

Pregnant Woman is not the Decision Makers of Utilization of Antenatal Care in Tambakrejo, Surabaya, East Java

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Abstract- Antenatal Care (ANC) is a pregnancy test performed to optimize the mental and physical health of pregnant women. The low utilization of ANC in primary health care by pregnant women is one of the causes of high maternal mortality rate and infant mortality rate at Tambakrejo primary health care in Surabaya. The purpose of this study is to analyze social support in improving the utilization of ANC as an effort to decrease infant mortality rate in Tambakrejo primary health care, Surabaya, East Java. This research is analytic observational research with crosssectional study design. The sample size is 28 pregnant women in Tambakrejo primary health care working area was taken using simple random sampling technique. The results showed that parents of pregnant women (mothers) were the most supportive supporters (96,4%), 71.4% of pregnant women's decisions based on their husbands and the majority of pregnant women had performed first visit antenatal care (K1) and fourth visit antenatal care (K4) in Tambakrejo primary health care. Significant social support affecting the utilization of ANC service in primary health care are husband ($p = 0.033$ B = 987) and parents of pregnant women ($p = 0.023$ B = 1,312). It can be concluded that social support comes from husband and parents have an influence on maternal decisions in utilizing ANC services at Tambakrejo primary health care as compared to supporters outside the family (cadres, public figures, and midwives).

Index Terms-antenatal care, pregnant women, social support, and utilization

1. INTRODUCTION

Infant mortality is an important indicator as a reflection of the children health status. Meanwhile, the infant morbidity rate is one reflection of the weakness of infant and young infant growth^[13]. The infant mortality rate in Indonesia has decreased by 3.8% from 2015 (33,278) to 2016 (32,007) but remains high. East Java province is included in the top 10 regions with the highest Infant Mortality Rate (IMR) in Indonesia. The city of Surabaya which is the capital of the province has an IMR of 6.39 per 1,000 live births^[12].

Based on data from Surabaya Health Office Profile indicate that in Central Surabaya area is an area with infant mortality that has increased from 23 babies (2015) to 27 babies (2016). Central Surabaya region has four subdistricts and eight health centers. Tambakrejo primary health care is a health center with the highest number of infant mortality number three (5 babies) in Central Surabaya area and with the highest number of stillbirths for three consecutive years compared with Health Center of Surabaya Center^[12].

Infant Death is caused by a variety of causes including IUFD, afiksi, low birth weight baby, and kongenital. Based on the results of interviews conducted on health workers. The cause of death of the biggest babies at Tambakrejo primary health care is kongenital and afiksi. The cause of infant mortality is possible due to mothers who have a high risk of

pregnancy such as lack of protein energy, low Hb, obesity, etc. Handling of maternal risti will not maximal if not do visit of Antenatal Care (ANC) with precise and routine. The coverage of first visit antenatal care (K1) and fourth visit antenatal care (K4) can be a trigger for infant mortality indirectly. Outcomes of the achievement of the Maternal and Child Health (MCH) Program associated with ANC are K1 and K4 reported by the MCH program midwife in primary health care to the districts / municipalities in the form of Local Mental Health Monitoring reports. Tambakrejo is primary health care with coverage of K1 decreasing average 8,09% and coverage of K4 has decreased average equal to 7,28% from year 2014-2016 and the lowest coverage of K1 compared to other primary health care.

There are several factors that may affect and influence the utilization of ANC services including K1 and K4 visits. The results of research conducted by Sari, Fitriana, and Anggraini (2015) indicate that there is a significant relationship between education, knowledge, parity, social support (husband support), and family income with the utilization of antenatal care. A total of 68.47% of husbands lacking support to their wives had an effect on the mother's desire to pregnancy check^[11]. Husband's support can serve as a preventive strategy to reduce stress and its negative consequences^[4].

The purpose of this study is to analyze the Social Support in improving the utilization of ANC as an effort to decrease the number of infant mortality in Tambakrejo primary health care work area, Surabaya, East Java.

2. RESEARCH METHOD

This is analytic observational research with cross sectional design. This research located in Tambakrejo sub-District, Surabaya study was conducted in Tambakrejo Primary health care from April to May 2017. Samples to be taken in the study using simple random sampling technique that is as many as 28 midwives. Data collection technique in this research is using primary data about social support and utilization of midwives. Data analysis performed includes crosstabs and linear regression analysis.

3. RESULT

3.1. Social Support

Social Support's description of pregnant women is indicated of the support provided by husbands, families, neighboring cadres

Table 1. Distribution of Social Support in Pregnant Women at Tambakrejo Primary Health Care

Supporter	Social Support				Total	
	Doesn't Support		Support			
	n	%	n	%	n	%
Husband	3	10.7	25	89.3	28	100
Parents	1	3.6	27	96.4	28	100
Cadre	2	7.1	26	92.9	28	100
Neighbour	5	17.9	23	82.1	28	100
Public figure	4	16.7	24	83.3	28	100

Based on Table 1 shows that parents are the most frequent supporters of pregnant women (96.4%) compared with husbands and community support factors for visits to ANC services. The most societal factor supporting pregnant women to visit ANC is cadres (92.9%). This indicates that pregnant women who visited ANC at Tambakrejo Primary health care received support from relatives and the community.

Support to pregnant women may not necessarily be a party adopted for decision making of pregnant women in an ANC visit at Tambakrejo primary health care. Someone that every pregnant woman believes in making decisions is different. The decision of pregnant women to visit the ANC service at Tambakrejo primary health care is Husband (71.4%). In addition, 28.6% of pregnant women rely on parents / family decisions. This indicates that the decision taken by pregnant women to conduct ANC visit at

Tambakrejo primary health care depends on husband and parents / relatives.

3.2. Utilization of ANC

K1 visit is the first visit of pregnant women at Tambakrejo primary health care when the gestational age is less than 14 months at least 1 visit. K4 visits are visits made by pregnant women at 28-42 months gestational age with frequency 2 times. Overview of K1-K4 visits conducted by pregnant women at Tambakrejo primary health care can be seen in table 3.

Table 2. K1-K4 visits conducted by pregnant women at Primary health care Tambakrejo

Visits	n	%
K1		
Not visits	5	17,9
Visits	23	82,1
K4		
Not visit	8	28,6
Visit	20	71,4

Based on Table 3 indicates that pregnant women in Surabaya primary health care have visited K1 more than those who did not visit. All pregnant women in Tambakrejo primary health care area in the third trimester have visited K4. This shows that Visits K1 and K4 are good enough but not all pregnant women visit ANC service (K1-K4).

3.3. Influence Social Support toward Utilization of ANC

The role of social support in the decision of pregnant women to utilize ANC services through K1 and K4 in primary health care can be seen by cross tabulation in table 3.

Table 3. Recapitulation of statistical test results

Social Support	Utilization		Information
	P	B	
Husband	0.033	987	Significant
Parents	0.023	1,312	Significant
Cadre	0.051	936	Not Significant
Neighbour	0.121	231	Not Significant
Public figure	0.061	873	Not Significant

Table 3 shows that the social support given by husbands and parents of pregnant mothers significantly influences pregnant women's decisions in utilizing ANC services at Tambakrejo primary health care of Surabaya with significance of 0.033 and 0.023 which is less than α (0.05). Parents of pregnant women have an influence of 131.2% and husbands have a 98.7% influence on maternal decisions in utilizing ANC services at Tambakrejo primary health care in

Surabaya. Social support from cadres, neighbors and community leaders (public figures) has no significant effect on the decisions of pregnant women in using ANC services at Tambakrejo Primary health care Surabaya.

4. DISCUSSION

Pregnancy is one form of change experienced by the majority of women in the world from who have no children to have children. The moment may affect the psychological woman for changes that occur for approximately 9 months 10 days^[1]. Not infrequently the majority of women who are pregnant have a fairly high anxiety^[9]. Such anxiety can disrupt the process of fetal development^[3]. Under these conditions, pregnant women need advice and support from family, husband and the environment^[1].

Social Support in this research is defined as a form of support given to pregnant women to be able to take advantage of ANC services in primary health care. The result of statistical analysis shows that social support given by husband and parents of pregnant mother have a significant influence on ANC utilization. This result is consistent with research conducted by Albertina, Sipasulta, and Nurhayati (2017), which states that support (support from family, friends, and social groups) significantly affects the utilization of antenatal care. Such support may increase the utilization of ANC by 19.1%^[1].

The decision makers of pregnant women to visit the ANC service at Tambakrejo primary health care are husband and parent (mother). This result is in accordance with the results of statistical tests showing that the support provided by husbands and parents of pregnant women has a significant influence on the utilization of ANC services. This indicates that support from the family (husband and parent) is the greatest support that can be a decision maker of pregnant women who may be due to pregnancy experienced by the majority of pregnant women is the first pregnancy. Research findings conducted by Ebuehi and Akintujoye (2012) shows that empowerment of pregnant women and husbands is an important and necessary effort to improve attendance and improve the utilization of ANC services. This suggests that the role of the husband is very important for pregnant women in using ANC services^[2].

Husbands in Indonesia have an important role in family development and decisions are included in the utilization of ANC services. The results show that support from husbands is the greatest support affecting maternal decisions in utilizing ANC services. According to Lewis, Lee, and Simkhada (2015), prospective fathers (husbands of pregnant women) have a very important role in health and safe deliveries. The involvement of a man in health and childbirth is more about the attitudes and changes that

occur in the family formed by many factors such as availability, cultural beliefs and traditions adopted^[7]. Required support from husband in the form of financial support, accompanying to ANC clinic and ensuring completeness of ANC visit^[6]. In addition, the husband can provide support in the form of attention, compassion, giving peace and attention can help the wife to avoid unwanted things such as depression that causes abortus^[1].

The results showed that the decision of parents, especially mothers of pregnant women to determine the decision in using ANC services. In accordance with the study Iseki and Ohashi mentions that the mother plays an important role in supporting her daughter, including when her daughter is pregnant and will give birth. The mother of pregnant women is considered as someone who has experienced in pregnancy so that it becomes the basis for decision making^[5]. This is in line with the results of research conducted by Rempel, Cender, Lynam, Sandor, and Farquharson (2004) which shows that pregnant women will seek advice on parents who are considered to have experience to make decisions related to the actions of prospective babies contained related antenatal care examination^[10]. Utilization of the same health service has the highest satisfaction level including in primary health care^[8].

5. CONCLUSION

In conclusion, parents (mothers) of pregnant women are the supporters most supportive of mothers in using ANC services, while the decision of pregnant women to perform K1 and K4 at the primary health care based on consideration of the husband. Social support that significantly affect the utilization of ANC service in Primary health care is husband and parent of pregnant mother. Social support from families (husbands and parents) has greater influence on maternal decisions in utilizing ANC services at Tambakrejo Primary health cares than with supporters outside the family (cadres, public figures, and midwives).

Acknowledgments

We are grateful for Primary health care of Tambakrejo and Health Office of Surabaya for providing us the data of ANC program. Additionally, the authors thank the respondent of this research for their time and contributions

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