

Analysis Of Husband's Support For The Application Of Pregnancy Class At Home Towards Preparation For Delivery Of Pregnant Women In The Trimester III In The Work Area Of Kandangan Public Health Center, Kediri Regency

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ABSTRACT

Low maternal knowledge about the benefits of prenatal exercise so that pregnant women do not take prenatal classes. Many pregnant women do not take prenatal classes because no one accompanies them because other family members, especially their husbands, are at work. Husbands have a significant role in the compliance of pregnant women in taking prenatal classes. To improve the implementation of prenatal classes, it can be done by increasing several factors that can influence the implementation of prenatal classes in Trimester III, including increasing the role of the family, especially husband's support. The purpose of this study was to analyze the relationship between husband's support for the application of prenatal classes at home and preparation for childbirth for pregnant women in Trimester III. This study uses a quantitative research method using a cross-sectional approach. The population studied were pregnant women in the third trimester in March in the Kandangan Health Center Work Area, Kediri Regency, totaling 35 people, using the total sampling technique. With the independent variable being husband's support for the application of prenatal classes at home, and the dependent variable being preparation for childbirth for pregnant women in the third trimester. The research results were analyzed using the Mann-Whitney test statistically, it was found that the Exact Sig.(2-tailed) p value obtained a result of 0.41, which means that the Exact Sig.(2-tailed) p value > 0.05, so accepted means there is a relationship. Husband's support for the application of home pregnancy classes for preparing pregnant women for childbirth in the third trimester in the working area of the Kandangan Health Center, Kediri Regency. Husband's support is the most dominant factor influencing the participation of pregnant women in pregnancy classes. Motivation and support from the husband are things that influence the preparation of childbirth for pregnant women in the third trimester in applying pregnancy classes at home. When the husband supports and is involved in implementing pregnancy exercises at home, it can make pregnant women in the third trimester more prepared to face childbirth.

I. Introduction

The low coverage of pregnant women's classes causes the risks that occur in pregnant women to not be detected immediately, the impact is the occurrence of pregnancy and childbirth complications that cannot be anticipated immediately. Pregnancy is a physiological event experienced



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by women. Every pregnancy is at risk of experiencing pregnancy disorders called complications that can occur during pregnancy, childbirth and postpartum. These pregnancy disorders are a direct cause of maternal death (Sasniatari, 2017).

Based on the Annual report at the Health Center, it is known that in 2017, the coverage of pregnancy classes reached 82%, then decreased in 2018 by 81% and in 2019 there was a sharp decline of 78%. Preliminary interviews with 10 pregnant women found that 5 mothers had never attended pregnancy classes, 3 people attended pregnancy classes sometimes, and 2 people always attended pregnancy classes.

According to asrina 2010, the reason why pregnant women do not attend prenatal classes is because pregnant women have to work and do not have time to attend prenatal classes. Sasniatari (2017) stated that mothers' low knowledge about the benefits of prenatal exercise means that pregnant women do not attend prenatal classes. Lucia (2015) stated that many pregnant women do not attend prenatal classes because there is no one to accompany them because other family members, especially husbands, are at work. Stated that husbands have a significant role in the compliance of pregnant women in attending prenatal classes. To improve the implementation of prenatal classes, it can be done by increasing several factors that can influence the implementation of Trimester III prenatal classes, including increasing the role of the family, especially the support of the husband.

Family as the closest environment of the mother greatly helps the mother to undergo and care for her pregnancy. Support from the husband, parents and all family members during pregnancy will affect the mother's health. Changes and adaptations of the mother from the first to the third trimester should be understood by the husband and family. Giving careful attention from the husband and family to the changes that occur will provide a solution by encouraging the pregnant mother (Bartini, 2012). There are several factors that cause mothers not to participate in pregnancy exercises, namely husband's support, lack of knowledge, and distance from home to the place of pregnancy classes (clinic). Forms of husband's support include instrumental support, for example not being able to take her to the clinic because the pregnancy exercise schedule coincides with the husband's working hours, this can be caused because the husband has gone to work and the husband considers his wife capable of being alone, information support: the husband does not know the benefits of pregnancy exercises, so the husband does not really support his wife to participate in pregnancy classes, emotional support: the husband considers that his wife can be independent in pregnancy class activities, assessment support: the husband never praises his wife while attending pregnancy classes (Desi W., 2014)

Based on these conditions, it is necessary to conduct research related to the analysis of husband's support for the application of home pregnancy classes for the preparation of childbirth in the third trimester of pregnant women in the work area of the Kandangan Health Center, Kediri Regency. The general objective of this study is to analyze the relationship between husband's support for the application of home pregnancy classes for the preparation of childbirth in the third trimester of pregnant women, with the specific objectives of identifying husband's support for the application of home pregnancy classes and identifying preparation for childbirth in the third trimester of pregnant women.

II. Methods

This study uses a quantitative research method using a cross-sectional approach. The population studied were pregnant women in the third trimester in March in the Kandangan Health Center Work Area, Kediri Regency, totaling 35 people. The criteria used consisted of inclusion criteria consisting of pregnant women in the third trimester who attended pregnancy classes in the Kandangan Health Center work area in March and exclusion criteria consisting of pregnant women in the first and second trimesters in March and mothers who were in unhealthy conditions (sick). The sampling technique determined in this study included non-probability sampling of the total sampling type.

The selection of statistical tests is determined based on the purpose of the analysis and the scale of the variable data. Analysis of husband's support for the application of home-based pregnancy classes

for the preparation of childbirth for pregnant women in the third trimester in the work area of the Kandangan Health Center, Kediri Regency, was analyzed using the Mann-Whitney test, where this technique uses computer assistance, with a significance level (α) of 0.05. The reason for choosing this test technique is because this study aims to determine the relationship between husband's support for the application of home-based pregnancy classes for the preparation of childbirth for pregnant women in the third trimester. Reading the test results: Exact Sig. (2-tailed) p value <0.05 then accepted means there is a relationship H₁ Husband's support for the application of home pregnancy classes for preparing pregnant women for childbirth in the third trimester in the working area of the Kandangan Health Center, Kediri Regency. Exact Sig. (2-tailed) p value > 0.05 then H₀ rejected means there is no relationship H₀ Husband's support for the application of home pregnancy classes for preparing pregnant women for childbirth in the third trimester in the working area of the Kandangan Health Center, Kediri Regency.

III. Results and Discussion

The results presented must be sequential from the main results to the supporting results. Use units of measurement based on applicable international standards. You can add diagrams, tables, pictures, and graphs by completing them with narration.

1. The Respondent Characteristics

The following table, table 1, shows the frequency distribution of the learner characteristics.

Table 1. respondent characteristics

No.	Respondent Characteristics	Frequency	Percentage (%)
1	Mother's Age		
	< 20 years	2	5.7%
	20 – 35 years	29	82.9%
	> 35 years	4	11.4%
2	Mother's Education		
	Did Not Finish School	0	0.0%
	Elementary, Middle School	13	37.1%
	SENIOR HIGH SCHOOL	16	45.7%
	College	6	17.1%
3	Mother's Job		
	Housewife	22	62.9%
	Private	5	14.3%
	Self-employed	7	20.0%
	civil servant	1	2.9%
4	Pregnancy		
	1	17	48.6%
	2	11	31.4%
	>=3	7	20.0%
5	Husband's Age		
	< 20 years	0	0.0%
	20 – 35 years	25	71.4%
	> 35 years	10	28.6%
6	Husband's Education		
	Did Not Finish School	0	0.0%
	Elementary, Middle School	3	8.6%
	SENIOR HIGH SCHOOL	19	54.3%
	College	13	37.1%
7	Husband's Job		
	Farmers, Workers	4	11.4%
	Private	15	42.9%
	Self-employed	12	34.3%

civil servant	4	11.4%
Amount	35	100%

Source: research result data, March

Based on Table 1, the results of the study conducted on pregnant women in the third trimester who took part in pregnancy classes in March in the Kandangan Health Center Work Area, Kediri Regency, showed that the characteristics of respondents based on their age were known that almost all respondents were aged 20-35 years, namely 29 respondents (82.9%). The characteristics of respondents based on their education were known that almost half of the respondents (45.7%) had a high school education. The characteristics of respondents based on their education were known that almost half of the respondents (45.7%) had a high school education. The characteristics of respondents based on their jobs were known that most of the respondents (62.9%) had jobs as housewives. The characteristics of respondents based on gravida were known that most of the respondents were in their first pregnancy, namely 17 respondents (48.6%). Meanwhile, the characteristics of the respondents' husbands based on their husbands' ages were known that most were between 20-35 years old, namely 25 respondents (71.4%); based on the husband's education, it was known that most had a high school education, namely 19 respondents (54.3%); and based on the husband's job, it was known that almost half had private jobs, as many as 15 respondents (42.9%).

Table 2. Husband's Support for Pregnant Women's Class Applications at Home

No.	Husband Support	Frequency	Percentage (%)
1	Does not support	18	51.43%
2	Support	17	48.57%
	Amount	48	100%

Source: Research Result Data, March

Based on Table 2, it is known that the husband's support for the application of the third trimester pregnancy class at home in the Kandangan Health Center Work Area, Kediri Regency, is known that the majority of respondents do not support it, namely 18 respondents (51.43%) and almost half of the respondents support it, namely 17 respondents (48.57%).

Pregnant women's classes are a means of learning together in the form of face-to-face in groups that aim to improve mothers' knowledge and skills regarding pregnancy, pregnancy care, childbirth, postpartum care, newborn care in order to form the readiness of pregnant women in facing childbirth as well as knowledge about myths, infectious diseases and birth certificates. This pregnant women's class group is related to social interaction between pregnant women, so that they can share information about pregnancy and the awaited childbirth (Ministry of Health, 2010). Husband's support is one source of social support that comes from the family environment. The role of the family, especially the husband, is very necessary for pregnant women, the involvement and support given by the husband during pregnancy will strengthen the relationship between children, fathers, and husband and wife. The support received by pregnant women will make them calm and comfortable in their pregnancy to realize a healthy pregnancy (Asrinah, 2010). In the third trimester of pregnancy, psychological changes in pregnant women are increasingly complex and increase compared to the previous trimester due to the increasingly large pregnancy. Several psychological conditions that occur, such as emotional changes and discomfort, so that pregnant women need support from their husbands, families and medical personnel. Changes in the mother's emotions are increasingly changing and sometimes become uncontrolled. These emotional changes are the result of feelings of worry, fear, doubt and hesitation about the condition of the pregnancy. (Janiwarty and Pieter, 2013).

The results of the study showed that the husband's support for the application of prenatal classes at home was mostly (51.43%) in the less category, if we look at the data on the characteristics of the respondents where the husband's education was mostly high school education as much as 54.3% and college as much as 37.1% then this is contrary to the view of YB Mantra quoted by Notoatmodjo, education can influence a person including a person's behavior towards lifestyle, especially in motivating a participating attitude, the higher a person's education the higher their level of knowledge (Wawan and Dewi, 2010: 16-17). From here it can be concluded that a person's level of education does not guarantee their level of knowledge to participate. The most important person for a pregnant woman is her husband, especially in the third trimester of pregnancy, where physically and

psychologically the pregnant woman needs more attention, so in carrying out pregnancy exercises which are the application of prenatal classes that are recommended to be done at home during pregnancy, support from her husband is very much needed. However, considering the characteristics of the respondents, almost half of whom were their first pregnancy (48.6%), the husband had no previous experience in supporting pregnant women in the third trimester in carrying out pregnancy exercises at home. Husbands who mostly work as self-employed and private, which may not have much time to pay attention to the details of supporting the application of pregnancy classes, and assume that pregnant women understand better what they should do to maintain their pregnancy, this will certainly affect the behavior of mothers to do pregnancy exercises at home or not, and of course this comes back to pregnant women whether they understand the purpose of pregnancy exercises. In general, husbands will be happy if their partners are pregnant, especially if it is the first child that is certainly awaited. However, not all husbands understand what kind of support they should do.

Table 3. Preparation for Childbirth for Pregnant Women in the Third Trimester

No.	Preparation for Childbirth	Frequency	Percentage (%)
1	Good	2	5.71%
2	Enough	14	40%
3	Not enough	19	54.29%
Amount		48	100%

Source: Research Result Data, March

Based on Table 3, it is known that the preparation for childbirth of pregnant women in the third trimester in the Kandangan Health Center Work Area, Kediri Regency, is known that most respondents are lacking, namely 19 respondents (54.29%), almost half of the respondents' preparation is sufficient, namely 14 respondents (40%) and a small portion of the respondents' preparation is good, namely 2 respondents (5.71%).

By attending antenatal classes, knowledge, skills and motivation related to awareness to improve maternal and infant health, through birth planning and prevention of complications can be increased (Budiarini, 2014). At the end of each meeting of the prenatal class, prenatal gymnastics is carried out. Prenatal gymnastics is an extra activity/material in the prenatal class, if implemented, it is expected to be practiced after arriving home. The meeting time is adjusted to the readiness of the mothers, it can be done in the morning or afternoon with a meeting time of 120 minutes including 15-20 minutes of prenatal gymnastics (Ministry of Health of the Republic of Indonesia, 2011). Prenatal classes can improve skills and knowledge, so that they can change the mother's behavior and can improve the readiness of pregnant women in facing childbirth (Qurniasih, 2014).

Mothers who lack support from their husbands in the application of pregnancy classes at home, in this case doing pregnancy exercises, then the knowledge obtained to prepare for childbirth is almost half of the respondents (37.1%) categorized as lacking or meaning not doing pregnancy exercises at home. In addition, almost half of the respondents (48.6%) are their first pregnancy, where feelings of worry, fear, doubt and doubt about the condition of their pregnancy, as expressed by Janiwarty and Pieter (2013) are often experienced by pregnant women in the third trimester due to psychological conditions that occur, such as emotional changes and discomfort. As expressed by Yushmani (2018), partner support will increase the readiness of pregnant women in facing their pregnancy and childbirth process to preparing to become parents. Mothers who receive support from their husbands such as providing information about prenatal classes, taking their wives to and from prenatal classes, giving transportation money for their wives to go to prenatal classes, praising their wives for attending prenatal classes, or attending prenatal classes, listening to the material given by the prenatal class instructor, this will further motivate mothers to attend prenatal classes and pregnant women will be more motivated to follow the advice of the instructor to apply/do it again at home to be more prepared and confident in facing their labor. Psychologically and physically, pregnant women, especially in the third trimester, need more attention. The increasingly heavy burden due to the increasing age of the pregnancy also affects the enthusiasm of pregnant women to attend prenatal classes. Feelings of tiredness and increasing difficulty in mobility will also affect it, so that at home pregnant women do not do prenatal exercises. At this time, support and motivation from the husband are actually needed,

especially for primigravida pregnant women.

2. Analysis of Husband's Support for the Application of Pregnant Women's Classes at Home for Pregnant Women's Preparation for Childbirth in the Third Trimester

Based on the results of the research analysis, it is known that the Exact Sig.(2-tailed) p value obtained a result of 0.41, which means that the Exact Sig.(2-tailed) p value < 0.05 , so accepted means there is a relationship H₁ Husband's support for the application of home pregnancy classes for preparing pregnant women for childbirth in the third trimester in the working area of the Kandangan Health Center, Kediri Regency.

Husband's support makes wife happy, the 9-month pregnancy process that will be undergone by the wife, requires moral and mental support from the husband. Many changes will occur in the couple. She will experience physical and emotional changes (Musbikin, 2012). Husband and family support plays an important role in increasing the readiness of pregnant women in facing childbirth (Qurniasih, 2014). Support can be given by those closest to her (husband, family, friends, nurses, midwives or doctors). The birth companion should be someone who has been involved since the antenatal classes. They can make reports on the progress of the mother and baby by continuously monitoring the progress of labor (Walyani, 2015).

This is in accordance with research conducted that there is a significant relationship between husband's support and the use of pregnancy classes in the Harapan Raya Pekanbaru Health Center work area with a P value of $0.001 < 0.05$ OR 11.716, which means that pregnant women who receive support from their husbands will utilize pregnancy classes 11 times compared to mothers who do not receive support from their husbands. This is also supported by previous research conducted by Masini (2015) which showed that mothers who participated in pregnancy classes were more likely to participate actively in pregnancy classes, more likely to receive support from their husbands/families with a supportive category of 60.7% compared to mothers who received support from their husbands/families with a less supportive category. From the results of the statistical test, $p = 0.016$ (< 0.05) was obtained, meaning that there is a relationship between husband/family support and mother's participation in pregnancy classes. This study is also the same as the study conducted by Septiani (2013), there is a relationship between husband's support and the participation of pregnant women in pregnancy classes ($P = 0.000$ OR = 1330.57 IK 95% 82.5-21455.2). This husband's support is the most dominant factor influencing the participation of pregnant women in pregnancy classes. Motivation and support from the husband are things that influence the preparation of childbirth for pregnant women in the third trimester in applying pregnancy classes at home. When the husband supports and is involved in carrying out pregnancy exercises at home, it can make pregnant women in the third trimester more prepared to face childbirth, considering the purpose of pregnancy exercises is to make pregnant women healthy and to facilitate the birthing process by providing exercise movements to the muscles and body parts that will play the biggest role in the birthing process, for example the pelvic bone, abdominal muscles and thigh muscles, so that later the pregnant woman is expected to be able to have a normal birth smoothly and be able to...relax the mind, so that it can reduce the anxiety experienced by pregnant women in the third trimester. In the results of this study, it was found that most husbands did not support information support, this can be perceived that husbands assume that pregnant women understand and comprehend the purpose of pregnancy classes including pregnancy exercises, so husbands feel no need to provide encouragement to pregnant women to do pregnancy exercises while at home, because they assume that pregnant women understand better what to do. And in general because of being busy in meeting the family's economy, husbands rarely attend pregnancy classes, and consider pregnancy exercises to be sufficient during pregnancy classes, so they do not provide encouragement and motivation to pregnant women about pregnancy exercises that also need to be done at home.

IV. Conclusion

Based on the research results and discussion, the following conclusions can be drawn: Husband's support for the application of the third trimester pregnancy class at home is known that most respondents do not support, namely 18 respondents (51.43%) and almost half of the

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respondents support, namely 17 respondents (48.57%). Based on the knowledge obtained in the implementation of the pregnancy class in preparing for childbirth in third trimester pregnant women, it is known that most respondents are lacking, namely 19 respondents (54.29%), almost half of the respondents' preparation is sufficient, namely 14 respondents (40%) and a small part of the respondents' preparation is good, namely 2 respondents (5.71%). And the results of the research analysis show that the Exact Sig. (2-tailed) p value obtained a result of 0.041 which means that the Exact Sig. (2-tailed) p value <0.05 is accepted, meaning that there is a relationship between husband's support for the application of prenatal classes at home and preparation for childbirth for pregnant women in the third trimester in the Kandangan Health Center, Kediri Regency. The suggestions that can be conveyed in this study are for pregnant women to apply the knowledge gained from the prenatal classes into behavior at home, so that they can prepare for childbirth well; for husbands of pregnant women, it is advisable to provide support to pregnant women in implementing prenatal classes at home in order to prepare for the process of facing childbirth; for health workers, it is expected to provide knowledge to husbands of pregnant women about the role of husbands for pregnant women; for educational institutions, it is expected to increase the literature and scientific insight about husbands' support for pregnant women, especially related to the implementation of prenatal classes and their application at home to prepare for childbirth.*H₁*

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