PROCEEDING

INTERNATIONAL CONFERENCE:
Maternal, Child and Family Health 2016

“Strengthening Maternal, Child and Family Wellbeing Through Bridging Research and Practice”

Reviewer:
Janet Hirst (Healthcare University of Leeds)
Kuldip Kaur Bharj (Healthcare University of Leeds)
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Dwi Prihatiningsih (Aisyiyah University of Yogyakarta Indonesia)
Ery Khusnal (Aisyiyah University of Yogyakarta Indonesia)

Hall 4 ‘Aisyiyah University Yogyakarta, Yogyakarta Indonesia 19 - 20 October 2016
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PROCEEDING INTERNATIONAL CONFERENCE: Maternal, Child, and Family Health 2016
Acknowledgment

Assalamualaikum warahmatullah wabarakatuh

The deepest gratitude is only addressed to Allah SWT for the blessing and mercy to us, so the Proceeding of International Conference of ‘Aisyiyah University of Yogyakarta in 2016 can be completed well. This proceeding contains research papers which were presented during Seminar, Workshop, and International Conference of ‘Aisyiyah University of Yogyakarta within the cooperation of some universities from several countries.

International conference of ‘Aisyiyah University of Yogyakarta with the theme “Strengthening Maternal, Child, and Family Wellbeing through Bridging Research and Practice” is held as the media to share information of research results and scientific experiences. The goals of the international conference are as follow: Conducting one day seminar, presented by topic experts to gain more understanding of maternal, child and family health matters. Conducting workshop to improve research quality and impacts in maternal, child and family wellbeing. The gratitude is also addressed to the Rector of ‘Aisyiyah University of Yogyakarta and her staffs, the committees of the conference, and all parties who have participated and given the supports for the success of this international conference. However, this proceeding is still far from perfect. Thus, it is expected that there will be positive suggestion for further development of the proceeding in the future. It is also expected that the proceeding will give positive contribution for the development of health professionals in Indonesia. Please, enjoy the international conference.

Wassalamualaikum warahmatullah wabarakatuh

Yogyakarta, Oktober 2016

Head of LPPM ‘Aisyiyah University of
Yogyakarta

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THE CORRELATION BETWEEN KNOWLEDGE LEVEL AND PARITY TOWARD REGULAR ANTENATAL CARE VISITS ON PREGNANT WOMEN

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Email: ennyanggraeny3@gmail.com

ABSTRACT

Antenatal care is an assessment done by healthcare staff to pregnant mother and her baby periodically to monitor mother’s health and fetus growth and development. The purpose of this study was to investigate the relationship between level of knowledge, parital status and ANC visits on pregnant mothers. This study was an analytical survey with cross sectional approach. The samples were taken through incidental sampling with 65 respondents. Data analysis used Chi Square. The result showed that most of respondents 95.4% have high knowledge level, 66.7% have multiparas status, and 59.1% do regular ANC visits. There is low correlation between knowledge level and regular ANC visits and there is no correlation between parity and regular ANC visits.

Keywords: knowledge level, parity, regular ANC visits

INTRODUCTION

Antenatal Care (ANC) is a program that is planned in the form of observation, education, and medical treatment in pregnant women, to obtain a process of pregnancy and childbirth safe and satisfied. Objective of Antenatal Care (ANC) is to keep staying healthy during pregnancy, childbirth and postpartum, cultivate healthy babies born, watching the possibility of a high risk of pregnancy is expected to do as well as early treatment can reduce morbidity and mortality of mother and fetus (Hutaahaean, 2009 ; & Mufdlilah, 2009). Coverage of antenatal care was monitored through a new service visit pregnant women K4 and K1 to antenatal care according to standards at least four times (K4). Coverage in Indonesia (K4) of pregnant women in 2013 amounted to 86.85% decline in 2014 is 86.70%, the national strategic plan has not achieved the target of the Ministry of Health in the amount of 95% (Profile Ministry of Health, 2014). The range of indicators ANC Bantul Regency of Yogyakarta Province in 2014 has K1 and K4 coverage is low. Bantul Regency has a number of 100% coverage of K1 and K4 89.4%, thus still has not reached the national target (DIY Health Office, 2015). The above data illustrates that compliance is still low ANC.

At first, the expected normal pregnancy can develop into a pregnancy pathology. Then the need to improve primary health care for pregnant women to improve the ANC is complete and standards-compliant.

A result that occurs when did the ANC in an irregular manner can cause problems that occur in the mother's pregnancy, are at risk of physical and mental health of mother and fetus, complications may occur during pregnancy, did not prepare for childbirth term, difficult delivery, stillbirth, increased maternal morbidity and mortality, even a severe impact on maternal and infant mortality (Purwaningsih, 2010).

The government has established maternal and child health programs included in Safemotherhood and the Millennium Development Goals (MDGs), aim to improve maternal health with the target of reducing the Maternal Mortality Rate (MMR) by reducing the MMR. It has been established also in the Minister of Health of the Republic of Indonesia No. 2562/MENKES/PER/XII/2011 explained that the minimum ANC 4 times during pregnancy.
Regularity ANC are influenced by several factors, parity, age, knowledge, attitudes, economic, social, cultural, geographic, and support the husband. Factors knowledge is one very important factor in the ANC visit, because it can detect early signs and symptoms of pregnancy complications and diseases that accompany pregnancy that a pregnant woman may ANC visit regularly. Parity is also a factor influence the ANC. Mothers who have higher parity, the higher the risk of maternal death, and therefore pregnant women are motivated to check or ANC visit regularly.

Based on the background of the problem, the researcher interested to know the correlation between knowledge and parity status with the regularity of visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul.

RESEARCH METHOD

This research is analytic survey with cross sectional approach that is independent and dependent variables only been observed and taken one course at a time when the research (Notoadmodjo, 2012). The location of research in Panembahan Senopati Hospital Bantul. The study population was post partum mothers who were treated at the Ward Alamanda of Panembahan Senopati Hospital Bantul, sample of 65 respondents using Incidental Sampling. The instrument used was a questionnaire for the independent variable level of knowledge and parity status, and the dependent variable studied from books KIA mother. Data collected in the study are primary data. Analysis of this study used univariate and bivariate with Chi Square test.

RESULTS AND DISCUSSION

1. Characteristics of Sample

Characteristics of respondents were observed in this study included age, education, and occupation of respondents. Distribution of frequency and percentages can be seen as follows:

Age of mother

Characteristics of respondents by age is presented in Table 1, as follows:

<table>
<thead>
<tr>
<th>No</th>
<th>Age</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20-25 years</td>
<td>19</td>
<td>28.8</td>
</tr>
<tr>
<td>2</td>
<td>26-30 years</td>
<td>20</td>
<td>30.3</td>
</tr>
<tr>
<td>3</td>
<td>31-35 years</td>
<td>26</td>
<td>39.6</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 1 show the age group of post-partum mothers in Panembahan Senopati Hospital Bantul. At most that amount age 31-35 years as 26 respondents (39.6%), while the age group least of 20-25 years were 19 respondents (28.8%).
Education of mother

Characteristics of respondents by education is presented in Table 2, as follows:

### Table 2. Frequency Distribution of Respondents by Education in Panembahan Senopati Hospital Bantul

<table>
<thead>
<tr>
<th>No</th>
<th>Education</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Elementary</td>
<td>12</td>
<td>18.2</td>
</tr>
<tr>
<td>2</td>
<td>Junior</td>
<td>21</td>
<td>31.8</td>
</tr>
<tr>
<td>3</td>
<td>Senior</td>
<td>25</td>
<td>37.9</td>
</tr>
<tr>
<td>4</td>
<td>Diploma/Sarjana</td>
<td>7</td>
<td>10.6</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 2 shows that the majority of respondents education is Senior High School graduated of 25 (37.9%) and least Diploma/Sarjana graduated of 7 (10.6%).

Occupation

Characteristics of respondents based on the occupation presented in Table 3, as follows:

### Table 3. Frequency Distribution of Respondents by Occupation in Panembahan Senopati Hospital Bantul

<table>
<thead>
<tr>
<th>No</th>
<th>Occupation</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Labor</td>
<td>4</td>
<td>6.1</td>
</tr>
<tr>
<td>2</td>
<td>Housewife</td>
<td>19</td>
<td>28.8</td>
</tr>
<tr>
<td>3</td>
<td>Farmer</td>
<td>11</td>
<td>16.7</td>
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<tr>
<td>4</td>
<td>Entrepreneur</td>
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</tr>
<tr>
<td></td>
<td>Total</td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 3 shows that job most respondents as the Entrepreneur which 29 (43.9%) while the least as PNS 2 (3.0%).
2. Univariate Analysis

a. Knowledge level of mother
Characteristics of respondents by the knowledge level of mothers are presented in Table 4, as follows:

Table 4. Frequency Distribution of Respondents by Knowledge Level of Mother About Pregnancy in Panembahan Senopati Hospital Bantul.

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge level</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
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<tbody>
<tr>
<td>1</td>
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<td>95.4</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 4 shows the knowledge level is divided into two, medium and high. Respondents who have medium level of knowledge were 3 (4.6%), while 62 (95.4%) have high knowledge.

b. Parity Status
Characteristics of respondents by parity status are presented in Table 5, as follows:

Table 5. Distribution of Respondents by Status Parity in Panembahan Senopati Hospital Bantul.

<table>
<thead>
<tr>
<th>No</th>
<th>Parity Status</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Primiparous</td>
<td>21</td>
<td>31.8</td>
</tr>
<tr>
<td>2</td>
<td>Multiparous</td>
<td>44</td>
<td>66.7</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 5 shows the parity status are grouped into two categories, are primiparous and multiparous. Category primiparous if maternal first time, of the 65 respondents who have the status of primiparaous were 21 (31.8%). While the category of maternal multiparaous if more than one time, as many as 44 (66.7%).

c. Regularity Antenatal Care (ANC) Visit
Characteristics of respondents based on the regularity of ANC are presented in Table 6 as follows:

Table 6. Distribution of respondents by Regularity ANC visits in Panembahan Senopati Hospital Bantul.

<table>
<thead>
<tr>
<th>No</th>
<th>Visit</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Regular</td>
<td>39</td>
<td>59.1</td>
</tr>
<tr>
<td>2</td>
<td>Irregular</td>
<td>26</td>
<td>39.4</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>65</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2016

Table 6 shows respondents who regularly visits Antenatal Care (ANC) 39 (59.1%), while respondents who do not regularly visit Antenatal Care (ANC) were 26 (39.4%).
Result Analysis Relationship of Knowledge Level with regularity ANC on Pregnancy in Panembahan Senopati Hospital Bantul

Table 7. Result Analysis Relationship of Knowledge Level with the Regularity ANC on Pregnancy in Panembahan Senopati Hospital Bantul

<table>
<thead>
<tr>
<th>Variable</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnant mother’s knowledge regularity of ANC</td>
<td>0.030</td>
</tr>
<tr>
<td>Contingency Coefficient</td>
<td>0.269</td>
</tr>
</tbody>
</table>

Table 7 shows that the p-value less than 0.05, it can be stated hypothesis was accepted, and the results of the Contingency Coefficient at 0.269 that there is a weak relationship between the knowledge level of pregnant women with regularity ANC visits in Panembahan Senopati Hospital Bantul.

b. Results Analysis Relationship of Status Parity with the Regularity of the ANC on Pregnancy in Panembahan Senopati Hospital Bantul

Table 8. Results Analysis Relationship of Status Parity with the Regularity of the ANC on Pregnancy in Panembahan Senopati Hospital Bantul

<table>
<thead>
<tr>
<th>Variable</th>
<th>P Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parity Status Regularity of ANC</td>
<td>0.290</td>
</tr>
</tbody>
</table>

Table 8 shows that the p value greater than 0.05, it can be stated hypothesis is rejected, there is no relationship between parity status with regular ANC in Panembahan Senopati Hospital Bantul.
Discussion

a. Relationship of Knowledge Level with the Regularity ANC on Pregnancy in Panembahan Senopati Hospital Bantul

Knowledge is the result of out and going after people perform sensing of an object (stimulus) certain. Sensing occurs through the human senses, the senses of sight, hearing, smell, taste, and touch (Ariani, 2014). Knowledge of pregnant women about pregnancy ANC is a visit that includes understanding, purpose, benefits, execution time, result or impact if not done regularly visits.

Based on the results of statistical analysis using Chi-Square formula obtained by value $p = 0.269$ which indicates $p < 0.005$ so that rejected $H_0$ and accepted $H_a$ with interpretation “There is a relationship level of knowledge with regularity visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul”.

In this study discussed the relationship the level of knowledge with regularity of visits Antenatal Care (ANC) in pregnant women. Assuming a pregnant woman who has knowledge of Antenatal Care (ANC) will affect the regularity of visits Antenatal Care (ANC). The results of the analysis conducted on the level of knowledge acquired Antenatal Care (ANC) was high with inspection visits Antenatal Care (ANC) regularly.

Results of statistical test Chi Square got value $p$ of 0.269 between 0.20 to 0.399 means there is a low correlation between the two variables. Thus the conclusion of the study there is a relationship level of knowledge with regularity visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul.

Low level of coefficient correlation in this study can occur because of a job. Respondents who mostly have a high level of knowledge about Antenatal Care (ANC) can be caused by job status. Respondents in this study were mostly working as entrepreneur as many as 29 (43.9%). Sebagaimana the majority of respondents worked as an entrepreneur so that the respondent had a busy time or a little to find the information as much as possible rather than as a housewife, who have more free time (Notoadmodjo, 2007).

Relationship of Status Parity with the Regularity of the ANC on Pregnancy in Panembahan Senopati Hospital Bantul

Parity is the number of children born to mothers either alive or dead. Parity is not safe for pregnant and giving birth is a first pregnancy and high parity (over 3), 2-3 parity is the most secure parity terms of the maternal mortality (Fitriana, 2009).
Based on the results of statistical analysis using Chi-Square formula obtained by value p = 0.290 which shows p> 0.005 so that rejected H0 with interpretation “There is no relationship between parity status with the regularity of visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul. This is due to the proportion of pregnant women who use antenatal care with parity status multiparous regularly (44.6%) is not much different from the parity status primiparous regularly (15.4%). This is due to the proportion of pregnant women who use antenatal care with parity status multiparas regularly (44.6%) is not much different from the parity status primiparas regularly (15.4%). Likewise, the proportion of pregnant women with irregular status multiparous (23.1%) is not much different from the parity status primiparous irregular (16.9%) with the regularity of visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul.

CONCLUSIONS AND RECOMMENDATIONS

Based on the results of research on mother's level of knowledge of almost all respondents have a high level of knowledge in the regularity of visits Antenatal Care (ANC). The majority have a status multiparous, regularly visits Antenatal Care (ANC); there is a low relationship between the level of knowledge with regularity of visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul, and there is no relationship status parity with the regularity of visits Antenatal Care (ANC) for pregnant women in Panembahan Senopati Hospital Bantul.

From these results, it is expected that health workers to improve the provision of information to pregnant women about the importance of the implementation of the ANC during pregnancy regularly.

REFERENCES


