

FACTORS FOR SELECTING CHILDBIRTH ASSISTANT IN SP 2 HILL TELUK MUNDUR PELALAWAN DISTRICT

Wan Anita^{1*}, Yadiati Maya Pesa², Endah Lestari³

^{1,2,3}STIKes Tengku Maharatu, Pekanbaru City, Riau (INDONESIA)

*Corresponding author: wan_anita77@yahoo.co.id

Abstract

In Indonesia, developing mother and child health is of utmost importance for the advancement of health. The reason for this is that throughout pregnancy, labor, and the postpartum period, mothers and children are particularly vulnerable populations. Consequently, evaluating maternal health issues is crucial. An indication of how well maternal health initiatives are working is the Maternal Mortality Rate (MMR) metric. There are several factors to consider while selecting a birth attendant. The emotional connection is one of the reasons why someone would rather give birth to a dukun beranak than a village midwife. Through comfort and cultural commonalities, the tight contact between the shaman and the patient fosters a strong sense of togetherness that can provide solace to moms who have problems during childbirth. This study aims to determine the factors that influence the choice of birth attendant by mothers giving birth. The purpose of cross-sectional, quantitative study is to identify the variables that affect laboring women's choice of birth attendants. Using random sampling, the study's sample consisted of 47 laboring mothers. The investigation was conducted at Pelalawan Village's SP II Teluk Mundur. Factors in selecting a birth assistant carried out by mothers giving birth at SP II Teluk Mundur, Pelalawan Sub-district. Out of 5 factors, there are related factors, namely education, knowledge, attitude and culture factors and there is 1 unrelated factor, namely the economic status factor.

Keywords: Childbirth Assistant, Paraji Shamans

1. INTRODUCTION

Improving maternal and child health is a top priority in health development in Indonesia. This is done because mothers and children are vulnerable groups during pregnancy, childbirth and the postpartum period. Therefore, it is very important to assess maternal health problems. The Maternal Mortality Rate (MMR) indicator is an indicator of the success of maternal health efforts. [1] The SDG's target by 2030 aims to reduce the maternal mortality ratio to less than 70 per 100,000 live births. [2] According to the Indonesian Health Demographic Survey (SDKI), MMR in 2012 was 359 per 100,000 live births. However, the maternal mortality rate remained high in 2017, namely 305 per 100,000 live births.[3]

Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 concerning Health Services for the Pre-Pregnancy, Pregnancy, Childbirth and Post-Birth Period, Providing Contraception Services, and Sexual Health Services divides birth assistance workers into health workers (Obstetricians and Midwives) and birth attendants. non-health (Trained Paraji Shaman and Untrained Paraji Shaman).[4] The choice of a birth attendant is a decision made by the mother giving birth to help with the birthing process. [5] The birth process

assisted by professional health personnel is very important to prevent death during childbirth. [2] The 2017 IDHS results show that competent health workers assisted 91% of live births, of which 61% were assisted by village midwives or nurses, 29% were assisted by obstetricians, and 1% were assisted by general practitioners. The number of births assisted by traditional birth attendants is still 7%. [3] The maternal mortality rate in Riau Province in 2022 is 114 people, with details of 33 people during pregnancy, 33 people during childbirth and 48 people during the postpartum period, while the neonatal death rate is 416 cases. The maternal mortality rate in Pelalawan Regency was 6 cases and the infant mortality rate was 18 cases.[6]

Factors in choosing a birth attendant have various reasons. One of the reasons why someone prefers to give birth to a dukun beranak rather than a village midwife is the emotional bond. The close shaman-patient relationship, both personally and socially, through comfort and cultural similarities creates a strong sense of togetherness that can comfort mothers who experience difficulties during childbirth. [7] Pregnant women choose Paraji shamans as birth attendants because they believe that Paraji shamans have more experience and are more caring and patient with their patients. The choice of Paraji shamans as birth attendants is also related to the services they provide and community trust.[8] The main reason why people still choose paraji shamans as their birth attendants is because women want to give birth at home or at home.[9] There is a long history and the struggle of shamans is incessant, no matter day or night. In helping pregnant women who need help.[10] Research on Mother's Behavior in Choosing Paraji Shamans as Birth Assisting Personnel in the Tembilahan Hulu Community Health Center working area discusses factors of knowledge, attitude, social culture, access to health facilities, family support as the basis of this qualitative research. [11] A total of 20 (46.5%) pregnant women chose health workers as birth attendants in the group with less knowledge, 34 people (66.7%) with a non-risk age status (20–35 years) and 7 people (41.2%) in the low income category. [12] Other research results show that mothers with good knowledge and positive attitudes will choose health workers as birth attendants [13]. This study aims to determine the factors that influence the choice of birth attendant by mothers giving birth.

2. METHODOLOGY

This study is a quantitative study with a cross-sectional design to determine the factors that influence the selection of birth attendants by mothers in labor. The study population was all deliveries at SP II Teluk Mundur, Pelalawan Village from 2021-2023, totaling 90 mothers in labor. The sample of this study was 47 mothers in labor using random sampling. The location of the study was at SP II Teluk Mundur, Pelalawan Village. Data collection on knowledge, attitudes, culture and economy used a questionnaire that had been tested for validity and reliability. Data collection was carried out from May - July 2024. The research analysis used univariate in the form of frequency distribution and bivariate analysis using the Chi Square Statistical Test.

3. RESULTS

The results of the analysis in the form of frequency distribution of education, knowledge, attitudes, culture and economy are shown in table 1 below.

Table 1: Frequency Distribution of Childbirth Assistance Selection Based on Knowledge at SP II Teluk Mundur, Pelalawan Village

No	Variabel	Frequensi	%
Education			
1	Low education	17	36,2
2	Middle Education	27	57,4
3	High Education	3	6,4
Knowledge			
1	Not enough	35	74,5
2	Enough	11	23,4
3	Good	1	2,1
Attitude			
1	Negative	31	66
2	Positive	16	34
Culture			
1	No support	7	14,9
2	Support	40	85,1
Economic status			
1	Low economic	8	17
2	Middle economic	37	78,8
3	High economic	2	4,2
Birth Assistant			
1	Paraji Shamans	33	70,2
2	Health workers	14	29,8

Based on table 1, it can be concluded that of the 47 respondents, the majority of mothers had secondary education, 27 people (57.4%), the majority of mothers' knowledge was in the poor category, 35 people (74.5%), the majority of mothers' attitudes were negative, 31 people (66%), the majority of cultures supported mothers in choosing a birth attendant (traditional birth attendant) as many as 40 people (85.1%), the majority had a moderate economic status with 37 people (78.7%), the majority of mothers chose a traditional birth attendant as many as 33 people (70.2%). The relationship between education, knowledge, attitude, culture and economic status factors on the choice of birth attendant can be seen in table 2 below.

Table 2.: Relationship of Factors in Selection of Birth Assistance at SP II Teluk Mundur, Pelalawan Village

No	Variable	Birth Assistant with Paraji Shamans		Birth Assistant with health workers		Total	p value
		f	%	f	%		
Education							
1	Low education	16	34,0	1	2,1	17	36,2
2	Middle Education	16	34,0	11	23,4	27	57,4
3	High Education	1	2,2	2	4,3	3	6,4
	Total	33	70,2	14	29,8	47	100
Knowledge							
1	Not enough	28	59,6	7	14,9	35	74,5
2	Enough	5	10,6	6	12,8	11	23,4
3	Good	0	0	1	2,1	1	2,1
	Total	33	70,2	14	29,8	47	100

Attitude							
1	Negative	28	59,6	3	6,4	31	66
2	Positive	5	10,6	11	23,4	16	34
	Total	33	70,3	14	29,7	47	100
Culture							
1	No support	33	70,2	7	14,9	40	85,1
2	Support	0	0	7	14,9	7	14,9
	Total	33	70,2	14	29,8	47	100
Economic status							
1	Low economic	8	17	0	0	8	17
2	Middle economic	24	51,1	13	27,7	37	78,8
3	High economic	1	2,1	1	2,1	2	4,2
	Total	33	70,2	14	29,8	47	100

Based on table 2, there are 16 respondents (34.4%) of childbirth with Paraji Shamans known to be mothers with low education with p value = 0,017, 28 respondents (59.6%) of childbirth with less knowledge with a p-value = 0.028, 28 respondents (59.6%) of childbirth with Paraji Shamans who have a negative attitude and a p-value = 0.000, 33 respondents (70.2%) of childbirth with Paraji Shamans known to have a culture that supports childbirth with Paraji Shamans with a p-value = 0.000, there are 8 respondents (17%) of childbirth with Paraji Shamans, with low economic status with a p-value = 0.117.

4. Discussion

In this study, out of 47 respondents, the majority of mothers chose Paraji Shamans (33 people (70.2%). A traditional birth attendant is someone who helps with the birthing process, baby care, and pregnant women spiritually. Traditional birth attendants are also known as Paraji Shamans. In terms of birth assistance skills, they get their skills passed down from generation to generation, either from their parents or the elder Paraji Shamans in their area.

Those with higher education tend to be more exposed to various sources of information and therefore become more critical than those who are not or less exposed. Due to the lack of exposure to various sources of information, in choosing a birth attendant, respondents with low education tend not to be critical and usually follow the customs in the village, namely giving birth with the help of a traditional birth attendant.[13] In this study, there was still low education, namely elementary school, so this is what affects the mother's knowledge, and also inhibits mothers from thinking actively in choosing birth assistance. Low education causes their knowledge about things or risks related to childbirth to also be low.

Based on the research that has been conducted, the results showed that the majority of mothers had less knowledge, as many as 35 respondents (74.5%) and the majority of 28 respondents (59.6%) chose to have their delivery assisted by a traditional birth attendant. The results of the chi-square test obtained a p-value of 0.028 <(0.05). which means that this shows that there is an influence of knowledge in choosing a birth attendant at SP II Teluk Mundur, Pelalawan Village. According to WHO, knowledge is obtained from personal experience or the experience of others. Mothers who have knowledge about reproductive health prefer self-confidence and insight to make decisions related to choosing a birth attendant.[14] Good maternal knowledge regarding the selection of a birth attendant will influence decision-making in selecting a birth attendant, where with good maternal knowledge, of course, they will have positive health behavior, mothers tend to make decisions in choosing health workers as birth attendants.[15]

Based on the research that has been conducted, the results obtained are that the majority of mothers have a negative attitude as many as 31 respondents (66%) and the majority of 28 respondents (59.6%) choose to give birth with a traditional birth attendant. The results of the Chi-square test obtained a p-value = 0.000 (<0.05), this shows that there is a relationship between attitudes in choosing a birth attendant at SP II Teluk Mundur, Pelalawan Village. According to the researcher's assumption, in this study the majority of mothers have a negative attitude in choosing a birth attendant. Where there are still mothers who have a positive attitude but still choose a traditional birth attendant as their birth attendant. This is because mothers still follow existing traditions or customs (culture). And mothers who feel that their pregnancy is normal prefer to give birth with a traditional birth attendant because the cost of a traditional birth attendant is considered cheaper. The results of this study are in line with the research conducted with the title The Relationship between Knowledge and Attitudes of Pregnant Women with the Selection of Birth Assistance in North Sibolga District, Sibolga City in 2021. The results showed that there was a relationship between the attitudes of pregnant women and the selection of birth assistance in North Sibolga District, Sibolga City in 2021 with p = 0.001 (p <0.05). [13] A complete attitude is formed together by three components, namely belief (confidence) in an object and the tendency to act. After someone knows the stimulus or object, the person will then assess or act towards the stimulus or object and is then expected to carry out or practice what is known or responded [16]

Based on the results of the study, the majority of mothers have a moderate economic status of 37 respondents (51.1%) and the results of the chi-square test obtained a p-value of 0.117 > 0.05, which means that there is no influence of economic status in choosing a birth attendant at SP II Teluk Mundur in Pelalawan Village. Economic status is the economic status that drives mothers to use the services of birth attendants in the form of 41 economic statuses of mothers in considering the cost of childbirth. Income is one of the factors related to financial conditions that causes purchasing power for additional food to be greater. Income concerns the amount of income received, which when compared to expenses still allows mothers to choose birth assistance from health workers [13]

Based on other research on Factors Influencing the Selection of Birth Assistance in Gema Village, Kampar Regency, where many respondents who have incomes categorized as sufficient still choose to give birth with a traditional birth attendant rather than with health workers. According to the researcher's assumption, research in SP II Teluk Mundur, there are still many mothers who have moderate/sufficient economic status who still choose traditional birth attendants as their birth attendants. Because the community or mothers consider the cost of giving birth with a midwife to be more expensive than a traditional birth attendant. This idea arises because of the lack of knowledge of mothers about the dangers and knowledge about the guarantee of free delivery at health facilities. [17]

5. CONCLUSIONS

Factors in selecting a birth assistant carried out by mothers giving birth at SP II Teluk Mundur, Pelalawan Sub-district. Out of 5 factors, there are related factors, namely education, knowledge, attitude and culture factors and there is 1 unrelated factor, namely the economic status factor. The need for increased knowledge for pregnant women in choosing a birth attendant starting from the time of pregnancy check-up. The importance of choosing a birth attendant by health workers will reduce the risk of death.

6. ACKNOWLEDGEMENTS

We would like to thank STIKes Tengku Maharatu for supporting our research in all aspects. We also appreciate the dedication of all respondents who participated in this study.

7. REFERENCES

- [1] Kemenkes RI, *Profil Kesehatan Indonesia*. 2023. [Online]. Available: <https://www.kemkes.go.id/downloads/resources/download/pusdatin/profil-kesehatan-indonesia/Profil-Kesehatan-2021.pdf>
- [2] Kementerian PPN/Bappenas, "Peta Jalan Sustainable Development Goals (SDGs) di Indonesia 2030," *Kementeri. PPN/Bappenas*, p. 35, 2017, [Online]. Available: https://sdgs.bappenas.go.id/website/wp-content/uploads/2021/02/Roadmap_Bahasa-Indonesia_File-Upload.pdf
- [3] Kementerian Kesehatan RI, "Survei Demografi dan Kesehatan Indonesia Tahun 2017," 2018.
- [4] Kementerian Kesehatan RI, *Peraturan Menteri Kesehatan Republik Indonesia Nomor 97 Tahun 2014 Tentang Pelayanan Kesehatan Masa Sebelum Hamil, Masa Hamil, Persalinan, Dan Masa Sesudah Melahirkan, Penyelenggaraan Pelayanan Kontrasepsi, Serta Pelayanan Kesehatan Seksual*. Jakarta, Indonesia: Kementerian Kesehatan RI, 2014, pp. 1–119. doi: 10.1300/J064v05n01_12.
- [5] E. S. Walyani and E. Purwoastuti, *Ilmu Kesehatan Masyarakat Dalam Kebidanan*. Yogyakarta: Pustaka Baru Press, 2015.
- [6] Dinas Kesehatan Provinsi Riau, *Profil Kesehatan Provinsi Riau Tahun 2022*. 2022.
- [7] M. Umami, "Eksistensi Dukun Beranak Di Desa Sejahtera Kecamatan Sukadana Kabupaten Kayong Utara," *J. S-1 Sosiol.*, vol. 5, 2017, [Online]. Available: <http://jurmafis.untan.ac.id>
- [8] S. Nurhidayanti, A. Margawati, and M. I. Kartasurya, "Kepercayaan Masyarakat terhadap Penolong Persalinan di Wilayah Halmahera Utara," *J. Promosi Kesehat. Indones.*, vol. 13, no. 1, p. 46, 2018, doi: 10.14710/jpki.13.1.46-60.
- [9] F. Prihatini, A. Fahrudin, and I. Nursanti, "Experience of a Childbirth Mother Assisted by Shaman Paraji: A Phenomenology Study in Sumber Lor Village, Babakan Sub-District, Cirebon Regency," *Asian Soc. Work J.*, vol. 4, no. 2, pp. 105–110, 2019, doi: 10.47405/aswj.v4i2.95.
- [10] Muzakkir, "Charismatic Shaman-child And Synergy towards Midwives in the election of give birth, in South Sulawesi, INDONESIA (Case Study on Maternal-Child Sorcerers Ratings)," *J. Med. Sci. Clin. Res.*, vol. 05, no. 04, pp. 20940–20946, 2017, doi: 10.18535/jmscr/v5i4.191.
- [11] J. K. Komunitas, T. Penolong, P. Di, and W. Kerja, "Perilaku Ibu Dalam Memilih Dukun Bayi Sebagai Puskesmas Tembilahan Hulu Tahun 2016," vol. 3, no. 5, pp. 182–188, 2018.
- [12] H. Y. Andini, "Faktor-Faktor Yang Memengaruhi Pemilihan Penolong Persalinan Pada Ibu Hamil," *J. Ilm. JKA (Jurnal Kesehat. Aeromedika)*, vol. 9, no. 1, pp. 55–63, 2023, doi: 10.58550/jka.v9i1.200.
- [13] S. A. Sitompul, "Hubungan pengetahuan dan sikap ibu hamil dengan pemilihan penolong persalinan di kecamatan sibolga utara kota sibolga tahun 2021," 2021.
- [14] Rindi Yani, "Faktor-Faktor Penyebab Rendahnya Cakupan Pertolongan Persalinan Oleh Tenaga Kesehatan Di Desa Ulak Medang Kecamatan Muara

Pawan Kabupaten Ketapang Kalimantan Barat Periode Januari-September 2021,” 2021.

- [15] G. Sonia, A. Novita, and M. T. Putri, “Hubungan Pengetahuan, Sikap, Dan Dukungan Suami Dengan Perilaku Pemilihan Penolong Persalinan Di Desa Cihea Wilayah Kerja Puskesmas Haurwangi Tahun 2023,” *SENTRI J. Ris. Ilm.*, vol. 3, no. 5, pp. 2390–2396, 2024, doi: 10.55681/sentri.v3i5.2751.
- [16] S. Notoatmodjo, *Promosi Kesehatan dan Perilaku Kesehatan*. Jakarta: Rineka Cipta, 2014.
- [17] Nevi, S. Susianty Okrianti, and A. Rahmawati, “Faktor yang Berhubungan dengan Pemilihan Penolong Persalinan di Desa Gema Kabupaten Kampar Tahun 2020,” *J. Heal. Sci. Physiother.*, vol. 4, no. 1, pp. 14–21, 2022, [Online]. Available: <https://media.neliti.com/media/publications/423974-none-2ebfc90d.pdf>