THE RELATIONSHIP OF ATTITUDE OF PREGNANT MOTHERS WITH ANC (ANTENATAL CARE) COMPLIANCE

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ABSTRACT

Antenatal care (ANC) is carried out with the aim of monitoring before delivery, especially aimed at the growth and development of the fetus in the womb. The risk of maternal death during pregnancy can be anticipated by performing ANC. K1 and K4 visits are still low, this is related to the attitude of pregnant women to the importance of ANC. The purpose of the study was to determine the relationship between the attitudes of pregnant women and adherence to ANC visits. This type of research is descriptive analytic with a cross sectional. The time of the research was carried out in January-March 2022. The place of research was carried out in Karya Indah Village. The sample in this study were 30 respondents with total sampling technique. The research instrument used a questionnaire. Data analysis was carried out univariate and bivariate. Univariate results showed that the majority of respondents' attitudes were positive with a percentage of 62.5%. Bivariate analysis using Chi-square found, there was a relationship between attitudes towards ANC visits with p value (0.000 <0.05). It is expected that pregnant women will adopt a positive attitude to comply with ANC visits in order to improve the health and welfare of the mother and fetus.

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1. Introduction

Maternal Mortality Rate (MMR) is one indicator to see the success of maternal health efforts. According to WHO (2017) Maternal Mortality Rate (MMR) is caused by bleeding, infection and high blood pressure during pregnancy. In the world the Maternal Mortality Rate (MMR) is 810,000 people. As the SDG’s 2030 target of 70 per 100,000 live births. Maternal Mortality Rates (MMR) in ASEAN countries include Laos 185 per 100,000 live births, Myanmar 250 per 100,000 live births, Cambodia 160 per 100,000 live births, Indonesia 305 per 100,000 live births, and the Philippines 121 per 100,000 live births (Andini, 2020).

Antenatal care (ANC) is defined as supervision before delivery, especially aimed at the growth and development of the fetus in the womb. The purpose of Antenatal Care is to prepare pregnant women physically, psychologically and socially in the face of pregnancy, childbirth, postpartum and breastfeeding as well as strive for healthy babies born, readiness to face complications in pregnancy and overcome them. Based on program policies from the government, ANC visits to pregnant women were originally at least 4 times during pregnancy, but now according to the 2020 MCH book, it is at least 6 times during pregnancy, namely 2 times in the first trimester (pregnancy up to 12 weeks), 1 time in the third trimester. second (pregnancy 12 weeks to 24 weeks), 3 times in the third trimester (pregnancy above 24 weeks to 40 weeks) (Kemenkes RI, 2020).

K1 coverage is the number of pregnant women who have received antenatal care for the first time by health workers, compared to the target number of pregnant women in one work area within one year. Meanwhile, K4 coverage is the number of pregnant women who have received antenatal care in accordance with the standard at least four times according to the recommended schedule in each trimester, compared to the target number of pregnant women in one work area within one year. These indicators show access to health services for pregnant women and the level of compliance of pregnant women in checking their pregnancies to health workers (Indonesian Health Profile, 2020).
One of the lack of coverage of K4 visits for pregnant women is related to the mother’s attitude towards ANC visits. According to Hasana (2014) one of the factors for the low ANC visits is caused by the behavior of pregnant women who do not use ANC in health services, so that their pregnancies are at high risk. Even though the use of ANC services is very much needed by pregnant women. This is because ANC has the benefit of early detection of high risks of pregnancy and childbirth and can reduce maternal mortality and monitor the condition of the fetus. One of the SDG’s goals is to improve maternal and child health, which can be achieved by utilizing ANC services for pregnant women.

Based on the above background, researchers are interested in conducting research on the relationship between the attitudes of pregnant women and compliance with ANC (Antenatal Care) visits in Karya Indah Village, Kec. Tapung, Kab. Kampar.

2. Methods

This type of research uses descriptive analytic with a cross sectional namely to determine the attitude of pregnant women with ANC visit compliance. This research was conducted in January-March 2022 in Karya Indah Village, Kec. Tapung, Kab. Kampar. The population in this study were all pregnant women in the village of Karya Indah, the sampling technique in this study used total sampling with 30 samples in this study.

The instruments used in this study were attitude questionnaires and observation sheets to measure the regularity of ANC visits. Researchers measure ANC compliance by using the MCH handbook. The data analysis used in this study was univariate and bivariate.

3. Result and Discussion

### TABLE 1
DISTRIBUTION OF ATTITUDE FREQUENCY WITH COMPLIANCE WITH ANC (ANTENATAL CARE) VISITS IN KARYA INDAH VILLAGE

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive</td>
<td>20</td>
<td>62.5</td>
</tr>
<tr>
<td>Negative</td>
<td>12</td>
<td>37.5</td>
</tr>
<tr>
<td>Total</td>
<td>32</td>
<td>100</td>
</tr>
</tbody>
</table>

In table 1 it can be seen that the frequency distribution of the attitude of the majority of mothers is positive as many as 20 respondents with a percentage of 62.5%, and the minority is negative as many as 12 respondents with a percentage of 37.5%.

### TABLE 2
DISTRIBUTION OF THE FREQUENCY OF ANTENATAL VISITS ON COMPLIANCE WITH ANC (ANTENATAL CARE) VISITS IN KARYA INDAH VILLAGE

<table>
<thead>
<tr>
<th>Visits ANC</th>
<th>Frequency (f)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compliant</td>
<td>19</td>
<td>59.4</td>
</tr>
<tr>
<td>Non-Compliant</td>
<td>13</td>
<td>40.6</td>
</tr>
<tr>
<td>Total</td>
<td>32</td>
<td>100</td>
</tr>
</tbody>
</table>

In table 2, it can be seen that the distribution of the frequency of ANC visits is mostly compliant as many as 19 respondents with a percentage of 59.4%, and a non-compliant minority as many as 13 respondents with a percentage of 40.6%.

### TABLE 3
THE RELATIONSHIP BETWEEN THE ATTITUDES OF PREGNANT WOMEN AND COMPLIANCE WITH ANC (ANTENATAL CARE) VISITS IN KARYA INDAH VILLAGE

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Of ANC Visits</th>
<th>Total</th>
<th>P value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Obedient</td>
<td>Disobedient</td>
<td>f</td>
</tr>
<tr>
<td>Positive</td>
<td>17</td>
<td>89.5</td>
<td>3</td>
</tr>
<tr>
<td>Negative</td>
<td>2</td>
<td>10.5</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>100</td>
<td>17</td>
</tr>
</tbody>
</table>
In table 3. it is known that the attitude of the respondents is positive and obedient in making ANC visits as much as 89.5% less than non-compliance as much as 23.5%. The attitude of the respondents was negative and obedient in making ANC visits as much as 10.5% more than non-compliance as much as 76.9%. The results of the analysis showed that the P value was 0.000, which means that the P value <0.05, it means that there is a relationship between the attitudes of pregnant women and compliance with ANC (Antenatal Care) visits in Karya Indah village.

**Discussion**

Based on the research results show that the frequency distribution of the attitude of the majority of mothers being positive as many as 20 respondents with a percentage of 62.5%, and the minority being negative as many as 12 respondents with a percentage of 37.5%. Attitude is one of the most important aspects in understanding human attitudes and behavior. Attitude has a stronger character than just having knowledge. According to Sax in Azwar S. (2012) shows several characteristics of attitudes, namely: 1) Attitudes have direction, meaning that attitudes are disaggregated in two directions of agreement, namely whether to agree or disagree, whether to support or not support, whether to take sides or not to take sides with something or someone. as an object. People who agree, support and take sides with an attitude object have an attitude that has a positive direction and vice versa. 2) Attitude has intensity, meaning that the depth or strength of the attitude towards something is not necessarily the same even though the direction may not be different. 3) Attitudes have a broad, agreeable or disapproving attitude towards an attitude object, which can affect only a few and very specific aspects but can also cover many aspects of the attitude object. 4) Attitudes have consistency, meaning that there is a match between the attitude statement put forward and the response to the object of the attitude. Attitude consistency is shown by the suitability of attitudes over time.

From the information above, it turns out that attitudes have character, and the strength of character greatly influences a person's behavior. A person’s strong attitude to check himself (ANC) will bring real behavior in the implementation of ANC visits. The results of the analysis of the attitude of positive and obedient respondents made ANC visits as much as 89.5% less than non-compliance as much as 23.5%. The attitude of the respondents was negative and obedient in making ANC visits as much as 10.5% more than non-compliance as much as 76.9%. The results of the analysis showed that the P value was 0.000, which means that the P value <0.05, it means that there is a relationship between the attitudes of pregnant women and compliance with ANC (Antenatal Care) visits in Karya Indah village.

This is in line with Green’s theory in Notoatmodjo (2012) to show attitudes to be real actions, supporting factors or enabling conditions are needed. The supporting factors are: (1) predisposing factors (knowledge, attitudes, perception beliefs), (2) supporting factors (access to health services, skills and references), (3) driving factors manifested in the form of support from family, neighbors and public figure. Based on the theory of health behavior also explains that people who have experienced "illness" will behave better than people who do not experience "illness".

This is in line with the research conducted by Putriani (2016) with the title "The Relationship of Knowledge and Attitudes of Pregnant Women About Antenatal Care with Frequency of Antenatal Care Visits at Umbul Harjo 1 Health Center Yogyakarta”. Statistical test results obtained p value of 0.000 and the value of the correlation coefficient of 0.644.

Attitude is a reaction or response that is still closed from a person to a stimulus or object. Attitude is also a readiness or willingness to act and is also the implementation of certain motives. Attitudes are also influenced by external and internal factors, one of which is the experience of what we have experienced and are currently experiencing will shape and influence our appreciation of the stimulus.

This is in line with research conducted by Putriani, A. . (2016) with the research title Relationship of Knowledge and Attitudes of Pregnant Women About Antenatal Care with Frequency of Antenatal Care Visits at Umbul Harjo 1 Health Center Yogyakarta”. Statistical test results obtained p value of 0.000 and the value of the correlation coefficient of 0.644.

In line with the research conducted by Swandari, GC. (2017) with the research title "The Relationship of Mother’s Knowledge and Attitude with Antenatal Care Visits in the Work Area of the Lambuya Health Center, Konawe Regency in 2017". The results of the statistical test of knowledge and visit variables obtained the results of X²Count=0.0030.05, namely 0.955. The results of the
statistical test of the attitude and visit variables obtained the results of \( X^2 \) Count = 0.3100.05, namely 0.578.

According to the researcher’s assumptions, the formation of attitudes is influenced by personal experience, culture, other people who are considered important, the mass media, the institution or educational institution itself and religious institutions, as well as emotional factors within the individual. To increase the mother’s positive attitude towards the importance of Antenatal care, it can be done through health education, approaches to community leaders, religious organizations (recitations, Taklim assemblies, etc.). With the formation of a positive attitude towards the importance of ANC, pregnant women can carry out pregnancy checks on health workers so that they can monitor the condition of the mother and fetus, so that the coverage of K1 and K4 is achieved according to the target.

4. Conclusion

Based on the results of research on 30 respondents, it was concluded, The attitude of the majority of respondents were positive as many as 20 respondents with a percentage of 62.5% and negative attitudes as many as 12 respondents with a percentage of 37.5%. There is a relationship between attitude and compliance with ANC visits (Antenatal Care) in the village of Kelemantan, Bengkalis sub-district, Bengkalis district with a P value of 0.000.

5. References