



Analysis of the influence of pregnant women satisfaction on the motivation in compliance to antenatal care visits In Panti Community Health Centers, Jember Regency

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Abstrak

Pemeriksaan Antenatal (ANC) adalah pemeriksaan kehamilan untuk mengoptimalkan kesehatan fisik dan mental ibu hamil sehingga mereka dapat menghadapi kelahiran, masa nifas, persiapan menyusui, dan memulihkan kesehatan sistem reproduksi secara alami. Keluarga berencana, perawatan antenatal, persalinan pervaginam yang bersih dan aman, dan perawatan kebidanan harus diterapkan pada semua wanita usia reproduksi sebagaimana dinyatakan dalam Safe Motherhood dengan konsep empat pilar. Pemanfaatan fasilitas kesehatan perlu ditingkatkan untuk mengurangi angka kesakitan dan kematian ibu. Sedangkan untuk pencapaian cakupan K1 dan K4 di Puskesmas Panti dalam dua tahun terakhir masih di bawah target, yaitu K1 sebesar 117%, sedangkan K4 sebanyak 67,84%. Pada tahun 2016, cakupan K1 sama dengan 414 (70,29%) dari 589 wanita hamil, K4 sebanyak 38,54% dari 227 wanita hamil. Data ini menunjukkan adanya kesenjangan yang cukup besar antara cakupan K1 dan K4. Kesenjangan antara K1 dan K4 di Puskesmas Panti pada 2016 cukup besar, 31,75% dari target kesenjangan yang tidak boleh melebihi 10% (Data PWS Puskesmas Panti, 2016). Penelitian ini bertujuan untuk menganalisis hubungan antara motivasi dan tingkat kepuasan ibu hamil dalam pelayanan antenatal di Puskesmas Panti, Kabupaten Jember. Penelitian ini adalah penelitian kuantitatif dengan menggunakan metode analisis jalur. Desain penelitian ini adalah cross-sectional dengan sampel 50 wanita hamil yang diambil dengan teknik consecutive sampling. Data dikumpulkan pada Agustus-November 2017. Data dianalisis menggunakan perangkat lunak pengolah data. Hasil penelitian menunjukkan bahwa ada hubungan positif antara kepuasan dengan motivasi pasien dalam melakukan ANC dengan nilai CR 2,78, ada pengaruh yang signifikan antara kepuasan dengan keselamatan dalam melakukan ANC dengan nilai CR 0,34, dan ada kepuasan dengan non-dukungan yang meningkatkan pertemuan pasien dalam melakukan ANC dengan nilai CR 0,39. Selanjutnya, hasil analisis dan kesimpulan penelitian akan menjadi dasar untuk memecahkan masalah kesehatan. Rekomendasi ini diberikan berdasarkan hasil penelitian sebagai upaya untuk meningkatkan kinerja K1 dan K4.

Kata kunci : *Motivasi , Kepuasan, Perawatan Antenatal*

Abstract

Examination of Antenatal Care (ANC) is an examination of pregnancy to optimize the physical and mental health of pregnant women so they can face the birth, post-partum period, breastfeeding preparation, and restore the health of reproductive system naturally. Family planning, antenatal care, clean and safe vaginal delivery, and obstetric care should be applied to all women of reproductive age as stated in the Safe Motherhood with its concept of the four pillars. Utilization of health facilities needs to be improved to reduce morbidity and maternal mortality. As for the achievement of K1 and K4 coverage at Puskesmas Panti in the last two years remain below the target, namely K1 by 117%, while the K4 as much as 67.84%. In 2016, K1 coverage is equal to 414 (70.29%) of 589

pregnant women, K4 is as much as 38.54% of 227 pregnant women. These data indicate a considerable gap between the coverage of K1 and K4. The gap between K1 and K4 in Puskesmas Panti in 2016 is quite large, 31.75% of the target gap which should not exceed 10% (Data of PWS Puskesmas Panti, 2016). This study aimed to analyze the relationship between motivation and satisfaction levels of pregnant women in antenatal care at the Puskesmas Panti, Jember Regency. This research is quantitative research using path analysis method. This study design was cross-sectional with a sample of 50 pregnant women taken with the technique of consecutive sampling. Data were collected in August-November 2017. Data were analyzed using data processing software. The results showed that there was a positive relationship between satisfaction with patient motivation in conducting ANC with a value of CR 2.78, there was a significant effect between satisfaction with safety in conducting ANC with a CR value of 0.34, and there was satisfaction with non-support that increased the meeting patients in performing ANC with a CR value of 0.39. Furthermore, the results of the analysis and conclusions of the study will be the basis for solving health problems. The recommendation is provided based on results of the study as an attempt to improve the performance of K1 and K4.

Keywords: Motivation , Satisfaction, Antenatal Care

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INTRODUCTION

Antenatal Care (ANC), is an examination of pregnancy to optimize the physical and mental health of pregnant women to enable them to face the birth, post-partum, breastfeeding preparation, and restore the health of reproductive system. Factors that can influence the occurrence of a health problem include heredity, environment, healthcare facilities, and lifestyle as well as the behaviors of pregnant women when doing checkups. Before the people behave, basically they already have manner and perception gained from prior experience and knowledge. In Indonesia, Mother Mortality Rate (AKI) is still the highest when compared with AKI in other ASEAN countries. Various factors could pose a risk of complications in pregnancy. An estimated of five million vaginal deliveries occur each year, and twenty thousand of them ended in death caused by problems of pregnancy and childbirth. The efforts taken by the government to improve the K4 coverage is the provision

of Health Operational Fund (BOK) in the form of home visits, early screening of K1 on Reproductive Age Couples (PUS) when newly married, and Childbirth Planning Program and Complications Prevention (P4K) in the form of sticker installation.

The 2010 Basic Health Research Survey (Rikesdas) won K1, which amounted to 92.7% of the 96% target, to reach K4 which was 61.4% of the target of 88%. In East Java, K1 was pleased with 632,483 people (96.63%) with the number of pregnant women 654,565 people, from the target of 99% safety Fighting K4 577,646 people (88.25% with the number of pregnant women 654,565 people, target 94%, for Jember Regency in 2013 approved K1 as much as 112.49% and K4 as much as 90% (Health Office of Jember, 2012) While being able to reach K1 and K4 approval for the last 2 years in the Panti Health Center still matched the target set, K1 117% was K4 67.84%, in 2016 K1 was successful from 589 pregnant women as much as 414 (70.29%), K4

from 227 pregnant women as much as 38.54%, it looks like a fairly large number between K1-K4. The gap between K1 and K4 is quite large in 2016 in Puskesmas Panti 31.75% of the target addition does not exceed 10% (PWS Puskesmas Panti data, 2016).

The role of midwives in reducing maternal and infant mortality rate is very important. One of them is to provide and improve the quality of midwifery services. Quality midwifery services are services that can satisfy every user of health care based on the average satisfaction level of residents as well as its implementation based on the standards and code of professional conduct. Efforts to reduce Maternal Mortality Rate (MMR) and infant mortality rate are closely linked to the quality of service as perceived by the consumer and the quality of service as perceived by service providers.

MATERIALS AND METHODS

Research Type

This study is quantitative research with a cross-sectional design. This method is used to analyze the level of satisfaction on the motivation on the compliance of antenatal care (ANC) visits

at Puskesmas Panti, Jember Regency.

Population, Sample, and Sampling Techniques

Population of this study is all pregnant women at Puskesmas Panti. Meanwhile, the sample is pregnant women who do checkups at Puskesmas Panti within a specified time. The total population is 60 pregnant women. The sample in the study amounted to 50 pregnant women. The sample is taken using consecutive sampling technique.

Data Collection Techniques

Data is collected through questionnaires. The questionnaires ask about the level of satisfaction, motivation, and compliance of pregnant women on doing ANC at the Puskesmas Panti, Jember Regency.

Data Analysis Techniques

Several stages of collection, processing, and analysis of data are carried out as follows:

- The preparation stage, including an examination of the validity and reliability of the questionnaire.

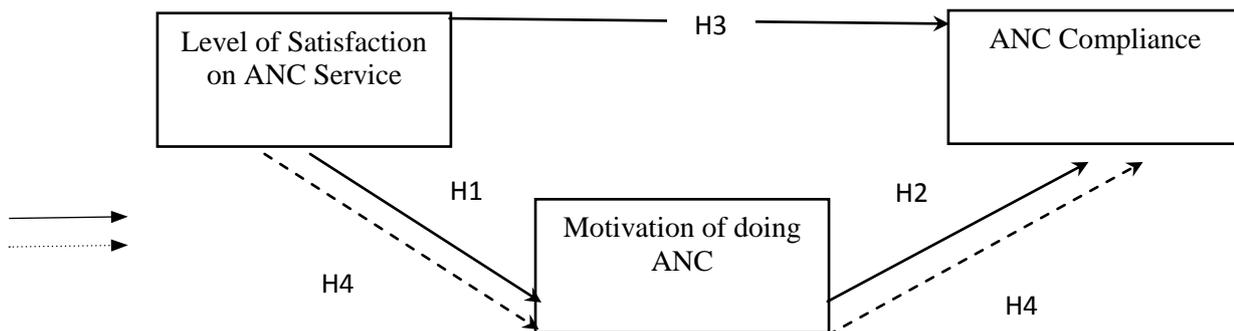


Figure 1 The study design

Description::

direct
indirect effect

Hypothesis:

- H1 : Satisfaction Level of ANC can affect the motivation to do ANC.
- H2 : The motivation to do ANC affect the compliance of ANC.
- H3 : Satisfaction Levels of ANC affect the compliance.
- H4 : Satisfaction Levels of ANC service affect the compliance of ANC via the motivation to do ANC.

- b. The data processing stage, include:
- 1) Editing the data: examining the completeness of the filled data fields.
 - 2) Encoding the data: classifying the data and giving it a code for each answer in the questionnaire
 - 3) Data entry: moving data from the questionnaire to the master table.
- c. Analysis and conclusion stage. The results of the analysis of questionnaire data were analyzed using path analysis method with the following steps:
- 1) Preparing the path diagram;
 - 2) Interpreting the results of the analysis.

RESULTS AND DISCUSSION

The research result of the influence of pregnant women satisfaction on the motivation in the compliance of antenatal care visit at the Puskesmas Panti Jember is presented in a frequency distribution table, descriptions table, and charts derived from the data of 50 pregnant women

Analysis of The Influence of Pregnant Women Satisfaction Level on The Motivation in The Compliance to Antenatal Care Visit

a. Developing a Line Diagram

One of the steps that must be performed in the path analysis is developing research models and prepare the path diagram. The early models

included in this study is consistent with the framework as follows

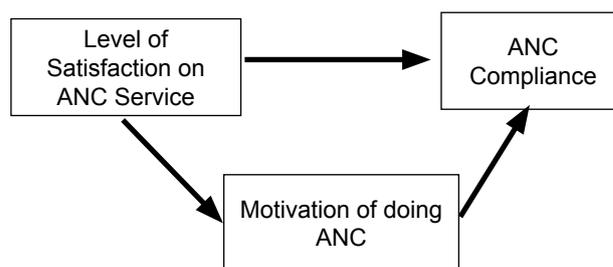


Figure 2. Diagram of Path of Influence of Satisfaction on the ANC Service on the Motivation in Compliance with ANC

Figure 2 illustrates that the level of satisfaction with the ANC service is predicted to affect the compliance in conducting ANC either directly or indirectly through a motivation.

b. Interpretation of Results

The results of hypothesis testing in this study are presented in Table 4:27, if the value of the critical ratio (CR) > 1.96 and $p < 0.05$, then the influence of variables is significant at the level $\alpha = 5\%$.

Interpretation of the results of hypotheses testing concerning the influence of exogenous variables on endogenous variables in Table 3.1 is as follows:

- 1) Satisfaction (X) \rightarrow Motivation (Y1)

Satisfaction of the ANC service showed the positive and significant impact on patient

Table 3.1 Table of Result of Hypothesis Testing

N	Hypothesis	Line coefficient		Description	Hypothesis Testing
		Estimation	CR		
1	H1 Satisfaction (X) \rightarrow Motivation (Y1)	0.37	2.78	Significant	Proven
2	H2 Motivation (Y1) \rightarrow compliance (Y2)	0.05	0,34	Insignificant	Unproven
3	H3 satisfaction (X) \rightarrow Compliance (Y2)	0.06	0.39	Insignificant	Unproven
4	H4 satisfaction (X) \rightarrow Motivation (Y1) \rightarrow Compliance (Y2)	Insignificant, the influence of satisfaction on motivation is significant. However the influence of motivation to satisfaction is insignificant. The impact of indirect effect could not be measured because it is insignificant			

motivation in doing the ANC (CR = 2.78). That is, an increase or decrease in the health service will have an impact on the increase and decrease in the motivation.

2) Motivation (Y1) → Compliance (Y2)

Satisfaction of the ANC did not show a significant effect on patient compliance in conducting ANC (CR = 0.34). That is, an increase or decrease in motivation have no impact on the increase and decrease in compliance with the ANC examination.

3) Satisfaction (X) → Compliance (Y2)

Satisfaction of compliance did not show a significant effect on patient compliance in conducting ANC (CR = 0.39). That is, an increase or decrease in health care satisfaction have no impact on the increase and decrease in compliance of the ANC examination.

4) Satisfaction (X) → Motivation (Y1) → Compliance (Y2)

The effect of satisfaction on the compliance showed significant results, although the influence of satisfaction on motivation is significant. However the influence of motivation on the compliance is insignificant. That is an increase or decrease in satisfaction of the ANC services have no impact on the increase and decrease in compliance indirectly.

The results of the study with similar results in the USA showed that motivation was not significantly a predictor that influenced health behavior. Although Xiaoyan Xu in 2009 stated that health motivation is the most important determinant factor in health behavior. Based on empirical research, the relationship between motivation and health behavior was found. In addition, satisfaction in regarding information received and waiting times and services for pregnant women as a whole is known to have strong associations with a willingness to come check again. But it is known that

motivation is not the only factor that can influence health behavior in this case is compliance with ANC visits. There are other factors that have proven to significantly affect pregnant women in carrying out ANC, including age, marital status, education level, income, wealth, care costs, health insurance, family support, religion and beliefs, awareness and attitudes of pregnant women, pregnancy is not desired, medical history, high risk pregnancy, parity, officer knowledge, officer skills and attitudes, service access (Surniati, Nurhayani and Arifin, 2011; Sriwahyu, Yusad and Mutiara, 2013; Pandey and Karki, 2014, Hajizadeh, Tehrani, Simbar & Farzadfar, 2015; Dinarohmayanti, Keintjem, and Losu, 2014; Junga, Pondaag, and Kundre, 2017; Sakeah et al, 2017).

It can be concluded that the satisfaction of pregnant women receiving ANC can significantly influence their motivation to come back to Puskesmas Panti for checkups. However, no significant effect found between the patient motivation and the compliance in doing the ANC. It is because the satisfaction and motivation are not enough to influence compliance in carrying out routine ANC of 4 times. The percentage of satisfaction on the health services, how motivated the patient is, does not affect the percentage of compliance in ANC visits. It means that the compliance or regularity or ANC behavior likely influenced by some factors that are not the focus of this study.

CONCLUSIONS AND RECOMMENDATIONS

1. The vast majority (48 respondents) felt very satisfied with the service of pregnant women in the Puskesmas Panti. The majority (36 respondents) felt very motivated to carry out antenatal care at the Puskesmas Panti. Distribution of respondents in Table 4.9 shows that the majority (40 respondents) are compliance in conducting antenatal care, in other words, 40 respondents are pregnant women with pure K4 criteria.

2. There is a significant relationship between the level of satisfaction with the motivation of mothers in antenatal care at the Puskesmas Panti, Jember Regency.
3. There is no significant effect between mother motivation and compliance in conducting antenatal care at the Puskesmas Panti, Jember Regency.
4. There is no direct influence between the satisfaction level of compliance of pregnant women and doing antenatal care at the Puskesmas Panti, Jember Regency.
5. There is no indirect influence on the level of satisfaction to the compliance of pregnant women in antenatal care visits through pregnant women motivation.

RECOMMENDATIONS

It is recommended for puskesmas to continue to improve services especially in the field of maternal and child health services and to bring out innovations to increase the motivation of pregnant women to want to carry out routine pregnancy checks.

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