

Analysis Of Factors Related To Antenatal Care (Anc) Services In Pregnant Women At Waringinkurung Public Health Center

Eva Oktasari^{1*}, Titin Eka Sugiadini²

^{1,2} Midwifery Study Program, STIKes Abdi Nusantara Jakarta, Indonesia

* Corresponding author:

Email: evisria46@gmail.com

Abstract.

Antenatal Consideration (ANC) assessment is an effort that saves pregnant women and young people from the causes of gloom and death. The purpose of the ANC is to plan as meticulously and intellectually as possible in order to keep the mom and newborn child pregnant. The requirements related to the contribution of ANC for pregnant women in the Waringinkurung welfare focus strategy were investigated. In the Waringinkurung welfare focus strategy, the described factor is the ANC contribution to pregnant women. Tutoring, data, age, calling, and data sources are all unbiased factors. The survey was used to determine the number of tests from the Slovin section to 83 people. After the facts have been gathered and handled, they will be examined. Results: The study found that the factors associated with providing ANC to young pregnant women at the Waringinkurung polyclinic were ANC contribution (p cost = 0.001), tutoring (p cost = 0.048), information (p cost = 0.030), age (p cost = zero,039), movement (p cost = 0.030), but also source of information (p cost = zero,0.5). The average number of antenatal care visits is several. with the goal of appropriately improving the mother's ability Tips: It is best for pregnant women to have routine pregnancy checks once a month to determine the condition of the mother and baby in the stomach. important phrases: Administration of Ante Natalcare (ANC), preparation, grasp, age, call, and data source.

Keywords: Ante Natalcare (ANC) services, training, understanding, age, profession, assets of information

I. INTRODUCTION

Every day, about 830 women worldwide (38 mothers in Indonesia according to 305 MMR) die from pregnancy and childbirth, according to the World Health Organization. From 2000 to 2017, the number of maternal deaths per 100,000 biological births decreased by about 38% internationally, with developing countries accounting for 94% of the decline(1) The maternal mortality rate (MMR) in Indonesia remains the highest in Southeast Asia, and is still far from the global SDGs target of reducing the MMR to 183 per 100,000 KH in 2024 and less than 70 per 100,000 KH in 2030. As a result, more comprehensive and This strategy is carried out to meet the target of reducing the MMR to 183 per 100,000 KH in 2024, reducing maternal mortality by at least 5.5 percent per year. The main causes of maternal death were hypertensive disorders in pregnancy (33.1 percent), obstetric bleeding (27.03 percent), non-obstetric complications (15.7 percent), other obstetric complications (12.04 percent), pregnancy-related infections (6.06 percent), and other complications. other causes (4.81 percent). Maternal mortality indicates that it can be avoided if the coverage and quality of services are adequate. Maternal mortality was found in hospital (15.6 percent), at home (4.1 percent), and while traveling to a hospital or health facility (2.5 percent)((2) In Indonesia, the coverage of health services for K4 pregnant women is expected to be higher in 2019-2020. When compared with the target of the Ministry of Health's strategic plan (renstra) in 2019, it was 76 percent, but due to the Covid-19 pandemic, it decreased by 61 percent in 2020(3).

The ANC (Antenatal Care) program is designed to provide observation, medical care, and education for pregnant women. Objectives: to maintain health during pregnancy, delivery, and postpartum so that babies are born healthy, safe, and satisfactorily during pregnancy and childbirth, monitor potential risks of pregnancy, plan optimal management of high-risk pregnancies, and reduce perinatal maternal and fetal morbidity and mortality (4). Integrated ANC Services is a program that connects pregnant women with health workers; Therefore, this service must be implemented in a quality and synchronized manner using standard (5).From 66.7 percent in 2013 (Riskesdas 2013) to 79.3 percent in 2018, delivery coverage has increased (Riskesdas 2018). The number of maternal deaths in Banten Province reached 230 in 2017 and increased to 247 in 2018. In Banten Province, the main causes of maternal death are bleeding, hypertension, and blood disorders. In 2018, the most common causes of maternal death were bleeding (87 people), hypertension in pregnancy (52 people), and abnormalities. Maternal mortality in Serang City decreased from

24 in 2018 to 7 in 2019. (Serang City Health Office, 2019). This is enough to reduce the MMR in Serang City by three times compared to 2018. According to the coverage of K1 and K4 at the Waringinkurung Health Center in 2020, K1 was 300 people (26 percent) and K4 was 570 (50 people). percent), with an increase in ANC health services from 2020 to 2021 as many as K1 400 people (41 percent) and K4 631 people (65 percent). During pregnancy, there are several changes in the mother's body system. This triggers the emergence of several responses that often cause discomfort for the mother. For this reason, the government's efforts to improve health development are by holding classes for pregnant women. Indonesia is still prioritized on efforts to improve the health status of mothers and children, especially for the groups most vulnerable to health, namely pregnant women, childbirth and the perinatal period. One of the objectives of the maternal and child health program (MCH) is to increase family independence in maintaining maternal and child health (6).

This study also shows that with community-based health education, pregnant women can gain knowledge and attitudes towards adherence to folic acid and iron consumption (7). Research is strengthened by providing education about the danger signs of pregnancy complications as part of antenatal care (ANC) visits can increase the awareness of pregnant women so that if these danger signs occur they can seek help on time. Delay in seeking help may lead to adverse outcomes for the mother and child. child. This study examines the level of knowledge of pregnant women in recognizing the danger signs of pregnancy complications and the level of quality of counseling provided in the health sector. Using observation visits, it is necessary to have better quality and quantity of counseling to increase knowledge of pregnant women. Counseling during antenatal care (ANC) visits. about the danger signs of pregnancy complications is important because it can increase the awareness of pregnant women in recognizing the danger signs of pregnancy (8). This study aims to determine the analysis of factors related to antenna service.

II. METHODS

The cause or risk variables, as well as the impact or cases that occur in the object of research(9), determine the Factors Associated with Ante Natal Care (ANC) Services for Pregnant Women at the Waringinkurung Health Center in 2022 by using an analytical survey with a cross sectional design.

III. RESULT AND DISCUSSION

Tabel 1.Distribusi Analisis Univariat

Variabel	Frecuency	Percentage %
ANC Service		
Complete	38	45,8
Incomplete	45	54,2
Knoledge		
Not Enough	36	43,4
Enough	33	39,8
Good	14	16,9
Education		
Hight	70	84,3
Low	13	15,7
Work		
Working	66	79,5
Doesn't Work	17	20,5
Resources		
Health Workers	53	63,9
Not Health Workers	30	36,1
Umur		
Young	4	4,8
Mature	73	88,0
Old	6	7,2

Source: Primary Data, 2022

Based on the univariate analysis in Table 1 shows the sample in this study amounted to 83 respondents, the results showed respondents that ANC services were incomplete by 54.2%, the majority of knowledge was still lacking, namely 43.4%, where the majority of the people in the work area highly educated 84.3% and the majority of people work 79.5% and the average source of information obtained from health workers is 63.9% and the age of the majority of pregnant women is 88%.

Table 2. Results of Bivariate Analysis of the Relationship between Education and Antenatal Services for Pregnant Women

Education	ANC Service On Pregnant Mother				Total		P value
	Low		Hight		F	%	
	F	%	F	%			
Complete	33	47.1	5	38.5	38	45.8	0.045
Incomplete	37	52.9	8	61.5	45	54.2	
Total	70	84.3	13	15.7	83	100	

Based on table 2, which shows the correlation analysis between education and ANC services for pregnant women, it was found that the original number of 83 people, who did a complete investigation were 38 people (45.8%) and 45 people were incomplete (54.2%). Statistical test results obtained P value = 0.045 ($p \leq$ or 0.045 0.05) then H_0 is rejected so that it can be conveyed that there is a correlation between education and ANC services for pregnant women.

Table 3. Knowledge Data Analysis with Antenatal Services to pregnant women

Knowledge	ANC Service On Pregnant Mother						Total		P : value
	Not Enough		Enough		Good		F	%	
	F	%	F	%	F	%			
Complete	17	47.2	15	45.5	6	42.9	38	45.8	0.010
Incomplete	19	52.8	18	54.5	8	57.1	45	54.2	
Total	36	43.4	33	39.8	14	16.9	83	100	

Based on table 3 showing the correlation analysis between knowledge of using ANC services for pregnant women, it was found that out of a total of 83 people, 38 people (45.8%) received complete services and 45 people (54.2%). Statistical test obtained P value = 0.010 ($p \leq$ or 0.010 0.05) then H_0 is rejected so that it can be conveyed that there is a relationship between knowledge of using ANC services in pregnant women.

Table 4. Analysis of Age Data with Antenatal Services to Pregnant Women

Age	ANC Service On Pregnant Mother						Total		P value
	Young		Mature		Old		F	%	
	F	%	F	%	F	%			
Complete	2	2.4	34	41.0	2	2.4	38	45.8	0.041
Incomplete	2	2.4	39	47.0	4	4.8	45	54.2	
Total	4	4.8	73	88.0	6	7.2	83	100	

Based on table 4 showing the correlation analysis between age and ANC services for pregnant women, it was found that the original number was 83 people, who received complete services 38 people (45.8%) and 45 people (54.2%). Statistical test results obtained P value = 0.041 ($p \leq$ or 0.041 0.05) then H_0 is

rejected so that it can be conveyed that there is a relationship between age and ANC services for pregnant women.

Table 5. Analysis of Occupational Data with Antenatal Services to Pregnant Women

Work	ANC Service On Pregnant Mother				Total		P value
	Work		Does't Work				
	F	%	F	%	F	%	
Complete	32	38.6	6	7.2	38	45.8	0.034
Incomplete	34	41.0	11	13.3	45	54.2	
Total	66	79.5	17	20.5	83	100	

Based on table 5 showing the correlation analysis between work and ANC services for pregnant women, it was found that from a total of 83 people, 38 people received complete services (45.8%) and 45 people (54.2%). Statistical test results obtained P value = 0.034 ($p \leq$ or 0.034 0.05) then H_0 is rejected as a result it can be conveyed that there is a correlation between work and ANC services for pregnant women.

Table 6. Data Analysis of Information Sources with Antenatal Services for Pregnant Women

Resources	ANC Service On Pregnant Mother				Total		P value
	Health Workers		Non Health Workers				
	F	%	F	%	F	%	
Complete	23	27.7	15	18.1	38	45.8	0.046
Incomplete	30	36.1	15	18.1	45	54.2	
Total	53	63.9	30	36.1	83	100	

Based on table 6 showing the correlation analysis between the origin of the information and the ANC services for pregnant women, it was found that the origin of the number of 83 people, who received complete services were 38 people (45.8%) and 45 people (54.2%). Statistical test obtained P value = 0.046 ($p \leq$ or 0.046 0.05) then H_0 is rejected as a result it can be conveyed that there is a relationship between news sources and ANC services for pregnant women. Education is the process of humanizing humans from birth to the end of their lives through various knowledges that are delivered gradually in the form of pedagogy, where the pedagogical process is the responsibility of parents and society, with their attitude towards God, making them perfect. people. According to the researchers' estimates, education can be obtained both inside and outside school (both formal and non-formal), meaning that one's knowledge is not obtained solely through school, but also through experience(10). Knowledge is defined as the result of human knowledge of the combination or cooperation between the subject who knows and the object that is known(11). As a result, you now know about exclusive objects. According to researchers, knowledge can be obtained from various sources, including formal and non-formal education. Age refers to the period of life stated so far; Age affects a person's mindset and grasping power. The older you get, the more your gripping patterns develop, and the knowledge you gain as a result increases. According to the researchers' assumptions, age is an indicator of a person's maturity in making decisions based on experience; as a result, as they age, their perceptive powers and mindsets increase, and the amount of experience generated increases.

So that adults receive more ANC services than children (12). The results of this study are in line with (Astuti, 2018) Work is something that a person produces as a profession, which is done intentionally to earn money or expend energy for activities that a person needs to achieve certain goals such as gaining knowledge, experience, and so on. Indonesian women work to support their families or as a means of self-actualization. The woman worked in several fields (government, company, trade and others). According to

the researcher's estimation, this means that work has a significant effect on the completeness of ANC visits and consequently the services received by pregnant women, so that many pregnant women do not know the circumstances surrounding their loss due to their work. Public knowledge is achieved through the transmission of information. A technique for preparing, collecting, storing, manipulating, analyzing, and disseminating information is defined as information. While education can be a source of information, so can mass media such as the internet, television, radio, newspapers, newspapers, and others. According to the researcher's assumption, information has a significant influence on the services that can be provided to pregnant women, because the more information provided, the more knowledge will be obtained(13).

IV. CONCLUSION

- a. There is a relationship between education and antenatal care services for pregnant women with p value = 0.045
- b. There is a relationship between knowledge and antenatal care for pregnant women with p value = 0.010.
- c. There is a relationship between age and antenatal care for pregnant women with p value = 0.041.
- d. There is a relationship between work and anc services for pregnant women with p value = 0.034
- e. There is a relationship between the source of information and the service of anc for pregnant women with p value = 0.046

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