≥35 years old	3	6.0
Parity		
1 person	19	38.0
>1 person	31	62.0
Work		
Doesn't work	15	30.0
Work	35	70.0

Based on Table 1, it can be seen that all of them, namely 50 respondents (100%) have higher education, almost all of them, namely 47 respondents (94.0%) aged <35 years, the majority, namely 31 respondents (62.0%) have parity > 1 person, the majority of which is 35 respondents (70.0%) work.

Table 2. Frequency Distribution of Pregnant Women's Class Participation to Respondents at the Denpasar City Health Center

Pregnant Women Class Participation	N	%
Active	34	68.0
Not active	16	32.0

Based on table 2 shows that out of 50 respondents the majority, namely 34 respondents (68.0%), actively attended classes for pregnant women

Table 3. Bivariate Analysis of Pregnant Women's Participation in Pregnant Women's Classes at the Denpasar City Health Center

Variable	Pregnant Women Class Participation		95% CI	p value
	Active n(%)	Not active n(%)		
Age				
<35 years	32 (64.0)	15 (30.0)	0.07-11.1	0.69
≥35 years old	2 (4.0)	1 (2.0)		
Education				
Low	0 (0)	0 (0)	-	-
Tall	34 (68.0)	16 (32.0)		
Parity				
1 child	8 (16.0)	11 (22.0)	1.9-26.7	0.03
>1 child	26 (52.0)	5 (10.0)		
Work				
Doesn't work	9(18.0)	6(12.0)	0.4-5.9	0.31
Work	25(50,0)	10(20,0)		
Knowledge				
Not enough	3 (6,0)	12 (24.0)	6.0-159.5	0.00
Good	31 (62.0)	4 (8.0)		
Husband Support				
Not enough	2 (4.0)	8 (16.0)	2.8-90.4	0.01
Good	32 (64.0)	8 (16.0)		

Based on the table 3, it can be informed that the variables parity, knowledge, and husband's support are related to the participation of mothers in pregnant women classes. In the parity variable, most of the 26 respondents (52.0%) who had parity > 1

person attended the class of pregnant women, with a p value of 0.03 and 95% CI: 1.9-26.7, which means there is a relationship between parity with the participation of mothers in pregnant women classes. In the knowledge variable, most of the 31

respondents (62.0%) who had good knowledge attended classes for pregnant women with a p-value of 0.00 and 95% CI: 6.0-159.5, which means there is a relationship between knowledge and the participation of mothers attend classes for pregnant women. Regarding husband support, the majority of 32 respondents (64.0%) who received husband support attended classes for pregnant women, with a p-value of 0.01 and 95% CI:

1. Mother's Participation in Pregnant Women Classes

Based on the results of the study showed that the majority (68%) of mothers actively attended classes for pregnant women. The Pregnant Women Class is a study group for pregnant women with gestational ages between 20 weeks and 32 weeks with a maximum number of participants of 10 people. In this class, pregnant women will learn together, discuss, and exchange experiences about maternal and child health (MCH) in a comprehensive and systematic manner and can be carried out on a scheduled and continuous basis. Pregnant women's classes are facilitated by midwives/health workers using the Pregnant Women's Class package, namely the MCH

Handbook, Flip chart (turn sheet) Guidelines for Pregnant Women's Classes, Handbook for Pregnant Women Class Facilitators and Pregnant Women's exercise book.

This research is in line with the results of Yuniastari, (2014), which shows that the majority (62.1%) attend classes for pregnant women. This is also in line with Desmariyenti & Hartati, (2019) research on Factors Associated with the Participation of Pregnant Women in Pregnant Women Classes (2019) which shows that the majority (70.7%) attend classes for pregnant women.

2. The relationship between research variables and class participation of pregnant women

Based on table 3, was obtained variable data that was significantly related to class participation for pregnant women, namely parity where the value of $p = 0.03$ (95% CI: 1.9-26.7). The results of this study are in line with research by Atiul Imartiana (2017), there is a significant relationship between parity and the participation of pregnant women in pregnancy exercise. This research is also in line with Impartina's (2017) title relationship between parity and participation in pregnancy exercise, the result is a p-value of 0.000, meaning that

there is a relationship between maternal parity and participation in pregnancy exercise. It can be concluded that pregnant women who have parity or a large number of children will affect the participation of pregnant women in attending pregnant women's classes or pregnancy exercises.

Knowledge is related to class participation of pregnant women with $p = 0.00$ (95% CI: 6.0-159.5). This research is in line with (Desmariyenti & Hartati, 2019) and Hidayah (2018) showing that there is a relationship between mothers' knowledge and class utilization of pregnant women (p -value = 0.00). This proves that the higher the level of knowledge of the mother, the better the understanding of the class of pregnant women. The researcher assumes that the participation of pregnant women in pregnant women's classes increases knowledge, so many pregnant women attend pregnant women's classes.

Husband's support is related to class participation of pregnant women, $p = 0.01$ (95% CI: 2.8-90.4). The results of this study are in line with Septiani's research (2013) which has a significant relationship with pregnant women's participation in pregnant women's classes ($p < 0.05$). This is also in line

with the research of Risneni, (2007) which obtained a p -value of 0.006 so that it is said that there is a significant relationship between husband's support and participation in pregnant women's classes. This research is also in line with research conducted by Nugraheny, (2016) the relationship between husband's support and pregnant women's participation in attending pregnant women's classes in 2015, showing data that there is a significant relationship between husband's support and mother's participation in attending pregnant women's classes.

Conclusion

The results of this study indicate that the factors that influence the participation of mothers in classes for pregnant women are parity, knowledge, and husband support.

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