

## RELATIONSHIP OF BEHAVIOR WITH MOTHER'S VISIT TO INTEGRATED HEALTH CENTER

EMA JULIA<sup>1</sup>, ENDA SILVIA PUTRI<sup>2</sup>

<sup>1,2</sup> Public Health Science Study Program, Faculty of Public Health Universitas Teuku Umar

Email: [emajulia74@gmail.com](mailto:emajulia74@gmail.com)

### ABSTRACT

*Integrated Health Center is one of the efforts to improve health status in Indonesia with the main objective of reducing the Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). Visits of toddlers in Arongan Village are getting lower, this is probably caused by several factors including knowledge, age, education, occupation, attitudes and actions. The purpose of this study was to determine the relationship between behavior and the mother's visit to the Integrated Health Center in Arongan Village. This research uses analytic research with cross sectional research design. The population in this study were all mothers under five, amounting to 72 people. The research sample used a total sampling technique as many as 72 mothers of children under five. Data were analyzed using univariate and bivariate analysis and tested with the chi-square test. The analysis used in this research is univariate analysis and bivariate analysis. The results of this study are that there is a significant relationship between mother's knowledge and visits to Integrated Health Center (Pvalue = 0.022), there is a significant relationship between attitudes and mother's visits to Integrated Health Center (Pvalue = 0.017) and there is a significant relationship between actions and mother's visits to Integrated Health Center (Pvalue = 0.028). The conclusion is that there is a relationship between mother's knowledge, mother's attitude and mother's actions with visits to Integrated Health Center. Suggestions that can be put forward in this study are to improve the Integrated Health Center policy to attract mothers to attend activities held by the Integrated Health Center.*

**Keywords:** Knowledge, Attitude, Action, Integrated Health Center Visit.

### INTRODUCTION

Integrated Health Center is one form of community-based health efforts (UKBM) which is managed and organized from, by, for and with the community in order to empower the community and provide convenience to the community in obtaining basic health services to accelerate the reduction of maternal and infant mortality (Kemenkes RI, 2012). Integrated Health Center is an activity organized for the benefit of the community so that its establishment, implementation and utilization requires an active role from the community. The community can take various active roles in the form of monthly weighing of children under five so that it can improve the nutritional status of children under five. This activity requires active participation from the local community to become Integrated Health Center cadres and also the participation of mothers who have toddlers to bring their toddlers to the Integrated Health Center that they can monitor the growth and development of toddlers by looking at their weight development every month (Kemenkes RI, 2012).

The most dominant form of community participation in the health sector today is Integrated Health Center, which has been able to reduce maternal mortality (AKI) and infant mortality (IMR), and can increase the average life expectancy. In addition, Integrated Health Center has also improved maternal health services. Recent developments show that the current number of Integrated Health Center is adequate, but in terms of quality it still needs to be improved, for example the completeness of facilities and skills of cadres, which are still low which in turn will affect the decline in the nutritional status of the community, especially vulnerable groups, Integrated Health Center was

formed by the village / ward community with the aim of bringing basic health services, especially Maternal and Child Health (KIA), Family Planning (KB), Immunization, Nutrition and Diarrhea Management closer to the local community. namely infants, children, toddlers, pregnant and lactating women (Kemenkes RI, 2012). Of the five activities, not all activities can be carried out by the community themselves, especially antenatal services, contraceptive services (except pills and condoms) and immunization. In Integrated Health Center activities that are carried out once a month, there must be at least two Public Health Center health workers to provide technical services and guidance or coaching to Integrated Health Center cadres (Kemenkes RI, 2012). Integrated Health Center is an important health service for the earliest infants and toddlers. However, in reality at Integrated Health Center, many community members do not use the Integrated Health Center to monitor the growth and development of toddlers on the grounds that they are busy at work or do not have time to bring their toddlers to the Integrated Health Center and lack of knowledge about the importance of monitoring growth and development of children under five (Maryanti, 2011).

One indicator of the success of the Integrated Health Center program is the improvement in the nutritional status of children so that the number of children whose weight does not increase will decrease. Indonesia Health Profile data in 2017 shows that the nutritional status of children under five in North Sumatra Province in 2016 reached 10.1% with poor nutrition 3.1%. In terms of quantity, the development of the number of Integrated Health Center in Indonesia is very encouraging, there were as many as 280,225 Integrated Health Center in 2013 of that number, Integrated Health Center Pratama as many as 32.7%, middle as much as 29.1%, full moon as much as 29.9% and independent as much as 8.3%. There are 266,872 Integrated Health Center with a ratio of Integrated Health Center to village/ward of 3.55 Integrated Health Center per village/ward. However, when viewed from the quality aspect, there are still many problems, including the lack of utilization of Integrated Health Center by mothers of children under five (Kemenkes RI, 2014).

Based on the 2013 Basic Health Research data, the coverage of visits by children under five in Indonesia (6-59 months) at Integrated Health Center in 2013 was 34.3%. Health Research Data for the Province of North Sumatra, the number of visits by mothers who bring children under five to the Integrated Health Center is 12.5%. Meanwhile, for the Regency/City level, the coverage of under-five weighing in Nagan Raya in 2013 was still quite low, namely 50.20%.

According to the 2015 Nagan Raya District Health Profile, in 2014 the number of Integrated Health Center was 144. The level of visits by mothers of children under five to the Integrated Health Center was still low, this can be seen from the number of visits by mothers of children under five in Arongan Village by 18% of the 72 existing children under five and the standards that must be achieved by 75% of toddler visits.

Then, it is also known from the observation data that the data on maternal visits to Integrated Health Center from July to October has increased and decreased. It can be seen that, in July there were 29 mothers who visited the Integrated Health Center, in August, as many as 35 people, in September 39 people and in October 32 people. The decrease and increase in visits to Integrated Health Center was caused by several factors. one of them is the mother factor who does not remember the schedule of Integrated Health Center activities.

## RESEARCH METHODS

The type of research used is analytic research with a cross sectional research design. This type of research was used to determine the relationship between behavior and mother's visit to the Integrated Health Center in Arongan Village. The population in this study were all mothers under five, amounting to 72 people. The sample in this study is the entire population. The independent

variables in this study were knowledge, attitudes and actions, while the dependent variable was the mother's visit to the Integrated Health Center. The analysis used in this study is univariate analysis and bivariate analysis to see the relationship between the independent variable and the dependent variable.

Table 1.1 Distribution of Respondents by Age

Age	Frecuency	Percentage
18 -30	26	36.1
31 – 43	45	62.5
44 – 45	1	1.4

Based on table 1.1, it can be seen that respondents aged 18-30 years are 26 (36.1%), respondents aged 31-43 years are 45 (62.5%) and respondents aged 44-45 are 1 (1.4%).

Table 2.1 Distribution of Respondents Frequency Based on Education

Education	Frecuency (n)	Percentage (%)
Elementary School	11	15.3
JuniorHigh School	18	25.0
High School	23	31.9
D3	7	9.7
Bachelor (S1)	13	18.1
Total	72	100.0

Based on Table 2.1, it is known that there are 11 respondents (15.3%) with elementary school education, 18 (25.0%) junior high school education, 23 high school education (31.9%), 7 D3 education (9.7%) and 13 Bachelor education ( 18.1%).

Table 3.1 Distribution of Respondents Frequency by Occupation

Occupation	Frecuency(n)	Percentage (%)
Housewives (IRT)	51	70.8
Private employees	6	8.3
Entrepreneurs / traders	15	20.8
Total	72	100.0

Based on table 3.1, it is known that of the 72 respondents, who do not have a job or only have the status of Housewives (IRT) are 51 (70.8%), those who work as private employees are 6 (8.3%) and those who work as entrepreneurs or traders is as much as 15 (20,8%).

**Table 4.1 Relationship of Respondents' Knowledge with Integrated Health Center Visits in Arongan Village**

Integrated Health Center Visits
---------------------------------

Knowledge	Yes		No		P <sub>value</sub> 0,022	Rasio Prevalance CI 95%
	F	%	F	%		
Good	9	26,4%	2	16,7%		3.200
Enough	4	19,4%	7	37,5%		(8.437 – 1.214)

Based on table 4.1, it can be seen that 19 (2.4%) respondents who have a good level of knowledge visited the Integrated Health Center .While those who did not visit Integrated Health Center were as many as 12 (16, 75%). Respondents who have sufficient level of knowledge are 14 (19.4%) who visit Integrated Health Center while those who do not visit Integrated Health Center are 27 (37.5%).

It can be concluded that the level of knowledge of respondents has an effect on visits to Integrated Health Center. Based on statistical analysis using chi square between knowledge and Integrated Health Center visits, the P-value is 0.022 and this is smaller than the value =0.05 (P-value = 0.022 < =0.05) so that there is a significant relationship between knowledge and mother's visits to Integrated Health Center. *Arongan Village*.

**Table 5.1 Relationship of Respondents' Attitudes with Integrated Health Center Visits in *Arongan Village***

Attitudes	Integrated Health Center Visits				P <sub>value</sub> 0,017	Rasio Prevalance CI 95%
	Yes		No			
	F	%	F	%		
Good	2	30,6%	5	20,8%		3.500
Enough	1	15,3%	4	33,3%		(11.050 – 1.109)

Based on table 5.1, it is known that from 72 respondents who have a good attitude, 22 people visit the Integrated Health Center (30.6%). Meanwhile, 11 respondents (15.3%) have a good attitude.

Based on statistical analysis using chi square between attitudes and Integrated Health Center visits, the P value is 0.017 and this is smaller than the value = 0.05 (P-value = 0.017 < = 0.05) so that it is described that there is a significant relationship between attitudes and mother visits to Integrated Health Center *Arongan Village*.

**Table 6.1 Relationship of Respondents' Actions with Integrated Health Center Visits in *Arongan Village***

Action	Integrated Health Center Visits				P <sub>value</sub> 0,028	Rasio Prevalance CI 95%
	Yes		No			
	F	%	F	%		
Good	8	38,9%	4	33,3%		3.500
Enough	5	6,9%	5	20,8%		(11.050 – 1.109)

Based on table 7.1, it is known that of the 72 respondents who have good actions visiting the Integrated Health Center a number of 28 people (38.9%) While the respondents who have sufficient level of action to visit the Integrated Health Center are as many as 5 people (6.9%) .

Based on statistical analysis using chi square between the action and the Integrated Health Center visit, it was obtained that the P-value was 0.028 and this is smaller than the value of  $=0.05$  ( $P\text{-value} = 0.028 < =0.05$ ) so that there is a significant relationship between the action and the mother's visit to the Integrated Health Center Arongan Village.

## RESULTS AND DISCUSSION

### The Relationship of Respondents' Knowledge with Integrated Health Center Visits

The results showed that the respondents who had a good level of knowledge were 19 (2.4%) who visited the Integrated Health Center. While those who did not visit Integrated Health Center were as many as 12 (16, 75%). Respondents who have sufficient level of knowledge are 14 (19.4%) who visit Integrated Health Center while those who do not visit Integrated Health Center are 27 (37.5%). It can be concluded that the level of knowledge of respondents has an effect on visits to Integrated Health Center.

Based on statistical analysis using chi square between knowledge and Integrated Health Center visits, the P-value is 0.022 and this is smaller than the value  $=0.05$  ( $P\text{-value} = 0.022 < =0.05$ ) so that there is a significant relationship between knowledge and mother's visits to Integrated Health Center Arongan Village.

The knowledge that a person has is the basis for action, therefore a person's ability to do something depends on the knowledge he has. The basic knowledge of Integrated Health Center, the goals and benefits obtained at the Integrated Health Center allows the mother to be present at every Integrated Health Center implementation.

Most respondents with good knowledge can be influenced by experience and mass media or information factors, where on average mothers already have internet access. The results of this study are supported by the results of Fitriani's research (2010) which explains that knowledge is closely related to education, where with higher education, the person will broaden his knowledge.

In addition, mother's knowledge about Posyandu is influenced by education, economic status, experience, socio-cultural and informational factors. The level of education affects the mother's knowledge about posyandu where higher education will affect the knowledge of someone who is highly educated will be easy to receive information, so it is easier to be motivated to make regular attendance to the Integrated Health Center compared to low education.

This study is in line with research conducted by Siti Nurlaila et al, that there is a significant relationship between mother's knowledge and compliance with toddler visits to Integrated Health Center in Sumberejo Village, Mranggen District, Demak Regency ( $p = 0.000$ ). Knowledge in this research is the knowledge possessed by the respondents, where the results of the research show that there are variations in the level of knowledge possessed by mothers of toddlers where it is known that most of the respondents have good knowledge (53%).

Based on the results of the study, the authors assume that if the respondent has good enough knowledge, then the respondent will know the benefits of attending a Integrated Health Center visit.

### **The Relationship of Respondents' Attitudes with Integrated Health Center Visits**

The results showed that of the 72 respondents who had a good attitude visited the Integrated Health Center as many as 22 people (30.6%). Based on statistical analysis using chi square between attitudes and Integrated Health Center visits, the P value is 0.017 and this is smaller than the value = 0.05 (P-value = 0.017 < = 0.05) so that it is described that there is a significant relationship between attitudes and mother visits to Integrated Health Center Arongan Village.

Mother's positive attitude towards weighing toddlers gave birth to high motivation to come to the Integrated Health Center, especially for weighing toddlers. This is done as an implementation of the awareness of mothers under five on the benefits of weighing that they get through print and electronic media that exist today. Besides that, health education from medical personnel can strengthen the existing motivation so that respondents are able to express it by coming to the Integrated Health Center.

Based on the results of the study, the authors assume that the better a person's attitude is, the higher his sensitivity to attending the Integrated Health Center will be.

### **The Relationship of Respondents' Actions with Integrated Health Center Visits**

The results showed that of the 72 respondents who had good actions visited the Integrated Health Center a number of 28 people (38.9%). Meanwhile, 5 respondents (6.9%). Based on statistical analysis using chi square between the action and the Integrated Health Center visit, it was obtained that the P-value was 0.028 and this is smaller than the value of =0.05 (P-value = 0.028 < =0.05) so that there is a significant relationship between the action and the mother's visit to the Integrated Health Center Arongan Village.

Based on the results of the study, the authors assume that the action greatly affects Integrated Health Center visits. It can be interpreted that an action is an action. So if someone has positive actions, he will often attend Integrated Health Center activities. Vice versa.

### **CONCLUSION**

Based on the results of the research conducted, the relationship between Mother's Behavior and Integrated Health Center Visits in Arongan Village can be concluded as follows:

1. There is a significant relationship between knowledge and visits to Integrated Health Center (Pvalue = 0.022).
2. There is a significant relationship between attitudes and visits to Integrated Health Center (Pvalue = 0.017).
3. There is a significant relationship between actions and visits to Integrated Health Center (Pvalue = 0.028).

### **REFERENCES**

- Ahmalia, Renty dan Zaelfi, Rostri, Hubungan Motivasi Ibu Dan Peran Kader Dengan Keaktifan Dalam Mengikuti Kegiatan Posyandu Balita Di Wilayah Kerja Puskesmas Enam Lingsung Kabupaten Padang Pariaman, J Akademika Baiturrahim 2019, Vol. 8(2). E-ISSN 2654-2552. DOI : 10.36565/jab.v8i2.169

- Amalia, Endra et al., Faktor Mempengaruhi Kunjungan Ibu Membawa Balita Ke Posyandu Kelurahan Tanjung Pauh Tahun 2018, *J Kesehatan Perintis (Perintis's Health Journal)* 2019, Vol. 6(1). E-ISSN 2622- 4135. DOI : <https://doi.org/10.33653/jkp.v6i1.242>
- Darmawan, N K. (2014). Faktor-faktor yang Mempengaruhi Perilaku Kunjungan Masyarakat terhadap Pelayanan Posyandu di Desa Pemecutan Kelod Kecamatan Denpasar Barat. *Jurnal Dunia Kesehatan* Vol. V (no.2). E- ISSN 2447 – 300.
- Djamil, A. (2017). Faktor – Faktor yang Berhubungan dengan Perilaku Ibu Balita Menimbang Anaknya ke Posyandu. *Jurnal kesehatan* Vol VIII (no.1). DOI : <http://dx.doi.org/10.26630/jk.v8i1.409>
- Dinas Kesehatan Kota Banda Aceh, Profil Kesehatan Kota Banda Aceh 2016, Banda Aceh, 2017.
- Dinas Kesehatan Kota Banda Aceh, Profil Kesehatan Kota Banda Aceh 2017, Banda Aceh, 2018.
- Dinas Kesehatan Kota Banda Aceh, Data Cakupan Pelayanan Kesehatan Balita 2018, Banda Aceh, 2019.
- Dinas Kesehatan Provinsi Aceh, Profil Kesehatan Provinsi Aceh 2016, Banda Aceh, 2017.
- Dinas Kesehatan Provinsi Aceh, Profil Kesehatan Provinsi Aceh 2017, Banda Aceh, 2018.
- Harahap, R & Siregar, M. (2010). Pengaruh Karakteristik Ibu dan Dukungan Suami terhadap Pemeriksaan Kehamilan di Kecamatan Angkola Timur Kabupaten Tapamuli Selatan. *Jurnal Ilmiah PANMED* Vol. 8 (no.3).
- Hasanah, I. (2015). Faktor-faktor yang Berhubungan dengan Perilaku Ibu Balita dalam Menimbang Anaknya ke Posyandu di Wilayah Kerja Puskesmas Kelurahan Rorotan Kecamatan Cilincing Jakarta Utara tahun 2015. [Skripsi] Program Studi Kesehatan Masyarakat Fakultas Kedokteran dan Ilmu Kesehatan UIN Syarif Hidayatullah Jakarta.
- Idaningsih, Ayu, Faktor-Faktor Yang Berhubungan Dengan Kunjungan Balita Ke Posyandu, *J Ilmiah Indonesia* 2016, Vol. 1(2).
- Jannah, Musyrifatul, Pengaruh Tingkat Pendidikan, Pengetahuan, Jarak Tempat Tinggal Dan Sikap Ibu Kepada Pelayanan Petugas Puskesmas Terhadap Frekuensi Kunjungan Ibu Ke Posyandu Di Kabupaten Lamongan, Universitas Negeri Surabaya.
- Kasumayanti, Erma dan Busri, Iria N, Faktor-Faktor Yang Menyebabkan Rendahnya Peran Ibu Balita Ke Posyandu Desa Sumber Datar Wilayah Kerja Puskesmas Sungai Keranji Tahun 2016, *J Doppler* 2017, Vol. 1(2).
- Kemenkes RI, Profil Kesehatan Indonesia Tahun 2014, Jakarta, 2015.
- Kemenkes RI, Profil Kesehatan Indonesia Tahun 2017, Jakarta, 2018.
- Kemenkes RI, Profil Kesehatan Indonesia Tahun 2018, Jakarta, 2019.
- Kemenkes RI, Profil Kesehatan Indonesia Tahun 2019, Jakarta, 2020.

Maryanti, 2011. Buku Ajar Neonatus, Bayi & Balita. Trans Info Media : Jakarta.

Sugiyono, 2010. Metode Penelitian Kuantitatif, Kualitatif dan R&D. Alfabeta Bandung.

Widiyastuti, 2009. Faktor – Faktor yang Memengaruhi Kedatangan Ibu Balita Posyandu. Fitramaya: Yogyakarta..