Relationship Between Compliance With Health Protocols Against ANC Visits In Pregnant Women In The Pandemic Period Of Covid-19

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ABSTRACT

Background: The Covid 19 pandemic situation has hurt many sectors, including in the health sector, especially in maternal and infant health services. On the other hand, during Antenatal Care, pregnant women are afraid to come to health facilities because they are so scared of contracting them not to have their pregnancy checked. It can endanger the pregnancy of the mother or the fetus during pregnancy because it cannot detect the dangerous signs of pregnancy early.

Objectives: The study aims to analyze the relationship between the protocols for implementing health protocols on ANC visits to pregnant women during the Covid-19 pandemic in the PMB area of Mojokerto Regency in 2020.

Research Methods: This research method is to use an analytical design using a cross-sectional approach. The sampling technique used accident sampling, a total of 60 pregnant women.

Results: The results of the study using Chi-Square analysis showed that there was no relationship between educational variables and ANC visits (p-value = 0.087 > 0.05); there was a relationship between work variables and ANC visits (p-value = 0.001 < 0.05), and there was no relationship. The adherence variable applied the Health Protocol with ANC visits (p-value = 0.457 > 0.05).

Conclusion: This study concludes that there is no relationship between compliance with implementing the Health Protocol with ANC visits to pregnant women during the Covid 19 period.

Keyword: Adherence to Implement Health Protocols, ANC Visit

INTRODUCTION

Antenatal care is a combination of antenatal care with several other programs requiring intervention during pregnancy, aiming to provide comprehensive and quality services (Dainty Maternity dkk., 2017). Coronavirus disease 2019 (Covid-19) is currently a disease that is endemic to almost all over the world. Covid-19 infection can cause mild, moderate or severe symptoms. The main clinical symptoms that appear are fever (temperature> 38°C), cough and difficulty breathing. Besides, it can be accompanied by severe shortness of breath, fatigue, myalgia, gastrointestinal symptoms such as diarrhoea and other respiratory symptoms (Obstetri, P. I. S. R. P & Tahun, D. G. I, 2020).
Pregnancy checks during the Covid-19 pandemic provide various concerns, especially if you have to come to the hospital regularly. The current condition is the same as the previous condition, and it's just that with the presence of Covid-19, you must pay more attention to health protocols (Phipps, S. J dkk., 2020). Pregnant women often feel anxious when they want to do a pregnancy check during the coronavirus pandemic. Since Indonesia has been affected by COVID-19, visiting hospitals is highly discouraged (except in an emergency). The hospital itself is indeed an area at high risk of contracting the Coronavirus. However, pregnant women still have to carry out ANC examinations not to endanger pregnant women and their babies. In conducting ANC visits, pregnant women are required to apply health protocols (Zahrotunnimah, Z, 2020).

Community compliance in implementing health protocols in several areas has decreased. Discipline in implementing 3M (wearing masks, washing hands using soap, and maintaining distance and avoiding crowds) is essential in preventing the Coronavirus transmission, aka Covid-19. The decrease in compliance in implementing this health protocol is reflected in the increasing number of regions with low adherence to wearing masks (Mustofa A & Supriadi D, 2020).

Based on data from the Surabaya City COVID-19 Task Force in June 2020, there are 54% of places of worship that have not implemented the COVID-19 health protocol, while 60.6% do not comply with the COVID-19 health protocol to maintain distance (Simanjuntak, D. R dkk., 2020). In Mojokerto Regency, the total number of pregnant women was 18,559 people, K4 service visits in Mojokerto Regency in 2017 were 16,468 (88.7%). For 2016 the absolute number of K4 was 15,854 (85%). K4 visits in 2017 experienced an increase. However, the rise in K4 was still above the provincial target of 80%. There has been an increase in K4 because people are aware of the importance of examining at least 4 times of gestation (Dinkesh Mojokerto, 2017) (Dinas Kesehatan Mojokerto, 2017).

Knowledge, age, education, occupation, parity, family support, and health service providers’ attitude are factors that can influence pregnant women to make ANC visits. ANC examination regularly every trimester is important for pregnant women, especially if there are complaints. At the Covid-19 outbreak, pregnant women must continue to carry out pregnancy checks continuously by adhering to health protocols. To increase awareness of Covid-19 transmission, steps taken to prevent Covid-19 in pregnant women are: applying the triad of prevention of Covid-19 transmission, namely wearing a mask, washing hands with soap and running water, avoiding touching the face (eyes, nose, mouth) without washing hands, and applying physical distance (maintaining a distance of at least 1 meter from other people) (Obstetri, P. I. S. R. P & Tahun, D. G. I, 2020).

Based on the data and problem phenomena above, the researchers are interested in knowing the relationship of compliance with implementing the Health Protocol with ANC visits to pregnant women during the Covid 19 period.

METHOD
The research method in this study used a correlation analytic design with a cross-sectional approach. The research location was in the Midwives Practice (PMB) Mojokerto Region, and the time of the study was from October to December 2020. In this study, the population used was all pregnant women in PMB Mojokerto Region. The sampling technique used accidental sampling, with as many as 60 respondents. The data that has been processed is analyzed to determine the Compliance Relationship of implementing the Health Protocol with ANC visits to pregnant women during the Covid 19 period using the Chi-Square test using the SPSS for window version 25.0 computer program.

**FINDING AND DISCUSSION**

The relationship of compliance with implementing the Health Protocol with ANC visits to pregnant women during the Covid 19 period

1. **Education Relationship with ANC Visits**

Table 1 Distribution of ANC visits by the level of education

<table>
<thead>
<tr>
<th>Education</th>
<th>ANC Visit</th>
<th>Total</th>
<th>ρ-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete</td>
<td>Incomplete</td>
<td></td>
</tr>
<tr>
<td></td>
<td>F</td>
<td>%</td>
<td>F</td>
</tr>
<tr>
<td>SMA/SMK</td>
<td>17</td>
<td>28</td>
<td>1</td>
</tr>
<tr>
<td>SMP</td>
<td>13</td>
<td>22</td>
<td>6</td>
</tr>
<tr>
<td>SD</td>
<td>18</td>
<td>30</td>
<td>5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>48</td>
<td>80</td>
<td>12</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2020

Based on table 1, the distribution of ANC visits based on education level shows that the highest number of mothers with low education who made complete ANC visits were 18 respondents (30%). The lowest number was mothers who had higher education who did not cause total ANC visits as many as 1 respondent (2%).

Based on the statistical test, the value of ρ-value = 0.087 > 0.05 indicates no significant relationship between maternal education and ANC visits.
2. **Employment Relationship with ANC Visits**

Tabel 2 Distribution Of ANC Visits By Profession

<table>
<thead>
<tr>
<th>Profession</th>
<th>ANC Visit</th>
<th>Total</th>
<th>ρ-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete</td>
<td>Incomplete</td>
<td>F</td>
</tr>
<tr>
<td>Work</td>
<td>12</td>
<td>5</td>
<td>17</td>
</tr>
<tr>
<td>Does not Work</td>
<td>36</td>
<td>7</td>
<td>43</td>
</tr>
<tr>
<td>Total</td>
<td>48</td>
<td>12</td>
<td>60</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2020

Based on table 2, the distribution of ANC visits based on work shows that the highest number of mothers who do not work complete ANC visits are 36 respondents (60%), and the lowest number is mothers who work who do not total ANC visits as many as 5 respondents (8%) 

Based on the statistical test, the value of ρ-value = 0.001 <0.05, It can be concluded that there is a significant relationship between maternal occupation and ANC visits. The results of this study mean that if the mother does not work, there is a lot of free time to make ANC visits.

3. **Compliance Relationship applies Health Protocol with ANC Visit**

Table 3 Distribution of ANC visits based on adherence to implementing Health Protocols

<table>
<thead>
<tr>
<th>Compliance applies Health Protocols</th>
<th>ANC Visit</th>
<th>Total</th>
<th>ρ-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Complete</td>
<td>Incomplete</td>
<td>F</td>
</tr>
<tr>
<td>Obey</td>
<td>46</td>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>No Obey</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>48</td>
<td>12</td>
<td>20</td>
</tr>
</tbody>
</table>

Source: Primary Data, 2020

Based on table 3, the distribution of ANC visits based on Compliance with Health Protocols shows that the highest number of mothers who comply with the Health Protocol and complete ANC visits are 46 respondents (77%), and the lowest number is mothers who do not comply with the Health Protocol and make ANC visits. Complete as many as 2 respondents (3%).

Based on the statistical test, it was found that the value of ρ-Value = 0.457> 0.05, it can be concluded that there was no significant relationship between adherence to implementing the Health Protocol with ANC visits.
DISCUSSION
Compliance Relationship applies the Health Protocol with ANC visits to pregnant women during the Covid 19 period.

1. ANC visits based on the education level

Based on table 1, the distribution of ANC visits based on education level shows that the highest number of mothers with low education who made complete ANC visits were 18 respondents (30%), and the lowest number was mothers who had higher education who did not cause total ANC visits by 1 respondent (2%).

The education referred to in this study is the respondent's last education. Formal education produces behaviours adopted by individuals, but at some people, the level of education does not affect the pattern of attitudes; this is more likely to come from the environment that each individual accepts. The story of education can affect a person's ability and knowledge in implementing healthy living behaviours (Riauwi, 2014). Based on the results of statistical tests, it can be seen that education has no relationship with antenatal care visits (ANC) with a value of ρ-value = 0.087 > 0.05.

The research results in the field using a questionnaire concluded that most respondents have an elementary education level. Education is essential because it is the basis for understanding whether or not someone receives information. Information can be more readily accepted and adopted by people with a higher level of education than the primary level. However, it does not rule out that mothers who have low education will have complete antenatal care visits and according to the ideal time if supported by age and occupation. With (Awaliyah D.N, 2018) this statement states that there is no relationship between education and antenatal care regularity. Education is a continuous effort made by adults to direct, guide and develop the potential and nature of children who have been born since birth. Education can be done after the child is born, even long before Islam gives the signs, namely since someone chooses a mate. This event signifies the importance of preparing righteous and pious descendants as successors to future generations who can fight for the existence of Islam. The educational process since the child is in the womb is also called prenatal education. This period starts from the conception period (meeting the sperm and ovum). This process develops until the child is born into the world, which takes approximately 9 months and 10 days.

The process of education during pregnancy is not directly for the fetus in the womb. However, the behaviours that are carried out by both parents significantly affect the fetus in the womb. The psychological contract between the elderly, especially the mother, and the fetus is called education in the womb.
2. **ANC visit based on work**

Pregnant women who work do not have free time to visit ANC because they have to ask for permission or not come to work. Pregnant women who work do not have free time to do ANC because they have to ask permission or not come to work. This statement is strengthened by the number of pregnant women who work for incomplete ANC visits as many as 5 respondents (8%). Meanwhile, 36 respondents (60%) did not have a complete ANC visit. According to research by (Sari, K. I. P & Efendy, H. V, 2017), it is said that working mothers will have less time to check their pregnancies and spend more time working.

Meanwhile, mothers who do not work will have plenty of time to have a pregnancy checkup. In some people in Indonesia, Work is an important thing that must be a priority because it is related to income that can be used to meet daily needs. This statement is a developing model, especially in developed countries like Indonesia. A pregnant woman who works tends to spend her time doing work activities rather than antenatal care visits. In a society with a middle to lower economy, making work a priority is natural, considering that existing health services have not provided the best courtesy to the community, especially in people with middle to lower economies. This situation will indirectly reduce the motivation of pregnant women to make antenatal care visits. 12 respondents (20%) who worked but had complete ANC visits (20%) could have asked for permission at the workplace or because the mother's work schedule did not require it from morning to evening to still have her pregnancy checked regularly.

3. **ANC visit based on compliance in implementing Health Protocols**

Based on table 3, the results show that pregnant women made complete ANC visits and obeyed the Health Protocol as many as 46 respondents (77%). Even though during the COVID-19 pandemic, many pregnant women are worried about having their pregnancies checked in the hospital for fear of contracting the Coronavirus. They are still motivated to carry out ANC checks for the health of themselves and their fetuses. The government’s recommendation to implement the Health Protocol does not necessarily motivate pregnant women to make regular visits, and table 5.9 shows there are still 2 (3%) pregnant women who do not comply with the Health Protocol but do complete ANC visits as many as two respondents (3%).

Based on the statistical test, it was found that the value of ρ-Value = 0.457 > 0.05, it can be concluded that there was no significant relationship between adherence to implementing the Health Protocol with ANC visits. It can be supposed that there is no relationship between the compliance variable implementing the Health Protocol with ANC visits. Mothers who are aware that Health Protocols are essential during this pandemic do not affect antenatal care visits (ANC). Compliance with implementing the Health Protocol referred to in this study includes respondents who want to do 3 M, namely wearing a mask,
keeping a distance from crowds, and washing hands with soap in running water. However, how knowledgeable about health protocols by complying with and implementing behaviours for 3M in this era of the COVID-19 pandemic in everyday life is still a common homework. In this study, the majority of respondents gave positive answers regarding health protocols. However, in the field, the researchers found that still mothers who checked or health workers did not carry out physical distancing, wash their hands, and even wear a mask. This action shows the mismatch of the answers given by the respondent. Even so, respondents who are willing to comply with health protocols or do not comply with health protocols still have their pregnancies checked because they know the importance of carrying out pregnancy examinations. (Al-Ateeq M. A & Al-Rusaiess A. A, 2015) in their research said that knowledge of antenatal care is essential in antenatal care for better pregnancy outcomes, for example, such as providing counselling, learning about food during pregnancy, the dangers of pregnancy, and detecting the risks of pregnancy that can be risky. High. The results of this study are also supported by (Surniati, N & Arifin, M. A, 2013) research, which shows that knowledge has an essential role in determining a person’s attitude because knowledge will lead someone to think and try to take the right action.

The overall results of the research on student perceptions of online English learning in the Nursing Program D3 of Stikes Bina Sehat PPNI Mojokerto were 35 students. categories or groups according to available levels which include 5 categories, namely: very positive, positive, moderate, negative and very negative. Based on the results of the questionnaire, students have positive and negative opinions about online learning that is carried out. Some study participants prefer face-to-face or offline learning to online learning. Study participants reported that online study time was very limited. Interaction with teachers and students is also very limited. They claim that face-to-face learning helps them better understand the material explained by the teacher, and that they can learn and work collaboratively more optimally. Thus, all study participants liked and tended to feel more comfortable either face-to-face or offline learning. This is supported by (Ardiyanto dkk., 2021) which explains that a student in a class is generally more enthusiastic if they have active collaborators. On the other hand, the results of another study showed that about 2,000 study participants prefer to study online. this is because they have the ability to browse the subject matter using internet sources. This can help them understand and explore the material to the fullest. Research participants also revealed that they have positive perceptions when teachers use certain platforms or applications, such as Google Classroom, Edmodo, YouTube, Google Meet, SPADA, and others.

Based on the results of the study, the research participants explained that not all teachers explained the material clearly, so that students did not understand the material given. This is because the teacher only provides material in Google Class without detailed explanations or instructions. Research participants think that if teachers use Zoom or Google Meet to explain the material, it will encourage them to understand the learning
material. Direct interaction also encourages them to ask questions about relevant material. This is supported by the opinion (Cakrawati, 2017) who asserts that the use of platforms or applications can be utilized optimally by teachers to establish good interactions with their students in the online learning process classroom.

This e-learning activity is certainly a challenge for students. Students must be able to adapt to situations and conditions in e-learning mode. Therefore, all study participants believe that teachers should provide simpler instructions in online learning activities. This simplification of instruction is necessary for students to slowly build an understanding of the subject. In addition, research participants suggested that in addition to simplifying instruction, teachers should be more active in interacting and providing feedback on assigned tasks. Another challenge faced by research participants is the emergence of feeling bored and tired with the e-learning process that has been carried out so far. So that research participants hope that teachers will have more innovations and interesting learning variations such as vocabulary quiz, games, and assignment.

This is in accordance with (Molina-Carmona dkk., 2018) who asserts that learning activities can cause boredom and discomfort if the teacher is not good at communicating and establishing lively interactions with students. Students should be involved as the subject of the activity rather than the subject of the activity. A good situation, environment and interaction with teachers and other students can encourage the creation of an optimal learning process.

CONCLUSION
There was no relationship between compliance with the Health Protocol and ANC visits.

REFERENCES


