

International Journal of Sciences: Basic and Applied Research (IJSBAR)

International Journal of
Sciences:
Basic and Applied
Research
ISSN 2307-4531
(Print & Online)
Published by:
LEBERT.

(Print & Online)

http://gssrr.org/index.php?journal=JournalOfBasicAndApplied

Effect of Pregnant Women in Class Activity to Knowledge Increase in Caring Pregnancy, Delivery, Postpartum and Newborn in Batua Health Centre Makassar

Theresia Limbong^{a*}, Anita Lontaan^b, Syaniah Umar^c

^{a,b,c}Department of Obstetrics Poltekkes Kemenkes Makassar and Petekkes Kemenkes Manado

^aEmail: theresia_dewarta@yahoo.co.id

Abstract

In order to reduce maternal mortality rate in Indonesia, the government has launched a program of Making Pregnancy Safer (MPS) since 2000. One of the MPS strategy is to encourage the empowerment of women and the family. The expected output of the strategy is to establish the husband's involvement in promoting maternal health and increasing active role of the family in pregnancy and childbirth. In order to improve the knowledge of pregnant women about maternal and child health, have conducted health education of mothers and children through individual consultations during the antenatal or at Posyandu activities, but not optimal because the knowledge gained mothers confined to health problems experienced during the consultation. One effort to overcome the weaknesses of the established activities of the study groups of pregnant women who referred to a class of pregnant women. The aim of research to determine the effect of pregnant women classroom activities with an approach different methods to increase knowledge about prenatal care, childbirth, postpartum and newborn babies before and after intervention in Batua Regional Health Center, Makassar. This type of research "quasi" with a pretest-posttest design with control group design. The number of samples is 30 people, divided into three groups: simple method, the standard method and the modified method. The primary data by distributing questionnaires to pregnant women each meeting, given before and after class pregnant women.

*	Corresponding author	

There's research found no differences between the mean increase knowledge on classroom activities pregnant women with a simple method approach, the standard method and the modified method of prenatal care, childbirth, postpartum and newborn babies before and after the intervention. Expected classroom activities pregnant women are given regularly by health workers and more effectively increase knowledge when using the modified method is lecture, use KIA book, brain storming and conduct orientation in the delivery room, but must be conditioned to the situation in the health center.

Keywords: Pregnancy Classes; Methods Simple; Standard and Modified.

I. Introduction

Problems maternal and child health (MCH) that impact on maternal and infant mortality is still a health problem in Indonesia, so the health development program priority on efforts to improve health status, especially on the most vulnerable groups of health, namely pregnant women, maternity and postpartum and Perinatal baby. Results Indonesian Demographic and Health Survey (IDHS) showed that the MMR of 228 per 100,000 KH, later in 2012 [1,2]. AKI increased to 359 per 100,000 KH, infant mortality rate (IMR) in particular newborn mortality rate 20/1000 live births. The direct causes of maternal mortality is mainly due to bleeding (30.3%), hypertension (27.7%), obstructed labor (1.8%), Miscarriage complications (1.6%), and prolonged labor (9%) [2]. Maternal mortality is still widespread due to the risk factors are not directly in the form of delays (three late), which is too late to take decisions and to recognize the danger signs, late referenced, and the delay in medical treatment [1]. This is caused by the helplessness and lack of knowledge a mother in maternal health care as well as the introduction of the danger signs of obstetric and neonatal, so will hinder a decision to be taken.

In order to improve the knowledge of pregnant women about maternal and child health, then do a maternal and child health counseling through individual consultations or case by case basis at the time of antenatal or at Posyandu activities. Yet it cannot be implemented with the optimal given the knowledge gained mothers confined to health problems experienced during the consultation .One effort to overcome the weaknesses of the established activities of the study groups of pregnant women who are called classes for pregnant women. which aims to improve knowledge and skills among other mothers about pregnancy, prenatal care, childbirth, postnatal care, newborn care. , The project used a standardized method that discuss KIA book material in the form of face to face in the group that followed the discussion and exchange of experience between the pregnant mother / husband / family and health workers [2,3].

Based on the survey results and interviews with Puskesmas workers Batua obtained information that classroom activities expectant mother has been carried out but not optimal because of concern or compliance mother - a mother to attend the event is still lacking, so that a simple way of providing counseling individuals to pregnant women who come checkup in PKM or IHC.

This research will add the approach used is a modified method by adding a class activity of pregnant women who had standard with spatial orientation in the delivery room to get to know the conditions and tools which

must be present in the delivery room to minimize level of anxiety in the mother during give birth later. Noting this, the researchers are interested in examining the "Influence of classroom activities to increase knowledge of pregnant women about prenatal care, childbirth, postpartum and newborn using a variety of methods approach, the method is simple, standard and modified" in Batua Regional Health Center Makassar.

2. Materials and Methods

This type of research is the study of interventions in the group of pregnant women using the method of "quasi-experimental" design with pretest-posttest control group design "that measurements made on the group pre and groups post either on a simple method, the standard method or a modified method which aims to see an increase in knowledge as a result of the intervention. The design of the design can be seen as shown below:

$$O_1$$
 ______ X_1 ______ O_2
 $R: O_3$ ______ X_2 ______ O_4

Information:

Metode1 (simple method) is a classroom activity with a pregnant woman approaches extension methods, use KIA book

Method 2 (standard method) is a classroom activity with a pregnant woman approaches a lecture, discussion, question and answer, demonstration using the media to learn flipchart, and MCH Handbook

Method 3: (a modified method) is an activity class of pregnant women with the approach of lectures, question and answer discussion and practice using a flip chart, material, method of brainstorming and sharing the experience of mothers who have never had the experience of childbirth further socialization room delivery room as well introduction of tools used during labor and delivery room to introduce to the clerk.

The population in this study were all pregnant women who are in the working area of Puskesmas period from January to May 2016 a total of 314 people, and the unit of analysis is a member of the population of pregnant women aged 20-32 weeks Large sample for this study was estimated using a formulation of Stanley Lemeshow [4], is obtained for each group of 10 people.

Data obtained from the initial questionnaire activities (pretest) and the end of the activity questionnaire (posttest), from each group then sought an increase in the value of knowledge of pregnant women, by the way value less the value pretest posttest. The data were analyzed using univariate and bivariate.

3. Results

1. Knowledge of pregnant women before being given intervention

 Table 1: Distribution of Average of knowledge about Pregnancy, Childbirth, Postpartum and Newborn

 before Class Activity

Knowledge pregnancy mother	Simple	Standard	Modification
Pregnancy	5.6	6.6	7.9
Labor	6.0	7.6	7.9
Postpartum	5.1	6.8	7.9
Newborn baby	6.6	8.3	8.3

2. Average knowledge of pregnant women after a given intervention

Table 2: Distribution of Average knowledge about Care Pregnancy, Childbirth, Postpartum and Newborn after Class Activity

Knowledge pregnancy mother	Simple	Standard	Modification
Pregnancy	6.9	8.2	9.5
Labor	6.6	8.0	9.1
Postpartum	6.7	8.3	9.5
New born baby	7.5	8.3	9.3

3. The difference between Knowledge and Improved Methods Group Standards and Methods group Modifications

Table 3: Differences and Increased Knowledge of Care Pregnancy, Childbirth, Postpartum and Newborn between Standard method Group and Modification after Class Activity

Knowledge pregnancy mother	Standard	Modification	р
	(mean rank)	(mean rank)	
Pregnancy	6.75	14.25	0.003
Labor	7.50	13.50	0.023
Childbed	6.75	14.25	0.003
Newborn baby	7.25	13.75	0.011

 $p=0.000 < value \ \alpha = 0.05$

4. Differences between the Group and Knowledge Enhanced Simple Method, Standard

Methods Group and Group Modification Method

Table 4: Difference Increasing Knowledge of Care Pregnancy, Childbirth, Postpartum and Newborn Between Simple Methods Group, Standard and Modified After Class Activity

Knowledge pregnancy mother	Simple	Standard	Modification	
	(mean rank)	(mean rank)	(mean rank)	p
Pregnancy	7.15	15.10	24.25	0.000
Labor	7.10	16.00	23.40	0.000
Postpartum	6.95	15.30	24.25	0.000
Newborn baby	7.75	15.00	23.75	0.000

 $p=0.000 < value \alpha = 0.05$

5. The difference between the Group and Knowledge Improvement Simple Method, Standard Methods Group and Group Modification Method

Table 5: Differences Increased Knowledge of Care Pregnancy, Childbirth, Postpartum and Newborn Between Simple Methods Group, Standard and Modified After Class Activity

Knowledge	Simple	Standard	Modification	
mother pregnancy	(mean rank)	(mean rank)	(mean rank)	P
Pregnancy	7.15	15.10	24.25	0.000
Labor	7.10	16.00	23.40	0.000
Postpartum	6.95	15.30	24.25	0.000
Newborn baby	7.75	15.00	23.75	0.000

 $p=0.000 < value \alpha = 0.05$

4. Discussion

4.1 Knowledge of pregnant women before and after a given intervention

Factors influencing knowledge is information that the majority of pregnant women do not know about prenatal care, childbirth, postpartum and newborn before being given the information by a midwife. Descriptive average level of knowledge of pregnant women prior to intervention by a third group is almost the same, look at the average value of the knowledge on the three types of methods are 5-6, but the method of standard and modified with the highest score is 8.3 and the lowest on a simple method that is 5.1.Classroom activities is an effort to

improve the knowledge of pregnant women pregnant women classes. This activity will cover topics KIA book in the form of face to face in the group that followed the discussion and exchange of experience between the pregnant mother / husband / family and health care workers.

The mean knowledge of the descriptive analysis of pregnant women after the intervention were given to all three groups increased, looks mean increased knowledge of the highest in the group of modifications 9.5 and the lowest in the group with average knowledge of a simple method that is 6.6. The results are consistent with research Anita, [5] at Teling health centre, Manado, which concluded that pregnant women There is a difference of knowledge about childbirth and parenthood in the control and intervention groups before and after training classes Pregnancy.

4.2 The difference and the mean increase knowledge among groups of simple methods, standardized methods and group methods Modifications

The existence of a class of pregnant women is expected to increase the knowledge of pregnant women that can be done with simple methods that lecture, by using KIA book while standard methods will discuss the book material KIA and flipchart in the form of face-to-face in the group that followed the discussion and exchange of experience between mothers pregnant / husband / family and health workers KIA book. In theory the addition of a flip chart on the standard method is more effective to increase the knowledge of where the flipchart is one of the media used in health promotion to clients face-to-face and explain what the topic of conversation. This media is very effective because it contains informative information in the form of pictures or graphics that can be seen a client and contains information section contains material explanation of the picture that we can share with clients

Further analysis using One Way Anova statistical test showed that the value of $p = 0.000 < \alpha = 0.05$ which showed no significant difference between the increased knowledge on standard methods compared to simpler methods. While the analysis of knowledge gaps between groups of standard methods with groups of modified method obtained the average value of the group on a simple method was 6.95, the standard group 16:00 whereas in the group modified method 14:25 means the number of correct answers on the groups using the modified method more than the standard method, According Notoatmodjo [6], one of the efforts that the knowledge can be understood and impact behavior change is by using appropriate methods and brainstorming a health education methods that can be used for pregnant women knowledge .

Methods Brainstorming is an appropriate method to increase knowledge person especially pregnant women. Brainstorming is also known as brainstorming method or brainstorming. Brainstorming method is a form of discussion in order to collect ideas, opinions, information, knowledge, experience, of all the participants. Although this method is effective but takes a long time in every classroom activities for pregnant women. Barriers to research in the implementation of the class action by various methods is the lack of willingness of expectant mothers to gather at the agreed time, the lack of participation of cadres for collecting pregnant mothers to do the class of pregnant women although generally cadres are not professionals but merely assist in health care so that they expected capable in solving common problems that occur in the community and urged to

be resolved such as pregnant women invited to attend a class for pregnant women. It should be stressed that the community health worker was not working in a closed system, but they work and act as a principal health system. Therefore, they must be nurtured, guided and supported by skilled and experienced mentors [7].

Analyzing the mean value of all three methods are simpler method looks smaller than the standard method and the highest on the modification. It can be assumed that the more methods are added to each method intervention increasingly affecting pregnant women increased knowledge [8]. In the test to see differences in the three groups increased knowledge of the methods, the results of statistical analysis showed that the value of p = 0.000, which means there is a difference between knowledge of pregnant women who use a simple method to value the group average 6.95 standard method with the average value of the group 16:00 and methods of modification by the average value of the group 24.25. Meanwhile, if viewed increased knowledge of the highest of the three methods is the modification group is 8:25, the standard group was 6.75 and simple group is 6.3. These results indicate a significantly increased the knowledge of pregnant women with different interventions starting from a low of the simple method then the highest standards and modifications.

5. Conclusion

- 5.1 There are differences between the mean increase knowledge on classroom activities pregnant women with a simple method of approach and standard method of prenatal care, childbirth, postpartum and newborn babies before and after the intervention.
- 5.2 There are differences between the mean increase knowledge on classroom activities pregnant women with standard methods of approach and a modified method of prenatal care, childbirth, postpartum and newborn babies before and after the intervention.
- 5.3 There are differences between the mean increase knowledge on classroom activities pregnant women with a simple method approach, the standard method and the modified method of prenatal care, childbirth, postpartum and newborn babies before and after intervention

References

- [1] IDHS, (2007)., Indonesian Demographic and Health Survey, Indonesia
- [2] Kesehatan Dasar (Riskesdas 2013). Jakarta: Kementerian Kesehatan RI
- [3] Kementerian Kesehatan Republik Indonesia (2015), Pegangan Fasilitator Kelas Ibu Hamil
- [4] Lemeshow, Stanley, 1997, Besar Sampel dalam Penelitian Kesehatan, Gadjah Mada University, Yogyakarta.
- [5] Anita, dkk (2013) Pengaruh Pelatihan Kelas Ibu Hamil Terhadap Peningkatan Pengetahuan Ibu Hamil Tentang Persiapan Persalinan Dan Menjadi Orang Tua Di Puskesmas Teling Kota Manado

- [6] Notoatmodjo, S(2011). Ilmu Kesehatan Masyarakat, Ilmu dan Seni. Jakarta : Rineka Cipta.
- [7] Syafrudin dan Hamidah, (2009), Ilmu Kebidanan Komunitas, Salemba Medika, Jakarta
- [8] Wawan, (2009), Pengukuran Pengetahuan dan Perilaku Manusia, Jakarta, Nuhamedik.