

PREGNANCY HEALTH EDUCATION COUNSELING USING BAKSO (POCKET BOOK OF RISKY PREGNANCY ALARMS) ON THE MOTIVATION OF PREGNANT WOMEN TO ATTEND ANC AT TPMB RAFIKA PUTRI BOGOR REGENCY IN MAY 2024

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Abstract

High-risk pregnancies are pregnancies that can endanger the mother and fetus and increase mortality. The Risky Pregnancy Alarm Pocket Book is an effort to increase maternal motivation to do ANC. To find out the relationship between the description of pregnancy health education counseling using BAKSO Rafika Putri (Risky Pregnancy Alarm Pocket Book) to the motivation of mothers to do ANC. This research method is descriptive. The population in this study were all pregnant women who performed pregnancy checks at TPMB Rafika Putri S.ST., Bdn., M. Kes in May 2024, the research sample was part of pregnant women who performed pregnancy checks at TPMB Rafika Putri S.ST., Bdn., M. Kes in May 2024. This study uses a random sampling technique. The results of this study showed that pregnant women who had increased motivation regarding ANC examination increased to 40 respondents (80%). It is hoped that the Risky Pregnancy Alarm Pocket Book can be used as a medium for health workers in conducting health education education to pregnant women to reduce risky pregnancies.

Keywords: Health Education, BAKSO, Motivation, Pregnant Women, Antenatal Care

1 INTRODUCTION

High-risk pregnancy is a pregnancy that can endanger the mother and fetus and increase mortality. Until now the maternal and perinatal mortality rate is still quite high, according to data from (WHO) states that the Maternal Mortality Rate until 2022 reached 207 per 100,000 live births above the target of 190 per 100,000 live births [1]. Meanwhile, about 287,000 mothers experience high risk of pregnancy, due to complications of pregnancy and child birth, such as bleeding 28%, preeclampsia / eclampsia 24%, infection 11%, and indirect causes (obstetric trauma) 5% and most cases of mothers in the world occur in developing countries due to pregnant women not attending maternity classes, so pregnant women do not know the dangers of pregnancy. While the data on pathological labor with three causes of labor complications, the first is bleeding (30%), preeclampsia / eclampsia (25%), and infection (12%) [1].

MMR and IMR in Indonesia according to (Indonesian Health Profile 2021) The maternal mortality rate during childbirth is still high until 2019, almost every hour, two mothers giving birth die, amounting to 305/100,000, while the infant mortality rate (IMR) reaches 32 per 1000 live births (Indonesian Ministry of Health 2022). While high-risk pregnancies with (4T) reached 22.4% with details of the birth distance of 3 people) by 9.4% [2]. While the number of pathological labor in Indonesia reached 2,982 cases, bleeding as many as 1,320 cases, hypertension in pregnancy as many as 1,077 cases, heart disease as many as 335 cases, infections as many as 207 cases, metabolic disorders as many as 80 cases, circulatory system disorders as many as 65 cases, abortion as many as 14 cases, and other causes as many as 1,309 cases [2].

In West Java Province the number of maternal mortality rates (MMR) at risk is 147.43 per 100,000 live births [3]. In Bogor Regency, the number of pregnancies at risk based on maternal age > 35 years was 54.38% and maternal age < 25 years was 45.61% experiencing severe preeclampsia. Pathological labor refers to labor that occurs in difficult or bad conditions that can have a negative impact on the mother and baby, even at the risk of causing death. Based on public knowledge and awareness about the health of pregnant women is a determining factor in mortality rates, although there are still many factors that must be considered to deal with this problem.

Factors causing the increase in maternal mortality rate (MMR) and infant mortality rate (IMR) in Indonesia include several aspects including gender inequality, socioeconomic conditions, lack of health education, poor access to health services, and factors such as non-health worker delivery [2]. The government's program on planning for childbirth and preventing complications (P4K). The implementation of P4K facilitated by village midwives in order to increase the active role of husbands, families and communities in planning safe delivery and preparation for complications for pregnant women, the use of postpartum family planning including planning in order to increase the coverage and quality of health services for mothers. The researchers' efforts to reduce maternal and infant mortality rates are with more effective health education counseling activities, namely using promotional media assistance, such as pocket books. Based on research from Atik Mahmudah, 2023 The Effect of Giving Pocket Books on Knowledge of Screening Hypertension Risk Factors in High School Adolescent Girls. With the results of the study that there were changes in knowledge about screening for hypertension risk factors before and after being given a pocket book where before being given a pocket book.

Many factors influence mothers to visit Antenatal Care, one of which is the mother's motivation, Motivation is a condition in a person's personality that encourages individual desires to carry out certain activities to achieve goals. Pregnant women who have the motivation to make antenatal visits are likely to think about determining attitudes, behaviors to prevent, avoid, or overcome pregnancy risk problems. Based on preliminary studies at the Independent Practice of Midwife Rafika Putri S.ST., Bdn., M.kes, the number of pregnant women from January-April 2024 was 411 pregnant women. The number of pregnancies at risk in January - April 2024 was 21 pregnant women. And the number of deliveries in January - April 2024 was 43 mothers. Based on the problems described above, the researcher is interested in conducting research on "Overview of Pregnancy Health Education Counseling Using BAKSO Rafika Putri (Pocket Book of Risky Pregnancy Alarms) on the Motivation of pregnant women to do ANC" at TPMB Rafika Putri S.ST., Bdn., M.kes Bogor Regency in May 2024.

2 METHODS

Based on preliminary studies in independent practice, the type of research used is descriptive research with a research design approach Control Group Pretest Posttest Design. This study uses a survey approach by giving questionnaires to respondents to be answered according to the knowledge of the respondents. The population in this study were all pregnant women who did pregnancy checks at TPMB Rafika Putri S.ST., Bdn., M.kes in May 2024. sample calculation with the Lemeshow formula approach, the sample taken was part of pregnant women who did ANC checks at TPMB Rafika Putri S.ST., Bdn., M. Kes in May 2024.

$$n = \frac{z^2 1 - \frac{a}{2} x p (p - 1)}{d^2}$$

The form of media presentation in univariate analysis uses BAKSO Rafika media (pocket book of risky pregnancy alarm). In this study, univariate analysis was carried out to produce a frequency distribution and percentage of the mother's knowledge level before and after the counseling.

$$p = \frac{F}{N} \times 100\%$$

3 RESULTS AND DISCUSSION

The univariate data presents the characteristics of respondents including age, education level, parity, and occupation. The following are the characteristics of the research respondents studied.

Table 3.1: Frequency Distribution of Health Education Counseling Overview of BAKSO Rafika (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC Based on Age at TPMB Rafika Putri S.ST., M. Kes Bogor Regency in May 2022

| No | Description | Frequency | Percentage (%) |
|--------|---|-----------|----------------|
| 1. | At risk <20 years old and < 35 years old | 8 | 16% |
| 2. | Not at risk > 20 years old and < 35 years old | 42 | 84% |
| Amount | | 50 | 100% |

Reference: Primary Data, 2024

Table 3.2: Frequency Distribution of Health Education Counseling Overview of BAKSO (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC Based on Education at TPMB Rafika Putri S.ST., M. Kes Bogor Regency in May 2024

| No | Description | Frequency | Percentage (%) |
|----|---|-----------|----------------|
| 1 | Compulsory Education (elementary, junior high, high school) | 39 | 78% |

| | | | |
|----|--|----|-------|
| 2. | Higher Education (Diploma, S1, S2, S3) | 11 | 22% |
| | Amount | 50 | 100 % |

Reference: Primary Data, 2024

Table 3.3: Frequency Distribution of Health Education Counseling Overview of BAKSO (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC Based on Occupation at TPMB Rafika Putri S.ST., M. Kes Bogor Regency in May 2024

| No | Description | Frequency | Precentage (%) |
|----|---|-----------|----------------|
| 1 | Working (Pregnant women who have a livelihood) | 19 | 38% |
| 2. | Not Working (Pregnant women who do not have a livelihood) | 31 | 62% |
| | Jumlah | 50 | 100 % |

Reference: Primary Data, 2024

Table 3.4: Frequency Distribution of Health Education Counseling Overview of BAKSO (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC Based on Parity at TPMB Rafika Putri S.ST., M. Kes Bogor Regency in May 2024

| No | Description | Frequency | Precentage (%) |
|----|--|-----------|----------------|
| 1 | Primigravida > 1 time (Multigrande &/Grandpamultipara) | 36 | 72% |
| 2. | First Time Pregnancy (Primigravida) | 14 | 28% |
| | Amount | 50 | 100 % |

Reference: Primary Data, 2024

Table 3.5: Distribution of Health Education Counseling Overview of BAKSO (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC before being given counseling at TPMB Rafika Putri S.ST., M. Kes Bogor Regency in May 2024

| No | Description | Frequency (f) | Precentasge (%) |
|----|---|---------------|-----------------|
| 1 | Good (If Questionnaire Point Score ≥ 55) | 30 | 60% |
| 2 | Less (If the Questionnaire Point Score is less than 55) | 20 | 40% |
| | Amount | 50 | 100% |

Reference: Primary Data, 2024

Table 5.6: Distribution of Health Education Counseling Overview of BAKSO Rafika Putri (Pocket Book of Risky Pregnancy Alarms) on the Motivation of Mothers to do ANC after being given counseling at TPMB Rafika Putri S.ST., M. Kes Bogor District in May 2024

| No | Description | Frequency (f) | Precentage (%) |
|--------|---|---------------|----------------|
| 1 | Good (If Questionnaire Point Score ≥ 55) | 40 | 80% |
| 2 | Less (If the Questionnaire Point Score is less than 55) | 10 | 20% |
| Amount | | 50 | 100 % |

Reference: Primary Data, 2024

3.1 Characteristics of Respondents Based on Age

Based on table 5.1 shows that the highest respondents in the age group are not at risk > 20 years and < 35 years, namely 42 pregnant women (84%) and the lowest respondents in the risk group 35 years, namely 8 pregnant women (16%). This is in accordance with Octavia the reproductive gestation period of women can basically be divided into three periods, namely the young reproductive period (15-19 years) or 35 years. Based on this explanation, it can be said that the experimental group with ages > 20 to 35 years in the current technological era is very easy to do traceability related to the mother's motivation to do ANC checks so as to minimize risky pregnancies.

3.2 Characteristics of Respondents Based on Education

Based on table 5.2 shows that the highest respondents in the compulsory education group were 39 pregnant women (78%) and the lowest respondents in higher education were 11 pregnant women (22%). This is in accordance with Notoatmodjo's theory that education can affect a person, including a person's behavior, especially in motivating the attitude of participating in development in general, the higher a person's education, the easier it is to receive information. said that the higher a person's level of knowledge will affect the mother in receiving new information so that she will not be indifferent to the information received.

3.3 Characteristics of Respondents Based on Occupation

Based on table 5.2 shows that the highest respondents in the Working group were 19 pregnant women (38%) and the lowest respondents were not working, namely 31 pregnant women (62%). This is in accordance with Hurlock's theory that work carried out in daily activities also has an influence on other things. Working is generally a time-consuming activity, and working for mothers will have an influence on family life. The social environment will support a person's high knowledge. Based on this, it can be seen that pregnant women who do not work / housewives are more dominant because they have more time to find out about the information needed so that it affects the knowledge of pregnant women.

3.4 Characteristics of Respondents Based on Parity

Based on table 5.4 shows that the highest respondents in the Primigravida parity

group were 36 pregnant women (72%) and the lowest respondents in Multipara Grande Parity were 12 pregnant women (28%). This is in accordance with Prawirohardjo's theory that mothers who have several children generally have better knowledge because they have direct practical experience and acceptance will be easier. However, in this study, Primigravida mothers had more good knowledge because the first pregnant women were more frequent and diligent in conducting examinations and getting information about pregnancy because mothers with the first gravida must have good knowledge to prepare for a healthy and safe pregnancy.

3.5 Distribution of mother's motivation before being given Health Education

It is known that before the health education counseling using BAKSO Rafika Putri, pregnant women who have motivation to do ANC regarding risky pregnancies are 20 respondents (40%). While good knowledge about risky pregnancy 30 respondents (60%). This is in accordance with the theory of Lase Motivation can affect the success of the coverage of maternal visits. Pregnant women who are motivated to conduct prenatal visits are more likely to think about determining attitudes, behaviors to prevent, avoid, or overcome the risk of pregnancy problems. The mothers realize that prenatal visits must be done to check pregnancy so that if there are risks during pregnancy can be handled quickly and appropriately by health workers to help reduce the high maternal mortality rate in Indonesia. The motivation obtained by mothers is expected to be able to provide benefits or as a driver for mothers in conducting ANC visits.

3.6 Distribution of mother's motivation after being given Health Education

It is known that after health education counseling using BAKSO Rafika, pregnant women who have the motivation to do ANC regarding risky pregnancies are 40 respondents (80%). While the lack of knowledge about risky pregnancy 10 respondents (20%). This is in accordance with the theory of Lase Motivation can affect the success of the coverage of maternal visits. Pregnant women who are motivated to make pregnancy visits are more likely to think about determining attitudes, behaviors to prevent, avoid, or overcome the risk of pregnancy problems.

4 CONCLUSIONS

Based on the results of research on the description of health education counseling using BAKSO Rafika Putri (pregnancy alarm pocket book) on the motivation of pregnant women to do ANC conducted in May 2024 at TMPB Rafika Putri S.ST., Bdn., M. Kes, shows that, the highest age group of respondents in the age group is not at risk > 20 years and < 35 years, namely 42 pregnant women (84%), the group of respondents with compulsory education is 39 pregnant women (78%), the highest respondent group in the group does not have a livelihood, namely 31 pregnant women (62%), The highest Parity group in the Primigravida Parity group is 36 pregnant women (72%), the highest Respondent Group before being given education on the motivation of pregnant women to do ANC is 30 pregnant women (60%), the highest respondent group after being given education on the motivation of pregnant women to do ANC is 40 pregnant women (80%).

5 REFERENCES

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