DOI: http://dx.doi.org/10.33846/hn20709 http://heanoti.com/index.php/hn



URL of this article: http://heanoti.com/index.php/hn/article/view/hn20709

The Role of Midwife in Community Empowerment About Early Detection of Pregnancy Complication in Proppo Public Health Center of Pamekasan

Yulia Paramita R^{1(CA)}, Yuly Peristiowati², Byba Melda Suhita³

Midwifery Study Program, Universitas Islam Madura, Indonesia; yuliayayan@gmail.com (Corresponding Author)
Postgraduate Program of Public Health Sciences, STIKes Surya Mitra Husada
Postgraduate Program of Public Health Sciences, STIKes Surya Mitra Husada

ABSTRACT

Every pregnant woman would face the risk of life-threatening complications. WHO estimated that about 15% of all pregnant women would develop into complications related to their pregnancies. The purpose of this research was to explore the role of midwife in community empowerment about early detection of pregnancy complication at Proppo Public Health Center of Pamekasan Regency. This research was a qualitative research. Data collection using primary and secondary data and conducted in-depth interview. Respondent in this research was village midwife at Proppo Public Health Center as many as 17 people. The results showed that midwife's role in community empowerment about early detection of pregnancy complication at Proppo Public Health Center was varied. Village midwives at Proppo Public Health Center served as educators, counselors, facilitators are possible depending on the level of knowledge and education of the community include cadres, community leaders, pregnant women and families. Based on this research, socio-cultural role is very influential on the pattern of empowerment. So it needs to be studied more deeply about socio-cultural factors in relation to community empowerment about early detection of pregnancy complications.

Keywords: midwife; pregnancy; complication; society

INTRODUCTION

Pregnancy is the growth and development of the intra uteri fetus from the moment of conception and ends until the onset of labor. Growth and development of pregnancy determine the health status of pregnant women and the output of pregnancy. Every pregnant woman will face the risk of life-threatening complications. At present every minute of every day, a mother dies due to complications related to pregnancy, labor and post labor. The World Health Organization (WHO) reports 500,000 deaths per year, 99% of which occur in developing countries. Indicator of health and welfare status of the community is the number of maternal and perinatal deaths. While in Indonesia the figure is still high.⁽¹⁾

Maternal death by WHO definition is death during pregnancy or within a period of 42 days after the end of pregnancy, due to all causes associated with or aggravated by pregnancy or treatment, but not caused by injury. WHO estimates that about 15% of all pregnant women will develop into complications related to pregnancy, and can be life-threatening. In Madura Island Mother's Mortality Rate is still high, one of them in Sampang District, from 16,707 live births in Sampang, there are 27 mothers who died during childbirth. That number for the last two years ie in 2016 there are 14 mothers and in 2017 there are 13 mothers. (3)

Based on Health Profile of Proppo Public Health Center in October 2017, the total number of pregnant women found who have high risk as many as 138 people from 528 person. Based on the preliminary study of high risk pregnancy as many as 138 known as 116 pregnant women detected by the midwife and 22 pregnant women detected by the community. This figure is still below the government's target of 80%. Based on the results of interviews on 6 communities it is known that 2 people said doing screening detection of pregnancy complication with midwife, 4 people did not do the screening with reason not know about pregnancy risk.

Factors influencing community participation in early detection of pregnancy risk are the first internal factors that include age, education, knowledge, experience and rewards, and the two external factors that include environment, counseling, mass media and socio-culture. Pregnancy complications that are not detected early will

continue to be a serious complication that will threaten the mother and fetus so as to increase morbidity and mortality of mother and fetus.⁽⁴⁾

The role of the community in the antenatal care program (ANC) in Posyandu has a very essential meaning in efforts to reduce MMR and IMR in Indonesia. The role of the community is the involvement of participative health cadres in Posyandu where the role of cadre is to support efforts to reduce the number of inadequacy of K1 and K4 services of missed (missed opportunity) in antenatal care.

Added also, that the role of health cadres in Posyandu has the essence that can not be released with health services, especially health services for mother and child. The role of cadres in Posyandu is counseling to religious leaders, community leaders, dukun, identification of pregnant women, performing PWS KIA, weighing Pregnant Woman, installing sticker P4K, giving KIA book to pregnant mother, recording and reporting KIA, pregnancy and others

Therefore, in order to accelerate the reduction of MMR and IMR, it is necessary to develop the posyandu function in the Maternity Prevention and Prevention Complications (P4K) Program through the role of health cadres to prepare for safe childbirth and prevention of complications for mothers and infants including the application of referral system. It is intended that there will be a paradigm shift in the society that had been a woman's problem is the problem of all parties

Based on the above background, researchers are interested to conduct research with the title "The Role of Midwives in Community Empowerment on Early Detection of Pregnancy Complications at Proppo Public Health Center of Pamekasan District".

The purpose of this research is exploring the role of midwives in community empowerment of cadres, community leaders, families and pregnant women on early detection of pregnancy complications at Proppo Public Health Center of Pamekasan

METHODS

Design the research was used in this study was a qualitative approach. The presence of the researcher explicitly illustrates the research report. The presence of the researcher was known as a researcher by the subject or informant. The location of this research in Proppo Public Health Center of Pamekasan Regency. Determination of the informant using sampling technique with purposive sampling method or if had reached the point of clarity then research could be stopped. Source of data in this research (informants) were midwives at Proppo Public Health Center which amounted to 17 people and had been willing to become informant for in-depth interview with semi structured interview method.

In this study the instruments were interview guidelines in the form of questions that would be asked researchers to respondents whose contents included the role of midwives in the community empowerment of early detection of pregnancy complications at the Proppo Public Health Center of Pamekasan District. Instruments were used by researchers were the interview sheet and mobile phone to record sound and took photos during research. The process of data analysis began by reviewing all available data from various sources, namely through interviews. Data analysis in qualitative research conducted at the time of data collection took place. At the time of interview, the researcher had done analysis to answer from informant. If the answer interviewed after being analyzed felt unsatisfactory, the researcher would continue the question again, to some extent so that the data were not saturated with the qualitative data analysis stages included, data reduction, data presentation and conclusion. The triangulation done in this research was using source triangulation technique. The triangulation informants in this study were cadres, community leaders, families and pregnant women.

RESULTS

Figure 1 shows that of the 17 respondents most respondents had age between 41-50 years (47%).

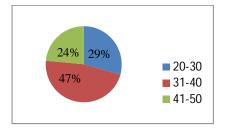


Figure 1. The distribution of age of respondents

Figure 2 shows that from 17 respondents most of the midwife educated Diploma 4 (53%).

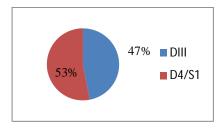


Figure 2. The distribution of education of respondents

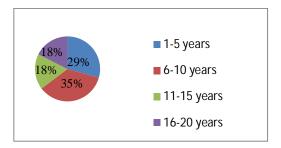


Figure 3. The distribution of years of service

Figure 3 shows that from 17 respondents almost half of it had years of service between 6-10 years (35%).

The Role of Midwives in Empowering Cadres and Community Leaders

The results of interviews to 17 informants showed that midwives played a role as communicators in empowering cadres and community leaders. Almost all cadres and community leaders were active and able to interact with midwives about the incidence of pregnancy complications.

"here the cadre is quite active, begin to understand if there is anything, immediately contact the midwife so have started to understand if here" (correspondent 17)

Obstacles the Midwife Found during Socializing with the Community

Obstacles found during socializing with the surrounding community about pregnant women information was known that there were still many people, especially pregnant women and families who were still afraid to be referred to the service. As disclosed informant as follows:

"sometimes there is a mother who stubborn hell if told to check to the doctor for usg, they say my child is small, maybe they are afraid of surgery" (correspondent 1)

Examination by the Midwife in the Current Pregnant Mother

Based on the results of the study explained that the examination on pregnant women such as, pregnant mothers class, integrated ANC, which cooperate with public heatlh center starting at 2017. Besides also routine checked every month in polindes and posyandu. It was as revealed by the informant as follows:

"now there is integrated ANC, you know..., laboratory examination P4K still exist, high risk pregnant women visit by midwife and accompanied by cadre usually, if there are pregnant women who do not check our visit also.." (correspondent 1)

Midwife Efforts to Mobilize Communities

Based on the results of the research explained that the efforts of informants to mobilize the community to detect the presence of pregnancy complications included giving counseling, refreshing cadres and SMD activities in the village and in PKK activities and provide continuous explanation to the community and pregnant women to always monitored the circumstances of pregnancy routine. This was revealed by the informant as follows:

"hmmm actually there is MMD, SMD there will be MMD, later talked about, counseling at posyandu, so notmmmm just counsefgling on pregnant women but all who attend at posyandu let know also what is high risk early detection" (correspondent 1)

Form Cooperation with Puskesmas in Pregnant Women with Pregnancy Complications

The guidance performed at the public health center related to pregnant women with complications included ANC integrated in which laboratory examination had been done. Like HiV, HbsAg, and others. This was in accordance with the disclosed informant as follows:

"usually there is a class of pregnant women, included in addition to gymnastics together, as well as pregnant women are invited here, there is an integrated ANC, for example when posyandu pregnant mother does not come then invited at the time of ANC as well as her laboratory examination" (correspondent 5)

Midwives Reward for People who do Early Detection of Pregnancy Complications

The informant stated that there was no special reward for community in this case cadre related detection of pregnancy complication. It's just as a form of gratitude informants to the cadres, each month the informant gave a gift taken from his personal funds. As revealed by the following informants:

"oh no we always deposit monthly reports, it's already our program, even though the high risk visit, this is not something new for us" (correspondent 1)

Midwives' Expectations in Motivating Society Efforts to Conduct Detection of Complications in Pregnant Women

The informants stated that there was a need for scientific improvement so that people could jointly detect and monitor if there were pregnant women with special symptoms. As informants stated 1-17 as follows:

"I hope there is an increase in science, yes that we can not alone, there must be a role of public health center, especially for cadres to give enlightenment such sciences may be more conscious, more spirit mom, you know that my role is not special build them, but it must be there teams from health centers in scientific, as long as it's a class of pregnant women more to pregnant women who were told" (correspondent 6)

DISCUSSION

The Role of Midwives in Empowering Cadres and Community Leaders

The theme of cadres and public figure role in pregnant women who have pregnancy complications. Response expressed in the active role of a diverse society to adjust to the main task and function. As one informant expressed that every society has its own roles, such as the following interview quotes:

"for example there are pregnant women who are not registered kis, ordered list, inevitably have to list here has been active and cooperative once "(correspondent 3)

"If in my opinion here it is quite active cadres, start to understand if there is anything, immediately contact the midwife. so sometimes here or by phone, but they are visiting, so have started to understand if here." (correspondent 17)

The length of village placement also affects the role of midwives in the community. Based on the results of the study showed that of the 17 informants almost half have occupied the village between 6 - 10 years as many as 6 respondents (35%). Working period is a process of formal education to change, improve, improve and develop the ability of personnel in a relatively short period of time that prioritizes practical knowledge so that personnel can perform the task assigned to him. ⁽⁵⁾

Midwives who occupy longer villages are expected to better understand their role as midwives in the implementation of the P4K program. These results indicate that the longer the working period in the village the higher the role of the village midwife.

Obstacles Found during Socializing with the Community

The obstacles that emerged to date are from the patient's family. According to one informant, the reason for the tradition of 'meeting' because the community does not want if the family or his pregnant mother to surgery. So they are still looking for solutions related to these problems by switching midwives. As quoted from one of the informants as follows:

"sometimes the community is like this if there is something that must be sent to the hospital is a long conversation, still counsel with the others" (correspondent 4)

U INDIANANI KANDANI KA

Family decision making in referring mother to hospital is a complicated decision making process and often involves several decisions. Families are considered to understand the problems faced by the mother. Therefore, there are still many people who wait for family decisions before taking action. However, the decision tends to be slow because it takes time to gather family members so it takes a long time to conduct deliberation. (4)

Examination by Midwives in Pregnant Women at this Time

Based on the results of research on the informants at Puskesmas Proppo known that the examination conducted on pregnant women include integrated ANC and pregnant mothers class and routine ANC examination is usually done both in polindes and in posyandu. It is based on the quotation of informants as follows:

"if to posyandu 1 month 1 time mbak, if ANC integrated it 1 year 2 times simultaneously with class of mother pregnant" (correspondent 1)

The role of midwives and communities in the implementation of Posyandu is very large because in addition as a health information providers as well as a community mobilizer to come to Posyandu. The success of Posyandu management requires strong support from various parties, both moral support, material, and financial. In addition it is necessary cooperation, pressure and devotion of its managers including cadres ⁽⁶⁾

One of the introduction of complications in pregnant women through early screening / early detection of pro-active risk factors for all pregnant women, by trained health or non-health workers in the community, such as PKK women, cadres, pregnant women, husband or family. Antenatal screening, through home visits, is the first step in maintaining the health of pregnant women and includes anticipatory efforts to prevent maternal deaths.

Midwife's Effort to Mobilize the Community

In performing the role of midwife educator has two important tasks. The first task is to provide education and counseling. The second task is to foster shamans and health cadres who are in the area of work. Based on the results of the research note that most informants have made various efforts to mobilize the community to participate in early detection of pregnancy complications. One of them is to educate about it in posyandu activities. As one informant discloses as follows:

"to mobilize the community, sometimes conducted extension during posyandu either individual or mass" (correspondent 4)

A good health promotion media is a medium capable of providing information or health messages in accordance with the target acceptance level, so that the target is willing and able to change the behavior in accordance with the message delivered. ⁽²⁾. The indicator of success in media selection and extension methods is that the presenter is very comfortable in delivering the material and the audience can understand the material presented by the extension agent.

Form Cooperation with Proppo Public Health Center in Pregnant Women about Pregnancy Complications

The role of Proppo public health center with regard to pregnant women who have complications only in integrated ANC program in which there is a pregnant mother class. Implementation of ANC which is done almost 2 times in a year has been done in all villages in the area of Puskesmas Proppo public health center. But sometimes the implementation of this integrated ANC can be done if the number of pregnant women meet the requirements required by the health center that is at least 5 people pregnant women. This is in accordance with the following informant quotation:

"if there have been 5 or more pregnant women, then the proppo public helath center come here to do integrated of ANC" (correspondent 3)

According to the Integrated Antenatal Service Guidelines, an integrated antenatal care standard has ten service standards to be performed by midwives or health workers known as "10T". The identification of the patient's condition in the context of early detection of accompanying illnesses in the implementation of ANC Integrated lies in the book "KIA" and Midwife as the implementer. All midwives know the purpose and benefits of risk detection in pregnant women and know that antenatal care according to the standard (10T) is a tool to perform such risk detection.

Rewards for Communities Doing Early Detection of Pregnancy Complications

There is no special reward for the community in the working area of the Proppo public health center. Because basically the election of the cadres is the task of the village apparatus so it must adjust to the village funds as well. Therefore, the village midwife in Proppo public health center still strives to provide some kind of services to the community who play an active role in improving health in the village in the form of free medication, gifts, etc. As revealed by some of the following informants:

"usually from midwife, preparation Eid, they and their family is free if check health" (correspondent 8)

Cash incentives greatly affect the performance of cadres as it increases the spirit of the cadre and becomes evidence of coaching from the puskesmas. Provision of such incentives have a positive effect, it is because the cadres are on duty not only when weighing the posyandu, but also before and after.

Midwives' Expectations in Motivating Society Efforts to Conduct Detection of Complications in Pregnant Women

The level of belief, the prevailing tradition is very influential on the health behavior of pregnant women. So if the community still adheres to the belief it is difficult to achieve optimal health levels. It will also affect later on the pattern of decision making in getting the right handling, according to the following informants disclosed:

"If prevention and treatment is done in a timely manner inshaAllah will reduce maternal mortality rate" (correspondent 14)

The existence of the family during pregnancy and birth affects the mindset of pregnant women. Although pregnant women have a high education but their behavior will still follow what is said by their families, so that pregnant women are not difficult to oppose it even though it is wrong according to health. Notoatmojo argues that some strategies for obtaining behavioral change are grouped into 3 groups and one of them is to provide information to generate their awareness and ultimately will cause others to behave according to their knowledge. (7)

CONCLUSION

The results showed that midwife's role in mobilizing the community in early detection of various pregnancy complications, from educators, counselors, facilitators, possible promoters depends on the level of knowledge and education of the community. So it is necessary to increase knowledge to msayarakat to understand and willing to assist in detection.

REFERENCES

- 1. Astuti S. Level of Antenatal Care Knowledge and Behavior of Pregnant Women to Pregnancy at Risk in Work Area of Jembrana Public Health Center in 2016. E-Jurnal Medika. 6(2):1-9.
- 2. Kemenkes RI. INFODATIN: Data and Information Center Ministry of Health Republic of Indonesia. Jakarta: Kemenkes RI; 2014.
- 3. Haryanto. Maternal Mortality Rate Still High at Sampang in 2017.
- 4. Fathoni, Rumintang, Hanafi. The Role of Cadres in Early Detection of High Risk Cases of Pregnant and Neonatal. Jurnal Kesehatan Prima. 2012;6(2):968-969.
- 5. Palutturi S. Determinant of Midwife Performance at Public Health Center in 2006. 2007;10(4):195-200.
- 6. Rodiyatun. Development of Participatory Learning Model to Increase the Achievement of the Midwife's Role as an Educator. Jurnal Penelitian Kesehatan Suara Forikes. 2016;7(1).
- 7. Notoatmodjo S. Health Promotion and Health Behavior. Jakarta: Rineka Cipta; 2014.
- 8. Badan Pusat Statistik (BPS). Indonesia Demographic and Health Survey in 2012. Jakarta: BPS; 2014.
- 9. Dewi AR, Nurdiamah E, Achadiyani. Establishment of Health Cadres To Increase Knowledge And Ability Of Cancer Early Detection that Occurred in Women in Sukamanah Village and Cihaurkuning Village, Malangbong Sub-District. Garut Regency. 2013;2(2):78-84.
- 10. Iswarawanti D. Posyandu Cadres: Roles and Challenges of Empowerment in Child Nutrition Improvement Efforts in Indonesia. Jurnal Manajemen Pelayanan Kesehatan. 2010;13(4):169-173.