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Anc Compliance As Viewed From The Knowledge Of Pregnant Women About The Danger Signs Of Pregnancy Trimester Iii In The The NgambonHealth Center Bojonegoro

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ABSTRACT

The high number of ANC non-adherence in pregnant women due to the lack of knowledge of pregnant women about the danger signs of third trimester pregnancy causes pregnant women to be reluctant to visit antenatal care to prevent and recognize the danger signs of pregnancy and seek health help to avoid morbidity and mortality. The purpose of this study was to analyze ANC compliance in terms of the knowledge of pregnant women about the danger signs of third trimester pregnancy in the working area of Ngambon Health Center, Bojonegoro Regency. In this study using an observational analytic design with cross sectional approach. The population in this study were 33 respondents with a sample size of 30 respondents. The sample in this study were all pregnant women in the working area of the Ngambon Community Health Center in Bojonegoro Regency with a sampling method using simple random sampling technique. Data collection using questionnaires and medical records (MCH Handbook). Bivariate analysis to see the relationship between the independent variables with the dependent variable using the statistical coefficient contingency test with a significant level $\alpha = 0.05$. The results showed there was a relationship between the knowledge of pregnant women about the danger signs of third trimester pregnancy with ANC compliance in the working area of Ngambon Puskesmas, Bojonegoro District, with a P value of $0.005 < \alpha (0.05)$ and r = 0.509, so H0 was rejected and H1 accepted, which means that there is a relationship between the knowledge of pregnant women about the danger signs of third trimester pregnancy with ANC compliance in Ngambon Health Center, Bojonegoro Regency, and the level of close relationship. Knowledge of pregnant women about the danger signs of trimester III pregnancy greatly affect ANC compliance in pregnant women.

Keywords: ANC Compliance, Knowledge of Pregnancy Danger Signs, Pregnant Women.

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INTRODUCTION

Pregnancy is a natural process that every woman will experience. The duration of pregnancy until term is 280 to 300 days or 39 to 40 weeks, so during this period pregnant women need proper supervision (Manuaba, 2010). Physiological changes during pregnancy, childbirth, postpartum and neonates can turn into pathological at any time, this arises due to many influencing factors, both the mother's/baby's own health and external factors including support for the mother. From every pathological condition during pregnancy, childbirth, postpartum and neonates, before an emergency occurs it will show a danger sign of the problem, which if detected early can save the lives of the mother and her baby (Sumarni, 2014).

Danger signs of pregnancy that may appear include vaginal bleeding, edema of the face and hands, high fever, ruptured membranes, decreased fetal movement, and persistent

vomiting. Actions that can prevent pregnant women from causing maternal death are carrying out pregnancy care, one of which is carrying out antenatal care (Isdiaty and Ungsianik, 2013). The high rate of non-compliance with ANC in pregnant women due to the lack of knowledge of pregnant women about the danger signs of third trimester pregnancy causes pregnant women to be reluctant to make antenatal care visits to prevent and recognize danger signs of pregnancy and seek medical help to prevent morbidity and mortality.

In 2018, K4 achievements in Indonesia amounted to 4,650,937 pregnant women (88.03%) of 5,283,165 pregnant women, in East Java Province of 627,901 pregnant women K4 coverage reached 572,025 pregnant women (91.10%) (Ministry of Health , RI., 2019), in Bojonegoro Regency the coverage of K4 was 15,929 pregnant women (87.01%) of 18,307 pregnant women. Meanwhile, based on the 2018 PWS KIA report at the Ngambon Health Center, K4 coverage reached 119 (71.69%) of 166 pregnant women, while in 2019 out of 162 pregnant women, 85 pregnant women (52.47%) did ANC K4 and those who did not perform ANC K4 as many as 77 pregnant women (47.53%). So that there was still a decrease of 19.22% from the achievement of K4 in the previous year. Based on a preliminary study conducted by interviewing 5 pregnant women about the danger signs of pregnancy with the results 2 pregnant women knew about the danger signs of pregnancy, and 8 people did not know about the danger signs of pregnancy.

Pregnant women who do not comply with ANC are influenced by external factors, lack of knowledge, mother's attitude, mother's perception, support from health workers, and family support. Lack of mother's knowledge about danger signs of pregnancy causes mothers not to check with health workers (Nurhidayah., 2013). The lack of knowledge that affects non-compliance with ANC is mainly due to the mother not knowing about the danger signs of pregnancy so that she thinks the signs and dangers of pregnancy are normal as discomfort during pregnancy. If the mother knows the danger signs of pregnancy from an early age, the mother will carry out pregnancy care, one of which will be obedient to the pregnancy check-up, so that if a danger sign occurs the treatment will be faster (Nurjasmi, 2016).

Efforts to improve health services, especially for pregnant women at the Ngambon Health Center in the future, are to improve the quality of services. Midwives have an important role in efforts to increase ANC compliance, namely by promoting or providing health education about ANC and motivating mothers and families about the importance of regular antenatal care. It is hoped that good quality ANC will be able to detect early any abnormalities that occur during pregnancy, and prevent the occurrence of complications.

Based on the background above, the researcher is interested in taking the research title "ANC compliance in terms of the knowledge of pregnant women about the danger signs of third trimester pregnancy in the working area of the Ngambon Health Center, Bojonegoro Regency".

METHODS

The research design uses observational analytic observational with a cross sectional approach. The population in this study were 33 respondents with a total sample of 30 respondents. The sample in this study were all pregnant women in the work area of the Ngambon Health Center, Bojonegoro Regency, with the sampling method using simple random sampling technique. The independent variable in this study was knowledge of the third trimester pregnancy danger signs and the dependent variable ANC compliance. Data collection used questionnaires and medical records (KIA Book). Bivariate analysis to see the relationship between the independent variables and the dependent variable used the Coefficient Contingency statistical test with a significant level of $\alpha = 0.05$.

RESULTS

1. Knowledge Of The Danger Signs Of Third Trimester Pregnancy

Table 1. Distribution of Pregnant Women Based on Knowledge of Pregnant Women AboutDanger Signs of Pregnancy

No	Knowledge Of Pregnant Women About Danger SignsOf Pregnancy	Frequency	(%)
1	Not enough	12	40.0
2	Enough	16	53.3
3	Well	2	6.7
	Amount	30	100. 0

The results showed that most of the third trimester pregnant women had adequate knowledge, namely 16 people (53.33%) and a small proportion had good knowledge, namely 2 people (6.67%).

2. ANC compliance

Table 2. Distribution of Pregnant Women Based on ANC Compliance

No	ANC compliance	Frequenc	(%)
		y	
1	Not Obey	12	40.0
2	Obey	18	60.0
	Amount	30	100.
			0

The results of the study showed that the majority of pregnant women in the third trimester adhered to ANC, namely 18 people (60.00%).

3. Cross Tabulation Of The Relationship Between Pregnant Women's KnowledgeAbout Danger Signs Of Pregnancy And ANC Compliance

Table 3. Distribution of Knowledge of Pregnant Women About Danger Signs of Third Trimester Pregnancy with ANC Compliance

Keteraturan pemeriksaan kehamilan				Tota	
Tidak patuh		Patuh		1014	
N	%	N	%	N	%
9	75,0	3	25,0	12	100,0
3	18,7	13	81,3	16	100,0
0	0,0	2	100,0	2	100,0
12	40,0	18	60,0	30	100,0
	Tida N 9 3 0	Tidak patuh N % 9 75,0 3 18,7 0 0,0	Tidak patuh N % N 9 75,0 3 3 18,7 13 0 0,0 2	Tidak patuh Patuh N % 9 75,0 3 18,7 0 0,0 2 100,0	Tidak patuh Patuh N % N 9 75,0 3 25,0 12 3 18,7 13 81,3 16 0 0,0 2 100,0 2

The results showed that out of 30 respondents, 2 respondents (100%) had good

knowledge and adhered to ANC. Data analysis using the Coefficient Contingency statistical test obtained a P value = $0.005 < \alpha \ (0.05)$ and r = 0.509, so that H0 was rejected and H1 was accepted, which means that there is a relationship between pregnant women's knowledge of third trimester pregnancy danger signs and adherence ANC at the Ngambon Health Center, Bojonegoro Regency, with a strong degree of closeness.

DISCUSSION

A. Knowledge Of Pregnant Women About The Danger Signs Of Third Trimester Pregnancy

Based on table 1 it shows that most of the third trimester pregnant women have sufficient knowledge, namely as many as 16 people (53.33%) and a small proportion have good knowledge, namely as many as 2 people (6.67%). Of the ten components of knowledge regarding danger signs of pregnancy, the concept of danger signs of vaginal bleeding is the knowledge component that most respondents have. The knowledge component that most respondents have is the management of nausea and vomiting.

Danger signs of pregnancy are signs that indicate a danger that can occur during pregnancy or the antenatal period (Hartati, 2018). According to Isdiaty and Ungsianik (2013), pregnant women need to know the danger signs of pregnancy because the appearance of danger signs can be an indication of possible dangers in pregnancy which can have a negative impact on the health of pregnant women and the fetus. Knowledge is a very important domain for the formation of open behavior (open behavior). Knowledge-based behavior is usually eternal (Donsu, J.D.T., 2017). Several factors that influence mother's knowledge are age, education, and experience (Lestari, T., 2015).

Based on the results of the study, it can be seen that pregnant women have sufficient knowledge about the danger signs of third trimester pregnancy. Knowledge about vaginal bleeding is the knowledge that most respondents know. The knowledge possessed by pregnant women about vaginal bleeding can be due to the age of most pregnant women being 20-35 years, the education of pregnant women who are mostly high school/vocational school and also experience or non-formal education, one of which is through counseling. Counseling is a means for pregnant women to obtain information about pregnancy. This counseling is usually carried out in the environment where pregnant women live, at the hospital or health center where they check their pregnancy. This should indeed be done by health workers, so that pregnant women can recognize the danger signs of vaginal bleeding in pregnancy. Pregnant women can also find out the causes of vaginal bleeding, the classification of treatment and prevention of vaginal bleeding. With the development of technology, pregnant women can also add to their insights about vaginal bleeding itself via the internet so that pregnant women know and if they experience vaginal bleeding at any time they can immediately seek medical help so that it can be treated as early as possible. Knowledge about vaginal bleeding itself when applied can reduce maternal and child mortality. With the knowledge they have, pregnant women can find out the type of bleeding themselves and can immediately ask for medical help. The level of knowledge of pregnant women can influence the attitudes and actions of the mother herself to treat or prevent vaginal bleeding. However, if the knowledge possessed by pregnant women is not applied with the right attitudes and actions from the mother herself, then help for pregnant women who experience vaginal bleeding will be slow and it may even be that the mother is late in getting medical help due to a lack of awareness from the mother herself.

B. ANC Compliance

Based on table 2, it shows that most of the ANC adherents, namely 18 people (60.00%), and almost half of pregnant women are ANC non-compliant, namely as many as

12 people (40.00%). This can be interpreted as pregnant women trying to stay healthy during pregnancy, expecting labor and postpartum and trying to have babies born healthy, monitoring possible risks of pregnancy, and planning optimal management of high-risk pregnancies and reducing maternal and fetal morbidity and mortality. perinatal.

Regular pregnancy check-ups are prenatal check-ups that are carried out regularly in accordance with a standard service schedule to optimize the physical, mental health of mothers and babies (Founder of WebGaul, 2004). To get antenatal care according to standards is at least 1 x contact in the first trimester, at least 1 x contact in the second trimester, and at least 2 x contacts in the third trimester (Ministry of Health RI, 2015). The impact of pregnant women not having prenatal check-ups is that pregnant women will receive less information about how to properly care for their pregnancies, not detecting danger signs of pregnancy early, not detecting anemia in pregnancy which can cause bleeding during childbirth, not detecting signs of complications from childbirth from the start, such as deformities pelvic or spinal abnormalities, or multiple pregnancies, undetected co-morbidities and complications during pregnancy such as pre-eclampsia, chronic diseases such as heart disease, lung disease and genetic diseases such as diabetes, hypertension or congenital defects. So if it is not treated or not screened from the start, it will result in the death of both the mother and the fetus (Astry, 2013). The results of Nurmasari and Sumarmi's research (2019) state that there is a relationship between the regularity of Antenatal Care visits and adherence to consumption of Fe tablets with the incidence of anemia. Pregnant women who do not regularly make ANC visits have a greater risk of developing anemia. This is because pregnant women will get early anemia checks, get proper nutritional counseling and get complete iron and folic acid supplements as well as adequate health education, so that the risk factors for anemia can be suppressed. Good and regular ANC services will make it easier for pregnant women to obtain Fe tablets. Through the administration of Fe tablets can increase blood hemoglobin levels during pregnancy so that if ANC is carried out regularly with adherence to Fe tablet consumption it will ultimately prevent anemia.

Most pregnant women who adhere to ANC at the Ngambon Health Center are caused by several factors, namely age, education, accommodation and family support. The community's thinking pattern should be on promotive efforts which carry out prevention by paying attention to initial efforts to maintain health, in this case the pregnancy by being aware of the importance of regular antenatal checks so that they can prevent and detect complications early in pregnancy. Meanwhile, there are still pregnant women who do not comply with ANC. Nearly half of pregnant women who do not comply with ANC are due to a lack of attention to their pregnancy and a lack of awareness of the mother to have her pregnancy checked. Because respondents only checked their pregnancy if they experienced complaints. This can be seen from the number and suitability of antenatal care visits. In addition, non-compliance with ANC by pregnant women is because most pregnant women check their pregnancies with health workers at an advanced age so that abnormalities during pregnancy cannot be detected as early as possible. The results of this study also revealed that a small number of respondents (pregnant women) who adhere to ANC still experience problems with their pregnancy, namely experiencing anemia. This anemia occurs due to the lack of adherence of pregnant women in consuming Fe tablets, this is because physiologically all pregnant women experience anemia due to the dilution process so they need Fe tablet supplements to treat anemia. Pregnant women with good nutrition do not necessarily have normal hemoglobin levels without the support of consumption of Fe tablets, especially pregnant women with poor nutritional status. Fulfillment of nutritional status is closely related to economic status because it relates to spending on the nutritional needs of these pregnant women. If this does not get serious attention, especially in pregnancy checks that are not carried out regularly, it will result in the mother's pregnancy having abnormalities and if it is not detected properly it will threaten the safety of the mother and the fetus she is carrying.

C. The Relationship Between Knowledge Of Pregnant Women About Danger Signs Of Pregnancy And ANC Compliance

Based on table 3, it is known that most of the respondents who had less knowledge about the danger signs of third trimester pregnancy were not ANC compliant, namely 9 children (75.00%), almost all respondents who had sufficient knowledge of ANC compliance, namely 13 people (81.25%)), and all of the respondents who had good knowledge of ANC compliance were as many as 2 people (100.00%). The results of the Coefficient Contingency statistical test analysis with computer software at an error level of 5%, obtained a P value =

 $0.005 < \alpha \, (0.05)$ and r = 0.509, so that H0 is rejected and H1 is accepted, which means that there is a relationship between pregnant women's knowledge of third trimester pregnancy danger signs and ANC compliance at the Ngambon Health Center, Bojonegoro Regency, with a strong degree of closeness.

Antenatal Care is health services by professional staff during pregnancy, in accordance with the minimum standard of antenatal care (Rukiyah and Yulianti, 2014). According to Bloom in Notoatmodjo (2014) says that knowledge is a very important domain for the formation of one's actions, in this case a pregnant woman will carry out regular antenatal care if the mother knows the benefits of antenatal care for her pregnancy. Research conducted by Dian Pratitis (2013) states that the majority of pregnant women's knowledge of pregnancy danger signs is categorized as high, most pregnant women are categorized as obedient in carrying out pregnancy checks and there is a significant relationship between knowledge of pregnancy danger signs and compliance with pregnancy examinations. The higher a person's knowledge of the danger signs of pregnancy, the more obedient they will be to carry out pregnancy checks.

The results of research at the Ngambon Health Center in Bojonegoro Regency in pregnant women who have sufficient knowledge and are obedient in carrying out ANC, it can be assumed that pregnant women have utilized health services so that abnormalities and conditions of pregnant women can be detected so as to prevent pregnancy complications. The knowledge of pregnant women about the danger signs of third trimester pregnancy is very influential on the regularity of the mother to carry out pregnancy checks. This needs to be considered because pregnant women who do not regularly carry out pregnancy checks will receive less information about the danger signs of third trimester pregnancy so they are unable to detect pregnancy complications early. On the other hand, if pregnant women regularly attend prenatal care, they will have sufficient knowledge about the danger signs of third trimester pregnancy and are better able to detect pregnancy complications early. Conversely, if pregnant women have less knowledge about the danger signs of pregnancy in the third trimester, it causes pregnant women to experience delays in handling pregnancy problems which will have an impact on the occurrence of pregnancy problems. However, in this study, it was found that a small number of pregnant women who were less knowledgeable were compliant with ANC. This may be due to the husband's support or support from the family to check the pregnancy. The greater the support a pregnant woman gets, the stronger her desire to have her pregnancy checked. There are still pregnant women at the Ngambon Health Center who think that prenatal checks are not a mandatory action to take, because pregnant women do not feel they have other health problems. Where the behavior of pregnant women who are not good can indirectly cause health problems to the mother and the fetus that is being conceived due to the signs and dangers of pregnancy that are not detected early. In addition, pregnancy checks are not carried out regularly, it is possible that pregnant women are not able to prepare as optimally as possible physically and mentally for the mother in labor.

CONCLUSION

Based on the results of the research and discussion that has been carried out on pregnant women at the Ngambon Health Center, Bojonegoro Regency in 2020, it can be concluded that most have sufficient knowledge about danger signs of pregnancy, most are compliant with ANC, and there is a relationship between knowledge of pregnant women about danger signs of third trimester pregnancy and adherence ANC with a strong degree of closeness.

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