Factors Related to Selection of Birth Attendants for Mothers in Labor in Malawele Aimas District Sorong Regency Year 2015

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Abstract: The low coverage of childbirth assisted by skilled birth attendants can be influenced by the attitude and behavior of pregnant mothers in choosing the birth attendants. From the prior study, it can be found that 6 out of 10 mothers (60%) had delivery in unskilled birth attendants, and 3 of them were not supported by their family (30%). There were four mothers were had delivery assisted by skilled birth attendants and all of them were encouraged by their family. The purpose of this study was to determine the factors related to choosing the birth attendants for the mothers in Urban Village Malawele Aimas District. The design of the research is correlational analytic with the cross-sectional approach. The population is all mothers in labor in Urban Village Malawele Aimas District with the total of 60 mothers, sampling used was saturated sample. Data were analyzed using Chi-Square with significance level 0,05. The result of the study stated that there was the relationship among knowledge, income, family support in choosing the birth attendants. It is recommended that healthcare facilities improve the coverage of childbirth assisted by skilled birth attendants. As for the community to be able to utilize health facilities as the place for delivery.

I INTRODUCTION

Pregnant women and childbirths are the most vulnerable groups that require the maximum service of health workers. One form of service that should be given to the mother in labor is the childbirth assisted by skilled birth attendants (Ministry of Health of Republic of Indonesia, 2007).

The main causes of maternal deaths during 2010-2013 remain the same which are bleeding 30.3%, hypertension 27.1%, infection 7.3%, 1.8% prolonged labor, 1.6% abortion, and others 40, 8%. While other causes also play a significant role in causing maternal deaths. Other causes are the causes of death of mother that affect indirectly, like condition of cancer, kidney, heart, tuberculosis or other disease suffered by mother.

In addressing this concerns, Indonesian government through Ministry of Health of Republic of Indonesia (MOH RI) issued quality health care for maternal and child through program Making Pregnancy Safer (MPS) which provide the maternal and neonatal health care with key messages: (1) every childbirth assisted by skilled birth attendants; (2) every complication on obstetrics and neonatal to be treated adequately; (3) every women on childbearing age have access to unwanted pregnancy and prevention to unsafe abortion. One of the MPS targets set for 2010 is to increase the coverage of deliveries assisted by skilled birth attendants to 90%. One of the strategies to achieve the above target is to improve access and coverage of newborn and cost-effective maternal and infant health services that are cost-effective and evidence-based. (MOH RI, 2009)

From the prior study data obtained from ten mothers were 6 mothers had delivery in non skilled health personnel (60%) and did not get support from family as much as 3 people (30%) while 4 mothers had delivery assisted by skilled birth attendants (40%) and all were accompanied by their family.

Faculty of Psychology and Health, UIN Sunan Ampel 108 Surabaya, October 9-11, 2018 Based on the above phenomenon, the researcher is interested to conduct research on Factors Related to Selection of Birth Attendants for Mothers in Labor in Malawele Urban Village, Aimas District, Sorong Regency year 2015

The purpose of this study was to This study aims to determine the factors associated in the selection of birth attendants for mothers in labor in Malawele Urban Village Aimas District.

2 METHOD

The research used correlational analytic design with cross sectional approach. The population is all maternity mothers in Malawele Urban Village Aimas District which amounts to 60 people, the sample use saturated sample. Large sample of 66 respondents by using Total Sampling. The instrument of data collection using questioner then analyzed using Chi Square test with 5% significance.

3 RESULT AND DISCUSSION

A. General Data

1) Frequency Distribution based on Maternal Knowledge

Table 1Frequency Distribution Based on MaternityKnowledge In Malawele Urban Village, Aimas District,Sorong Regency 2015

No	Knowledge	Frequency	Percentage
1	Good	45	75
2	Medium	5	8,3
3	Less	10	16,7
	Total	60	100

Based on table 1, it can be seen that from 60 respondents, mothers in labor who had good knowledge were 45 mothers (75%) higher than mothers who had less knowledge were 10 mothers (16,7%).

2) Frequency Distribution Based on Mothers' Family Income

Table 2 Frequency Distribution Based on Family Income

No	Family Income	Frequency	Percentage	
1	High	33	55	
2	Low	27	45	
	Total	60	100	

Based on table 2 it can be seen that from 60 respondents, mothers with high family income were 33 mothers (55%), which were higher as compared to mothers with low family income as much 27 mothers (45%).

3) Frequency Distribution based on Family Support to Mother in Labor

Table 3. Frequency Distribution Based on FamilySupport to Mothers in Labor

No	Family Support	Frequency	Percentag	
	5 11	1	e	
1	Supporting	45	75	
2	Less Supporting	6	10	
3	Not Supporting	9	15	
	Total	60	100	

Based on table 3 it can be seen that from 60 respondents, mothers in labor who get support from family counted 45 (75%) higher than mother less support from family as much as 6 (10%).

4) Frequency Distribution Based on Selection of Birth Attendants of Mothers in Labor

Table 4 Frequency Distribution Based on Selection of Birth Attendants of Mothers in Labor

No	Selection of Birth Attendants	Frequency	Percentage
1	Skilled Birth Attendants	40	66,67
2	Non Health Personnel	20	33,33
	Total	60	100

Based on table 4 it can be seen that from 60 respondents, mothers who choose skilled birth attendants were 40 people (66.67%), which is higher as compared to those who did not choose skilled birth attendants or non health personnel which were 20 mothers (33.33%).

B. Bivariate Analysis

Relationship between Maternal Knowledge and the Use of Childbirth Facilities in Area Auxiliary Primary Health Center (Pustu) Malawele Table 5 Relationship between Maternal Knowledge and the Use of Childbirth Facilities in Area Pustu Malawele

Kno wled ge		Asy mp. Sig					
	Utilize		Not	%	f		
Goo d	38	84,4	7	15,5 6	45	100	0,00
Less	2	13,3	13	86,7	15	100	<
Total	40	66,7	20	33,3	60	100	0,05

Based on Table 5 shows the maternity mothers who utilized the delivery assistance facility with skilled birth attandants were 38 mothers (84.44%) or greater on mothers with good knowledge as compared to mothers with less knowledge 2 mothers (13,33%). Meanwhile, mothers in labor who did not utilize the delivery facility or assisted by non health personnel were higher 13 (86.67) for mothers with less knowledge. Mothers with good knowledge who did not utilize health facilities were 7 (15.56%). The result of Chi Square test with significance level 0,05 shows the value of Asymp.Sig 0,00<0,05 It means Ha accepted and H0 is rejected, so there is relationship between knowledge and the utilization of delivery facility at area Pustu Malawele Aimas District of Sorong Regency Year 2015.

Relationship between Family Income with the Selection of Birth Attendants in Area Pustu Malawele

Tabel 6 Relationship between Family Income with the Selection of Birth Attendants in Area Pustu Malawele

Selection of Birth Attendants									
Income	Skilled Birth Attendants	%	Non Health	%	f	%	Asymp. Sig		
High	28	84,8	5	15,1	33	10 0	0,439		
Low	12	44,4	15	55,5	27	10 0	>0,05		

In Table 6 it can be seen that from 60 respondents, mothers with high family income and choosing skilled birth attendants as many as 28

mothers (84.85%) which was higher than low family income and choosing labor assisted by skilled birth attendants as much as 12 mothers (44.44%) whereas mothers with high family income who chose to give birth with non-health personnels were 5 mothers (15.15%) fewer than low income families of 15 mothers (55.56%). The result of Chi Square test with significance level 0,05 shows 0,439>0,05 which means Ha accepted H0 is rejected, so there is no relationship of mother's family income with selection of birth attendants in Malawele Urban Village, Aimas District, Sorong Regency 2015.

C. Relationship of Family Support to the Utilization of Childbirth Facilities in Malawele Urban Village, Aimas District, Sorong Regency Year 2015

Table 7 Relationship of family support with utilization of childbirth facility in Malawele Urban Village, Aimas District Sorong Regency Year 2015

Family Support	Utilization of Childbirth Facility				То	otal	
	Skilled Birth Attendants	%	Non Health Personnel	%	ц	%	Asymp. Sig
Support ing	38	84, 4	7	15, 5	45	100	
Not Supporting	2	13, 3	13	86, 6	15	100	0,00 < 0,05
Total	40	66, 6	20	3,3 3	60	100	

Based on Table 7 shows that mothers in labor was found the highest 38 mothers (84.44%) who received the support of the family and the lowest 2 mothers (13.33%) were mothers with no family support. This finding was different with mothers in labor assisted by non health personnel that found higher with 13 mothers (86.67) in mothers with no family support and less in mothers with family support of 7 mothers (15.56%). The result of Chi Square test with significance level 0,05 shows 0,00<0,05 which means that Ha accepted and H0 is rejected, so there is relationship of family support with the utilization of childbirth facility in

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Malawele Urban Village, Aimas District, Sorong Regency.

DISCUSSION

a. Relationship between Knowledge and the Utilization of Childbirth Facilities in Malawele Urban Village, Aimas District, Sorong Regency year 2015

Knowledge is the result of knowing, this happens after people sense of a particular object. Sensation occurs through the human senses, namely the sense of sight, hearing, smell, taste, and touch. Much of human knowledge is obtained through the eyes and ears (Notoatmodjo, 2003). The results of this study indicate that mothers in labor assisted by skilled birth attendants with good knowledge are greater than 38 mothers (84.44%) as compared to mothers less knowledge of 2 mothers (13.33%). Mothers who do not utilize childbirth facilities or had labor assisted by non health personnels were 13 mothers (86.67%) in lesser and 7 mothers (15.56%) with good maternal knowledge.

The statistical test results obtained by Chi Square test of 0.00<0.05 so that there is a significant relationship between the materna knowledge with the utilization of labor facilities in Malawele Urban Village, Aimas District Sorong Regency year 2015. This condition reflects the knowledge has a close relationship with the utilization of childbirth facilities, meaning that the higher the knowledge of mother then the higher the tendency of mother to choose to utilize adequate chilbirth facilities. The results of this study are supported with study conducted by Adriana in East Sumba in 2014 which states that there is a significant relationship between knowledge and utilization of childbirth facilities.

Meanwhile, this study is not supported with the research conducted by Juliwanto (2008) on factors influencing the decision to choose a birth attendants in Babul Subdistrict, based on logistic regression test results found that there is no relationship of knowledge and the selection of birth attendants.

b. The Relationship between Family Income and the Selection of Birth Attendant In Malawele Urban Village, Aimas District, Sorong Regency Year 2015

The result of the research shows that based on family income, it is known that the mothers who

chose a birth attendants by non-health workers with low family income of 55.56%, whereas the mothers who chose skilled birth attendants with low family income was equal to 44.44%. The statistical test results obtained Chi-Square test of 0.439>0.05 so that there is a significant relationship between the family income and the selection of birth attendants in Malawele Urban Village, Aimas District, Sorong Regency 2015.

This indicates that families with low incomes will switch to utilize non health personnel or in Indonesia usually called dukun bayi in childbirth assistance, this is because the fees or rates charged by the non health personnel or dukun bayi tend to be much cheaper than the rates by midwives or other medical personnel. This situation reflects that mothers of families with high incomes tend to be more dominant in choosing health workers than non-health workers (dukun bayi) whereas childbirth assisted by "dukun bayi" are at risk for maternal health. In Indonesia, non-health personnel (dukun bayi) deliveries are 50-60% mainly in rural areas. Childbirth assisted by dukun bayi presents various problems and the main causes of high maternal and perinatal mortality and morbidity. "Dukun bayi" can not know the danger signs of the birth process. Inadequate childbirth care may result in prolonged labor, intrauterine fetal death, uterine rupture, bleeding (due to improper assistance, perineal tear, placental retention, placenta rest) and asphyxia in newborn, infection or labor trauma (Syafrudin, 2009).

This findings are in accordance with the study conducted by Neni Wulansari (2011) entitled "The Relationship Between Economic Status and Mileage of Pregnant Women With Selection of Birth Attendants in Ngendrokilo Village, Magelang", showing 56 respondents with low family income of 12 mothers had delivery assisted by non-health personnel and 5 mothers with high family income gave birth in non-health workers.

From the results of an interview from one of the *dukun bayi* on the Terong Street, the delivery assisted by a *dukun bayi* costs Rp. 300.000, starting from the second stage of delivery until the umbilical cord loose. Meanwhile, if the mothers in labor choose delivery in the health facilities for free because it is covered by the government if the mother has BPJS or health insurance card.

Therefore, midwives have a role to improve public education that is directing the selection childbirth facilities to have safe childbirth, postpartum supervision and preparation to care for

Faculty of Psychology and Health, UIN Sunan Ampel 111 Surabaya, October 9-11, 2018 infants and breastfeeding, and the importance of breastfeeding for 2 years and join care.

c. The Relationship between Family Support and Utilization Childbirth Facilities in Malawele Urban Village, Aimas District, Sorong Regency Year 2015

Support can be defined as either functional linkage or social ties that include emotional support, encouraging expression and feeling, giving advice or information, and providing material assistance. Family support refers to social support by family members as being accessible to the family (social support may or may not be used, but family members view that supportive people are always ready to provide help and assistance if necessary) (Friedman, 1998).

The results of this study indicates mothers in labor who utilize chilbirth facilities were 38 mothers (84.44%) with family support and 7 mothers (15.56) with no family support chose childbirth facilities and to be assisted by skilled birth attendants.

The statistical test results obtained by Chi Square test of 0.00<0.05 which means there is a significant relationship between family support and utilization of childbirth facilities in Malawele Urban Village, Aimas District, Sorong regency Year 2015. The results of this study are in line with study conducted by Nilasari (2013), which states that there is a relationship between family support and utilization of antenatal care.

This study is not supported with study conducted by Adriana (2014), which states that there is no relationship between family support and utilization of chilbirth facilities. The difference in the results of this study with other studies, because of differences in the analysis of the data. This is also due to the support provided by the family do not come from family's awareness but from the advice of others such as dukun bayi, health workers (midwives) and influential people in the family.

According Sarwono (2003), support is an effort given to others, both morally and materially to motivate the person in carrying out the activities. Husbands/families who provide support to the wife in pregnancy examination, will use more antenatal services, so the support of the husband/family will be more influential to mother in motivation of utilizing the antenatal services.

4 CONCLUSION

There is significant relationship between maternal knowledge, family income, and family support in utilization of childbirth facilities in Malawele Urban Village, Aimas District, Sorong Regency Year 2015.

Recommendation

1. Health Care Institution/Primary Health Centers

The results of this study can be used as additional consideration in improving the quality of midwifery services to mothers in labor especially through communication, information about the function of BPJS card and how to get it, education and motivation so that the pregnant mothers realize the importance of giving birth in health facilities Mothers in Labor

2. Mothers in Labor Recommended t

Recommended to all pregnant mothers to have antenatal care for monitoring their pregnancy to a health worker minimum at <12weeks gestational age to identify early complications during pregnancy and improve maternal and neonatal health and receive services that are meet the standards, choose delivery at the health facility as well as assisted by skilled birth attendants.

3. The Researcher

It is recommended to use the results of this study as a basis for further research with particular utilization of health facilities that have been provided by the government to the public.

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