

The Effect Of Antenatal Care Service Quality And Therapeutic Communication Of Midwife On Motivation Of Patients To Give Birth At Midwife And SPA House Mrs. "F" In Jombang District

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ABSTRACT

The quality of antenatal care services can be told good is not only measured by the luxury of facilities, the completeness of technology but also communication of health workers or midwives must reflect professionalism and have high commitment, so that patients can provide a sense of satisfaction, trust, and patient loyalty. The purpose of this research was to determine the effect of antenatal care service quality and therapeutic communication of midwife on motivation of patients to give birth at Midwife and Spa House Mrs. "F" in Jombang district. This research is a quantitative research with analytical survey method with a cross sectional approach. The study population were 127 pregnant women. The samples were 86 pregnant women who visited at Midwife and Spa House Mrs. "F". The sampling technique uses accidental sampling. The independent variables in this study were antenatal care quality services and therapeutic communication midwives. The dependent variable in this study was patient's motivation for maternity. Data were collected by questionnaires and tested by multiple linear regression tests. The results of the study showed that from 86 respondents, most of the respondents stated that the quality of antenatal care services was good, namely 58 respondents (67.4%). Therapeutic communication of midwife shows that the majority of respondents stated that therapeutic communication of midwife was good, namely 61 respondents (70.9%). Motivation of patient shows that the majority of respondents had a strong motivation for give birth which was 65 respondents (75.6%). There is a effect of antenatal care service quality and therapeutic communication of midwife on motivation of patients to give birth at Midwife and Spa House Mrs. "F" in Jombang district. It is expected to submit input, criticism and suggestions related to the quality of antenatal care services, therapeutic communication of midwives in motivating patients to give birth, so that improvements can be made.

Keywords : Midwife Therapeutic Communication, Patient Motivation, Quality of Antenatal Care Services

INTRODUCTION

Efforts to improve the health of mothers, newborns and children have become the top priority of the government. The government has given high attention and support to the reduction of MMR. The government focused the maternal health program on the strategic intervention "Four Pillars of Safe Motherhood" (Family Planning, Antenatal Care, Clean and Safe Childbirth, Essential Obstetric Services) conducted by the Ministry of Health since 1990.

In 1997 the achievement of access to antenatal services was quite good, but the quality of antenatal services still needs to be improved. The government continues to carry out programs to improve service quality in order to reduce MMR in Indonesia, namely through the program of the Mother's Love Movement, 2 Making Pregnancy Safer strategies, and the Expanding Maternal and Neonatal Survival (EMAS) program (Kemenkes, 2017). The

quality of antenatal care services is closely related to the acceleration of the decline in MMR so that access to quality and quality antenatal care services must be done through the provision of services that are in line with antenatal care service standards (RI Ministry of Health, 2017).

In 2017 the results of achieving the coverage of the visit of pregnant women (K1) National amounted to 95.41% of the target of 100% which means that it has not yet reached the target. As for the coverage of visits of pregnant women (K4) National of 87.3% which is already above the achievement target of 76% (Kemenkes RI, 2017). For East Java in 2017 it is known that the coverage of visits of pregnant women (K1) is 98.2% of the target of 100% and the coverage of visits of pregnant women (K4) is 89.9% of the target of 100%, which means both are still below the achievement target (DHO East Java, 2017).

In Jombang, the coverage of pregnant women visits (K1) in 2017 is 96.15% of the MSS target of 100% and the coverage of pregnant women visits (K4) in 2017 is 88.86% of the 100% SPM target. This gap between K1 and K4 is caused by a number of factors, ranging from complications in pregnant women, pregnant women who move to other health facilities to the lack of optimal recording and reporting of K1-K4. (Jombang District Health Office, 2017).

Based on data and information obtained from Griya Midwife and Spa Ny. The "F" in Jombang in providing Antenatal Care, Maternity and Immunization services in November 2018 to January 2019 is as follows: coverage of visits of pregnant women who do antenatal care (ANC) in the last three months has fluctuated, but an increase in the number of new patients each month. This does not apply to the coverage of childbirth and immunization which has decreased dramatically. Through interviews with midwives, midwife "F" has indeed not received immunization services in its place since 2014 and also has an impact on reducing the coverage of maternity women. Midwife "F" emphasizes on the facilities they have, such as pregnancy exercises, classes of pregnant women, spa spas, baby spas, baby classes and others, for example pregnant women classes that can attract pregnant women to do pregnancy examinations in their place, which was do not check there then join pregnancy pregnancy classes there so be interested and move to the midwife "F". In addition, midwives also provide a place for patients who visit their place to provide criticism and suggestions through Whatsapp and a questionnaire distributed to patients to improve the place of service. For the results of interviews with 10 pregnant women that they chose the midwife "F" because the service is good, attentive and provides comprehensive and up-to-date care. Obtained 6 out of 10 pregnant women said they always do the inspection there and want to do labor there too. Whereas 4 of the pregnant women did not give birth at that place because they planned to operate and some used BPJS. Nevertheless the number of visits of pregnant women is inversely proportional to the number of deliveries at the midwife. There has been a decrease in the number of interpretations at the same time the number of delivery assistance each month since not receiving immunization services. In addition Midwives "F" do not cooperate with BPJS so that patients who plan to deliver using BPJS cannot deliver in their place so that it also affects the number of deliveries.

METHODS

This research is a quantitative research with analytic survey method with cross sectional approach. The study population was 127 pregnant women. The sample of this study was 86 pregnant women who visited the Griya Midwife and Spa Ny. "F". The sampling technique uses accidental sampling. The independent variable in this study is the Quality of Midwife Antenatal Care Services and Therapeutic Communication. The dependent variable in this study was the Motivation of Patients for Childbirth. Data were collected by questionnaire and tested by Multiple Linear Regression test.

RESULT**Characteristics of Subjects**

.table 1.

No	Characteristics	ΣN	$\Sigma \%$
1	Age (year)		
	<20	8	9
	20-35	62	72
	>35	16	19
2	Education		
	Middle School	9	10
	High school	53	62
	University	24	28
3	Work		
	Labor	4	5
	Private	18	21
	entrepreneur	9	11
	IRT	37	43
	Civil servants	7	8
	Othern	10	12
4	Paritas		
	Primigravida	31	36
	multigravida	55	64
5	Gestational age		
	TM I	21	25
	TM II	38	44
	TM III	27	31
6	Visit		
	1 x	20	23
	2 x	56	65
	3 x	10	12
7	Income		
	< 1 million	9	10
	1-2,9 million	58	67
	3-3,9 million	19	22
	>4 million	1	1
8	Service quality		
	Enough	28	32,6
	Well	58	67,4
9	Therapeutic communication		
	Enough	25	29,1
	Well	61	70,9
10	Motivation		
	Middle	21	24,4
	Strong	65	75,6

Total	86	100
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Data Analysis

Table 2. Influence of the Quality of Antenatal Care Services and Therapeutic Communication of Midwives on Motivation of patients to give birth at the Midwife Griya and Spa Ny. Joombang Regency's "F"

Variable	<i>p value</i>
Quality of Aantenatal Care Services and Therapeutic Communication of Midwives - Patient motivationN = 86	0,000
$\alpha = 0,05$	

The results of the regression analysis are simultaneously presented in table 2 above. The resulting significance value of 0,000. This value is smaller than the error rate of the study used which is equal to 5% (0.05) so that the conclusion that can be drawn is that there is a simultaneous influence of the quality of service and communication on patient motivation.

DISCUSSION

A. Quality of Antenatal Care Services at Griya Midwife and Spa Ny. "F" Jombang Regency

Based on research data on the quality of antenatal care services at Griya Midwife and Spa ny. "F" Jombang, it can be seen that overall of 86 respondents there were 58 or 67.4% of respondents who stated the quality of service was good. The results of the cross tabulation analysis between the quality of service with motivation, obtained information that 58 respondents stated that the quality of service in the midwife and spa center. "F is good and has a strong motivation to give birth in this place.

From the results of the service quality questionnaire recapitulation, it can be seen that most respondents stated that the quality of service is good with the tools and facilities that support pregnancy checks, such as USG, Doppler, and other support programs such as gymnastics and spa.

Service Quality (Tjiptono: 2012), service quality is a measure of how well the level of service provided is able to match customer expectations. Based on this definition, service quality is determined by the company's ability to meet the needs and desires of customers in accordance with customer expectations. In simple terms, service quality can be interpreted as a defect-free product. In other words the product complies with the standard (targets or requirements that can be defined, observed and measured).

So it can be concluded that the better the quality of health care services, especially antenatal care provided, it will affect the high confidence and motivation of patients in choosing a place to check and deliver in the same place.

B. Midwives Therapeutic Communication at Griya Midwife and Spa Ny. "F" Jombang Regency

Based on research data on therapeutic communication of midwives at Midwife Griya and Spa ny. "F" Jombang, it can be seen that overall of 86 respondents there were 61 or 70.9% of respondents who stated that midwife's therapeutic communication was good, The results of the cross tabulation analysis between midwife's therapeutic communication with patient motivation, it is known that 61 respondents (70.9%) which states the therapeutic communication carried out by midwives in the good category, has a strong motivation to give birth in this place.

From the results of the service quality questionnaire recapitulation, it can be seen that most of the respondents stated that therapeutic communication in the midwife and spa center was good as seen from the midwife who was attentive in conveying information.

Therapeutic communication can affect patient satisfaction. This can be caused by not only easily communicating therapeutic relationships with clients in therapeutic communication, but also can prevent the occurrence of legal ethical issues, besides that it can provide professional satisfaction in midwifery services and enhance the professional image in providing services (Priyatno 2009).

So from the description above the researchers argue that the better therapeutic communication of health workers, especially midwives to their patients, will affect the high confidence and motivation of patients in choosing a place to check and deliver in the same place because of the emergence of a sense of security and comfort from patients.

C. Motivation of Patients to Give Birth at Midwife Griya and Spa Ny. "F" Jombang Regency

Based on research data on patient motivation at Midwife Griya and Spa ny. "F" Jombang, it can be seen that overall of 86 respondents there are 65 or 75.6% of respondents who have a strong motivation to give birth in the midwife and spa center. "F" Jombang.

From the results of the patient motivation questionnaire recapitulation that overall the patient has a high motivation the patient feels confident and believes in choosing a place to check and give birth at the midwife and spa center. "F". the results of this study are relevant to the research of Sushantri (2011), that there is a significant relationship between satisfaction, patient confidence with motivation to choose the place of delivery.

Patients must feel confident and believe that the services provided are very good and suitable for themselves (trust) will tend to motivate patients to return to the same health service. (Haqi et al, 2014).

Therefore it can be concluded that the more comfortable and trusting someone in a health service, the higher the loyalty and motivation of a person to return to the same place.

D. The Influence of the Quality of Antenatal Care Services and Midwife's Therapeutic Communication on Motivation of Patients to Give Birth

The results of the simultaneous regression analysis are presented in table 4.13 above. The resulting significance value of 0,000. This value is smaller than the error rate of the study used that is equal to 5% (0.05) so that the conclusion that can be drawn is that there is an Influence of the Quality of Antenatal Care Services and Therapeutic Communication of Midwives on Motivation of Patients for Maternity in Griya Midwife and Spa Ny. "F" Jombang.

The results of partial or individual regression analysis obtained significance values for the service quality and communication variables of 0.001 and 0,000 respectively. This value is smaller than 0.05 so it can be concluded that the service quality and communication variables have a significant effect partially on the motivation variable. The coefficient value on service quality is 0.261. This value indicates that increasing the quality of service will have a

significant impact on increasing patient motivation to give birth by 0.261 times one unit. While the coefficient value for the communication variable is 0.621 where this value means that increasing midwife communication will increase the patient's motivation to give birth by 0.621 times one unit.

CONCLUSION

1. From the analysis of the quality of antenatal care services 58 or 67.4% of respondents stated that the quality of antenatal care services is good and 28 or 32.6% of respondents stated that the quality of antenatal care services is sufficient and none of the number of respondents stated the quality of service Less antenatal care. The significance value generated for the service quality variable is 0.001. This value is smaller than 0.05 (5%) so that the conclusion drawn is that the independent variable of knowledge has a significantly (individually) significant effect on patient motivation.
2. From the analysis of therapeutic communication of midwives, 61 or 70.9% of respondents stated that midwife's therapeutic communication was good and 25 or 29.1% of respondents stated that midwife's therapeutic communication was sufficient and none of the respondents stated that midwife's therapeutic communication was lacking. The significance value of the therapeutic communication variable is 0,000. This value is smaller than 0.05 so the conclusion that can be drawn is that there is a significant influence individually (partial) therapeutic communication variables of midwives on patient motivation.
3. From the analysis of patient motivation, 65 or 75.6% of respondents had strong motivation and 21 or 24.4% of respondents had moderate motivation and none of the respondents who had weak motivation to give birth at Griya midwife and Spa were . "F" Jombang.
4. There is an Influence of the Quality of the Antenatal Care Service and Therapeutic Communication of Midwives on the Motivation of Patients to Give Birth at the Midwife's Griya and Spa Ny. "F" Jombang Regency. Can be seen from the resulting significance value of 0,000. This value is smaller than the level of research error used which is equal to 5% (0.05).

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