

FACTORS INFLUENCING PREGNANT WOMEN'S CONFIDENCE IN THE USE OF DELIVERY FACILITIES IN LALAFANG POLINDES, PANTAR TIMUR ALOR DISTRICT

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ABSTRACT

Childbirth in a health service facility is one of the key elements in reducing maternal and newborn mortality rates, besides that the choice of birth assistance is one of the factors that determines the implementation of a safe and healthy delivery process. The aim of this research is to determine the factors that influence pregnant women's confidence in using delivery facilities at the Lalafang Polindes, Pantar Timur Alor District. This research design uses descriptive qualitative using a case study approach. The sampling method uses techniques *Purposive Sampling*. The informants in this research were pregnant women in the third trimester at the Lalafang Polindes, Pantar Timur Alor District on May – June 2022. The instruments used were structured interviews or in-depth interviews. The results of the research show that informants have confidence in using birthing facilities, namely giving birth in health facilities (polindes) and there are still informants who have confidence in using birthing facilities, namely giving birth in non-health facilities. Informants have confidence in using birth facilities, namely giving birth assisted by health workers, and there are still informants who have confidence in using birth facilities, namely giving birth assisted by a traditional birth attendants (dukun). It was concluded that pregnant women's beliefs influence the use of birth facilities, which includes trust in the place of birth and birth attendants.

Keywords: Trust, Pregnant Women, Utilization of Childbirth Facilitie

INTRODUCTION

Health development programs in Indonesia prioritize reducing health status indicators, namely overcoming maternal and child health problems. Basically, these programs focus more on efforts to reduce infant and child mortality rates, crude birth rates and maternal mortality rates. (Indonesian Ministry of Health, 2016). The high maternal mortality rate includes the lack of access for mothers giving birth to quality health facility services due to suboptimal health facility services. The quality and effectiveness of maternal health services is inadequate, the maternal health referral system is not yet stable and health management is still weak (Saifuddin AB, 2018).

A health service facility is a place used to provide health service efforts, whether promotive, preventive, curative or rehabilitative, carried out by the government, regional government and/or the community. Giving birth in a health facility is more important than giving birth in a non-health facility so that pregnant women and babies can get pregnant quickly and accurately get birth assistance services according to standards, recognize early danger signs of pregnancy, childbirth and postpartum, get emergency first aid quickly in preparation for referral efforts to a higher level of service, pregnant women and babies quickly and appropriately receive health facilities which is clean and safe and gets help and services from health workers who are ready on the spot. (Saifuddin AB, 2018).

Nationally, the percentage of births in health facilities (assisted by trained health personnel) increased from 66.7% in 2015 to 77.34% in 2017, this figure continues to increase to 82.3% in 2018. This figure is still far from the target which has been determined is that the coverage of births by health workers is 95% in 2019. In NTT Province, the number of births in health facilities assisted by health workers in 2020 was 77.7% (Profile of the NTT Provincial Health Service, 2020). This means that 23.3% of births were assisted by traditional birth attendants (non-health facilities). Meanwhile, in the Alor Regency area, the number of births in health facilities assisted by health workers is 77.0% (Alor Regency Health Service Profile, 2020).

Report data for 2021 at Pantar Timur Community Health Center regarding pregnant women who gave birth in health facilities (Puskesmas) was 75% of the specified target of 100%. Data on births at the Lalafang Polindes in 2021, 14 people gave birth in health facilities (47%) and 16 people (assisted by traditional birth attendants /dukun) did not give birth in health facilities (53%).

The results of a preliminary study conducted by researchers at the Lalafang village police who conducted interviews with 5 mothers who gave birth at traditional birth attendants (dukun), the mothers said that they gave birth at traditional birth attendants (dukun) because they still adhered to the customs or beliefs passed down from the family and the distance to the birthing facility was quite far and difficult so they prefer to give birth at traditional birth attendants (dukun).

The high number of births attended by traditional birth attendants (dukun) is one of the reasons for the low coverage of births by health workers. Some of the reasons why births are assisted by traditional

birth attendants are trust, the distance from the mother's house to the birthing facilities is difficult, apart from that there is a lack of knowledge or education from the birthing mother and her family, and there is still a culture of giving birth at home. Apart from that, people also believe that by giving birth to traditional birth attendants (dukun) the cost of giving birth is cheap, they are accompanied during birth and after giving birth by caring for the baby, bathing and massaging the baby. The community also trusts traditional birth attendants (dukun) for their ability to assist with childbirth which has been passed down from generation to generation.

According to Green in Notoatmodjo (2016), factors that identify and potentially influence someone to utilize health services are predisposing factors which are manifested in knowledge, attitudes, beliefs, values and so on, enabling factors, distance to health services, facilities and infrastructure, reinforcing factors which are manifested in the role of health workers, husband's support, economic status and religious figures.

Various efforts have been made to reduce the maternal mortality rate, one of which is gradually increasing birth assistance by professional staff, increasing early detection of high risk pregnant women and implementing a referral system and good quality neonatal services. However, one of the problems with maternal health is that delivery assistance by health workers is still low. The knowledge aspect is very important because mothers who have good knowledge will use health workers to help with their birth. This knowledge can form certain beliefs so that a person behaves according to these beliefs, not according to the social culture in that region. Likewise with the attitude where mothers who have a positive attitude will give birth to health workers

Based on this background, researchers want to conduct research on the factors that influence pregnant women's confidence in using birthing facilities at the Lalafang Polindes, East Pantar District, Alor Regency.

RESEARCH MATERIALS AND METHODS

In this research, qualitative descriptive research was used using a case study approach. The sampling method uses Purposive Sampling technique. The informants in this research were pregnant women in the third trimester at the Lalafang Polindes, East Pantar District, Alor Regency, May – June 2022. The instruments used were structured interviews or in-depth interviews. This research has also received information that it has passed the ethical test.

RESEARCH RESULT

A. Characteristics of Informants of Pregnant Women in Lalafang Village

Table 1. Frequency Distribution of Informants for Pregnant Women based on age, education, job and parity at the Lalafang Polindes, East Pantar District, Alor Regency

May – June 2022

No	Name	gender	Age (years)	Education		Job	Parity	Place of Labor	Assistance of labor
1	Mrs.S	Female	26	Senior	High	House	1	Health	Health worker
2	Mrs.T	Female	30	School		wife	2	facilities	Traditional ast
3	Mrs.K	Female	31	Junior	Hig	Farmer	2	Home	Health worker
4	Mrs.A	Female	35	School		House	3	Health	Traditional ast,
5	Mrs.D	Female	28	Senior	High	wife	2	facilities	Health worker
6	MrsM	Female	27	School		Farmer	2	Home	Health worker
7	Mrs.L	Female	28	Junior	Hig	House	1	Health	Health worker
8	Mrs.C	Female	28	School		wife	1	facilities	Health worker
		Female		Senior	High	House		Health	
				School		wife		facilities	
				Senior	High	House		Health	
				School		wife		facilities	
				Senior	High	House		Health	
				School		wife		facilities	
				Senior	High				
				School					

Based on table 4.1, it can be seen that the informants in the study were 8 people with the average age of the informants being 26 - 30 years, the youngest being 26 years old and the oldest being 35 years old. Half of the informants had a high school education, namely 6 people, the rest had a junior high school education of 2 people. There were 5 informants who did not work (house wife), and 2 people who worked as farmers. There were 3 parity primipara respondents, and 4 parity multipara respondents.

B. RESEARCH RESULT

The results of this data exploration describe all the information that has been obtained during the research process. The results are formed and compiled based on the research objectives, added with information that the researchers found during the research. The results of data exploration obtained during the research are as follows

1. The level of trust of pregnant women in the use of birth facilities in the place of delivery

Based on the results of the analysis carried out regarding the confidence of pregnant women in using birth facilities based on the place of birth after conducting in-depth interviews, the following results were obtained:

The results of this study showed that 6 informants had confidence in using birthing facilities, namely giving birth in health facilities (polindes/pustu/puskesmas) while 2 informants had confidence in giving birth in non-health facilities (home/traditional birth attendances' place).

The following are the results of interviews delivered by 6 informants who have confidence in giving birth in health facilities:

... "Polindes". (Informant 1)

... "because giving birth at the polindes is assisted by a midwife, apart from that, there is also advice from the family to give birth in a health facility."

... " When I gave birth I chose the Polindes." (Informant 3)

... "because he was accompanied by his family and helped by a midwife, and he was afraid of having a big baby and was afraid that something unexpected would happen during delivery."

... "Just Polindes." (Informant 5)

... "Because I'm afraid that if I give birth at traditional birth attendance, it will be difficult for me to get the child's birth certificate."

... "polindes". (Informant 6)

... "because if I don't go to the Polindes I'm afraid it will endanger me and my baby."

... "Polindes". (Informant 7)

... "because at the Polindes there are midwives or officers who are always ready to help with childbirth."

... "at Polindes". (Informant 8)

... "because of the family's suggestions and considerations in deciding to choose a place of birth"

The following are the results of interviews conveyed by 2 informants who have the confidence to give birth in non-health facilities (home/traditional birth attendance):

... "At home". (Informant 2)

..."because giving birth at home is safer and there are no stitches around the birth canal."

... "At home". (Informant 4)

... "Because I gave birth at home, it was more comfortable for me and it was easier for me, I didn't have to go all the way to the polindes/pustu because then the/traditional birth attendance would come to the house."

2. The level of trust of pregnant women in the use of birth facilities towards birth attendants

Based on the results of the analysis carried out regarding the trust of pregnant women in the use of birth facilities towards birth attendants after conducting in-depth interviews, the following results were obtained:

The results of this study showed that 6 informants had confidence in giving birth without help from a health worker, while 2 informants believed in giving birth without help from a /traditional birth attendance

The following are the results of interviews conveyed by 6 informants who have the confidence to give birth assisted by health workers:

... "Midwife." (Informant 1)

..."because if someone is not helped by a health professional, it could be dangerous for me and my child."

... " Midwife ". (Informant 3)

..."because when I am sick or have health problems during pregnancy, I prefer to be helped by health workers."

... "Midwife". (Informant 5)

... "because if you are not helped by a health worker, I don't know whether the equipment used is clean or not because if it is not clean it can cause infection."

... "Midwife ". (Informant 6)

..."because the people are friendly and always provide detailed explanations"

... "When I gave birth, I chose to be helped by a midwife." (Informant 7)

..."because at the Polindes there are midwives or officers who are always ready to help with childbirth."

... "Midwife ". (Informant 8)

... "because of the family's suggestions and considerations in deciding on the selection of a birth attendant"

The following are the results of interviews conveyed by 2 informants who have the confidence to give birth in non-health facilities (home/shaman's place):

... "witch doctor". (Informant 2)

..."Because I don't have to pay any more fees and there was advice from my family that had been passed down from generation to generation to give birth at a dukun beranak."

... "witch doctor". (Informant 4)

... "Because if they were called they would come straight away, they were also willing to wait from stomach ache to delivery, they were even willing to take care of me and the baby until the rope. the baby's center is removed, in addition to cleaning the umbilical cord and if our stomach goes down, its position will be corrected"

DISCUSSION

A. Pregnant women's trust in the use of birthing facilities at the place of birth

The results of the interview show that informants who use birth facilities have confidence in giving birth in health facilities (polindes). This is because there is advice from the family to give birth in health facilities. The informant is worried that giving birth at home is afraid of endangering the mother and child, if the baby is big and is afraid that something unexpected will happen during the birth, and the informant is worried that it will be difficult to get the child's birth certificate, while those who use the birthing facilities are have confidence in giving birth at home or in a non-health facility. This is because the informant feels that giving birth at home is safer and believes there are no stitches around the birth canal. Apart from that, according to the informant, giving birth at home is easier, you don't have to go far to the polindes/pustu because the traditional birth attendance called home.

The results of this research are in line with research conducted by Nurhasanah, Khojiati (2016) regarding factors that influence mothers in choosing a place of birth which states that there is a significant relationship between maternal knowledge and choice of place of birth with a value of $p =$

0.000. Respondents' lack of knowledge will influence their mindset to ignore the importance of giving birth in a health facility.

According to the researcher's assumptions, informants who have the confidence to give birth in a birthing facility (polindes/pustu/puskesmas) this is due to suggestions and considerations from the family. Husbands and families have an important role in choosing the place of birth. They are of the opinion that the choice of older people/ family is the best because parents are more experienced than them. Apart from that, the confidence in choosing a place to give birth in a health facility is because the mother already has previous experience, namely a midwife or health worker who is always ready to help with childbirth, especially if something unexpected happens, such as an emergency during childbirth and concerns about not giving birth. In a health facility, it will be difficult to arrange a birth certificate, because in a health facility the certificate will be handled by health workers.

Meanwhile, for informants who have the confidence to give birth in a non-health facility (home/shaman's place), this is because mothers who want to give birth feel more comfortable if the birth is carried out at home and assisted by traditional birth attendance, this is due to the high level of trust in the traditional birth attendance and comfort. giving birth at home, there is a hereditary belief from the family and the distance from the village police so that the informant prefers to call /traditional birth attendance to come home, so that this leads the informant (pregnant mother) to give birth at home assisted by traditional birth attendance. Therefore, providing information to pregnant women about choosing the right place to give birth can be improved through counseling carried out by health workers, especially midwives, so that the knowledge provided can increase the insight of pregnant women in determining their choice in giving birth in order to give birth in a health facility.

B. Pregnant women's trust in the use of birth facilities towards birth attendants

The results of the interview showed that the informant in using birthing facilities had confidence in giving birth to be helped by a health worker. This was because the informant said that if it was not helped by a health worker, it could be dangerous for the mother and baby and if it was not helped by a health worker, I don't know what equipment to use, clean or not because if it is not clean it can cause infection. Apart from that, when pregnant women are sick or have health problems during pregnancy, they prefer to seek treatment from health workers. Apart from that, the informant also said that health workers are always ready and friendly in providing explanations, while those who use the facilities childbirth, namely having the belief that giving birth will be helped by traditional birth attendance, this is because there is a belief passed down from the family and the convenience, namely giving birth at a traditional birth attendance, if called, he comes straight away and the traditional birth attendance

is also willing to wait from the start of the stomach ache until delivery and is even willing to look after the birth and the baby until the placenta is free, and is also willing to clean (the placenta), apart from that the informant also doesn't have to pay any more fees.

The results of this research are in accordance with research by Alhidayati (2016), who said that the belief in giving birth to a midwife has been passed down from generation to generation. This research is also in line with Astuti (2015) who showed that mothers who chose traditional birth attendance as their birth attendant expressed their reasons that several times the whole family and also the surrounding community gave birth with a /traditional birth attendance and the results were safe and easier and the most important thing was that the baby was born well safe and healthy. According to the researcher's assumption, informants who have confidence in giving birth will be helped by health workers. This is because there is advice and encouragement from the family to give birth by a midwife or health worker. Apart from that, the informant has also received good information about the importance of having a birth assisted by a health worker trained that is, if you are not helped by a health worker, it can be dangerous for pregnant women and their children. Apart from that, the readiness of medical equipment in health facilities is also a reason for giving birth to be assisted by health workers.

Meanwhile, respondents who chose to give birth at traditional birth attendance (non-health worker) this was because there was a belief passed down from family to generation, so they chose to have a birth attendant assisted by a non-health worker. Perceptions and trust in traditional birth attendance that have been going on for generations still exist. The role of the traditional birth attendance is still widely believed to be able to help with childbirth even though there are midwives in this village. The cultural factor stated by the informant is that the traditional birth attendance not only handles the birth process, but handles it after the birth process. After delivery, the midwife continues to handle the baby until it is 44 days old. Apart from that, the respondent's lack of knowledge was also a factor in choosing a birth attendant by traditional birth attendance, this was due to the respondent's low education. there is public trust in midwives and comfort in giving birth at home as well as the presence of midwives who are considered more attentive and more patient in serving birthing mothers who need help, thus making mothers feel more comfortable. Therefore, it is recommended to increase health promotion efforts through outreach to the community, collaboration with cadres and community leaders in changing the habits of local people who still believe in giving birth to/traditional birth attendance, through understanding the benefits of giving birth to health workers, so that with these efforts it will be possible to increase the coverage of birth assistance by health workers. Officers need to take a cultural and customary approach to the local community, in placing midwives, improving health services, and need to provide guidance and training for midwives, keeping in mind to reduce

maternal and child mortality rates.

CONCLUSION

The conclusion in this research is that informants have confidence in using birthing facilities, namely giving birth in health facilities (polindes) and there are still informants who have confidence in using birthing facilities, namely giving birth in non-health facilities (traditional birth attendance place). Informants have confidence in using birth facilities, namely giving birth assisted by health workers, and there are still informants who have confidence in using birth facilities, namely giving birth assisted by traditional birth attendance, so there are cases of deaths where babies die because they are trapped in the area of the mother's birth canal, apart from that, babies also remaining amniotic fluid which causes death in the baby. It is hoped that health workers will increase promotion and provide counseling and assistance to pregnant women about the importance of giving birth in a health facility so that when they give birth they can be helped by health workers at the health facility.

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