

# Analysis Of Knowledge In Choosing Delivery Aid For Mothers In The Region Work Of Biromaru District Health Center Sigi Central Sulawesi Province

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## ARTICLE INFO

### Article history:

Received: 19<sup>th</sup> September 2015

Revised: 23<sup>rd</sup> October 2015

Accepted: 19<sup>th</sup> November 2015

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### Keywords:

Knowledge, Helper, Childbirth.

## ABSTRACT

According to the 2015 ministry of health of the republic of Indonesia data, the proportion of deliveries in health care facilities in Indonesia was 79%. This shows that the proportion of deliveries in non-health workers is still high. While in Central Sulawesi province, the proportion of deliveries in health care facilities is approximately 30%. The results of a preliminary study conducted by researchers in Loru Village, Biromaru Health Center Working Area, Sigi Regency, Central Sulawesi Province by interviewing 10 pregnant women, it was found that 5 (50%) pregnant women did not know about the signs and dangers of labor. The statement of one of the mothers was that there was a lack of knowledge in choosing the right birth attendant. This causes the behavior of mothers and family members to carry out pregnancy checks with midwives. The purpose of this study was to analyze the relationship between Knowledge and the Selection of Birth Assistance in mothers in Loru Village, Biromaru Health Center Working Area, Sigi Regency, Central Sulawesi Province. The design of this study was correlational analytic with a cross-sectional approach. The number of samples in this study was 37 respondents. Then for sampling using the Accidental Sampling technique. The data collection instrument used a questionnaire and data analysis used the Chi square test. The results of the study showed that most respondents had good knowledge about childbirth, which was 54.1%, in addition, most respondents chose to be assisted by health workers in giving birth, which was 83.8%. The results of the chi square test showed a relationship between knowledge and the selection of assistants with a P Value of  $0.012 < \alpha = 0.05$ . There is a Relationship between Knowledge and the Selection of Childbirth Assistants in Mothers in Loru Village, Biromaru Health Center Work Area, Sigi Regency, Central Sulawesi Province

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## I. Introduction

Maternal Mortality Rate (MMR) is one of the indicators of health development in Indonesia. Maternal Mortality Rate (MMR) is the number of maternal deaths that occur during pregnancy, childbirth and postpartum caused by pregnancy, childbirth, postpartum or its treatment, but not caused by accidents or injuries in every 100,000 live births. The low coverage of delivery assistance by health workers is one of the factors related to maternal and infant mortality rates (Ministry of Health of the Republic of Indonesia, 2015).

Assistance in childbirth by health workers is very important in efforts to reduce maternal mortality. The selection of a birth attendant is one of the reproductive rights of individuals in determining where to give birth and who will assist in the delivery. Safe delivery ensures that all birth attendants have the knowledge, skills and tools to provide safe and clean assistance, as well as provide postpartum care to mothers and babies.



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The selection of non-health workers to assist in childbirth often has an impact that will cause maternal and infant morbidity, as well as complications in childbirth, even death in mothers and their babies. Non-health workers to assist in childbirth cannot recognize the danger signs of childbirth, resulting in inadequate childbirth assistance. This is one of the indirect causes of maternal and newborn deaths.

According to the 2015 ministry of health of the republic of Indonesia data, the proportion of deliveries in health care facilities in Indonesia was 79%. This shows that the proportion of deliveries in non-health workers is still high. While in Central Sulawesi province, the proportion of deliveries in health care facilities is approximately 30% (ministry of health of the republic of Indonesia 2015).

Factors that influence pregnant women in choosing a birth attendant include knowledge. The better the knowledge of the mother and family members in this case in choosing the right birth attendant, the better the behavior in acting. Knowledge is an experience where the experience of the mother and family members about the birth attendant will change perceptions and add information about choosing the right birth attendant (Notoatmodjo, 2017).

Based on the results of a preliminary study conducted by researchers in Loru Village, Biromaru Health Center Work Area, Sigi Regency, Central Sulawesi Province in November, the number of traditional birth attendants partnering with midwives was 2 people, one trained traditional birth attendant and one baby massage traditional birth attendant. Meanwhile, the results of interviews with 10 pregnant women found that 5 (50%) pregnant women did not know about the signs and dangers of labor. One mother's statement that there was a lack of knowledge in choosing the right birth attendant. This caused the behavior of mothers and family members to carry out pregnancy checks at traditional birth attendants.

The purpose of this study was to analyze the relationship between knowledge and the selection of birth attendants for mothers in Loru Village, the working area of Biromaru Health Center, Sigi Regency, Central Sulawesi Province.

## II. Methods

This study uses a correlational analytical design with a Cross Sectional method approach where researchers conduct observations or measurements of independent and dependent variables which are carried out simultaneously and carried out once. The population of this study was all pregnant women in Loru Village, Biromaru Health Center Working Area, Central Sulawesi Regency. While the sample of this study was some pregnant women in Loru Village, Biromaru Health Center Working Area, Sigi Regency, Central Sulawesi. The number of samples in this study was 37 respondents. The determination of the number of samples used refers to the opinion developed by Roscoe in Sugiono (2015), namely that a suitable sample size in research is between 30 and 500. Then the sampling technique in this study uses Accidental Sampling. The variables in the study consist of two variables, namely independent and dependent variables. The Independent Variable (Free Variable) of this study is knowledge, while the Dependent Variable or bound variable of this study is the birth assistant.

## 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. General data

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

**Table 1. General Data**

Age (years)	Frequency	Percentage (%)
17-25	19	51.4
26-35	15	40.5

36-45	3	8.1
<b>Education</b>		
SD	3	8.1
JUNIOR HIGH SCHOOL	10	27
SENIOR HIGH SCHOOL	18	48.6
PT	6	16.2
<b>Profession</b>		
housewife	34	91.9
Etc	3	8.1
<b>Knowledge</b>		
Not enough	5	13.6
Enough	12	32.4
Good	20	54.1
<b>Midwife</b>		
Non-health workers	6	16.2
Health workers	31	83.8
<b>Amount</b>	<b>37</b>	<b>100</b>

Source: The primary data,

The results of the study showed that the majority of respondents had good knowledge (54.1%). In addition, the results of the study also showed that most respondents chose to be assisted by health workers in their delivery, which was 83.8%. It is known that respondents who had good knowledge mostly chose to be assisted by health workers in their delivery, which was 95%.

According to Reber (2010), knowledge is a collection of information owned by a person or group, or a particular culture. Knowledge is a reinforcing factor (predisposing factor) that can influence a person's behavior towards making decisions towards a better direction. Knowledge is considered good if a person makes the right decision related to the problem at hand, but those with low knowledge will take the opposite. The level of education and sources of information received affect knowledge, in this case knowledge about pregnancy and childbirth, so that the knowledge gained about pregnancy, childbirth and its risks is expected to be a reference in the attitude and behavior of maternal health in choosing a birth attendant.

Knowledge in this study is the respondents' understanding of the stages of labor, signs of labor, danger signs of labor, classification of labor assistants and places of labor assistants. Although in terms of knowledge 32.4% are in the sufficient category, and 54.1% are in the good category, there are still many things that are not known by respondents, including: Signs of labor, danger signs of mothers giving birth, labor assistants and risks if assisted by midwives. This illustrates that although respondents can obtain knowledge from various sources, more specific information about labor must still be obtained from health workers, so that they can obtain clearer and more detailed knowledge about labor.

According to researchers Good knowledge will make it easier for a person or society to absorb information and implement it in their daily behavior and lifestyle. especially in terms of health. Knowledge of pregnant women greatly influences changes in attitudes and healthy living behavior.

Lack of knowledge about the selection of assisting personnel by mothers is due to the lack of counseling or information about the selection of good delivery assisting personnel from health workers or non-health workers during childbirth. Most pregnant women do not yet clearly understand the benefits and objectives of selecting a delivery assisting personnel themselves so that the selection of delivery assisting personnel is less than optimal. While those who have sufficient knowledge about the selection of assisting personnel, this is because the education level of most mothers is high school graduates who can better understand the information provided.

The results of the statistical test using the chi-square test showed that There is a Relationship between Knowledge and the Selection of Birth Assistance for Mothers in Loru Village, Biro maru Health Center Working Area, Sigi Regency, Central Sulawesi Province with level of significance  $0.012 < \alpha = 0.05$ . Referring to the test results, it can be explained that the better the mother's knowledge about birth attendants, the better the mother's ability to choose the right person to assist in her birth. This is in accordance with the opinion of Prawirohardjo (2017), that knowledge is one of the factors that influences the selection of a birth attendant. This study is also in line with research Hidra (2017) that there is Relationship between Knowledge and Selection of Childbirth Assistance Personnel in the Pasir Putih Health Center Work Area, Muna Regency in 2016 with a value of  $p$  value 0.018. Research results The Little Mermaid (2015) also produced the same result that there was a meaningful relationship between knowledge and the selection of birth attendants in Panancangan Village, Cibadak District, Banten Province in 2017 with a  $p$  value of 0.000.

The results of this study indicate that knowledge has a close relationship with the choice of birth attendant, meaning that the higher the mother's knowledge, the higher the mother's tendency to choose a midwife or doctor in her delivery process.

The results of the study also showed that there were still pregnant women who chose non-health workers in this case by midwives, although the number was not large. According to researchers, this was because some people still believed in the power of a midwife in assisting with childbirth. According to local people believe that shamans are helpers The midwife's delivery is also believed to be accompanied by her *jampejampe*. Besides that *dukun* routinely cares for mothers giving birth starting from massaging mother, bathing baby until the baby's umbilical cord falls off. Some people still calculate the amount of labor costs. Different from the assistance of childbirth by a traditional birth attendant which does not cost too much. In addition, the distance from home to the health facility is also a consideration for respondents who prefer traditional birth attendants to midwives or health workers who are further away.

To reduce the risk in childbirth, it is expected that health facilities or health centers must increase health education to the community, especially education about the importance of childbirth assistance by trained health workers such as midwives or doctors. In addition, coaching and training for traditional birth attendants on healthy childbirth assistance and equipped with sterile medical equipment will reduce the risk in providing childbirth assistance.

## 2. The Results of Data Analysis on the Relationship between Knowledge and Selection of Birth Assistance for Mothers in Loru Village, Biromaru Health Center Working Area, Sigi Regency, Central Sulawesi Province with Chi Square test

**Table 2. Chi Square test**  
**Chi-Square Tests**

	Value	df	Asymptotic Significance (2-sided)
Pearson Chi-Square	8.909a	2	.012
Likelihood Ratio	7.315	2	.026
Linear-by-Linear Association	7.437	1	.006
N of Valid Cases	37		

a. 4 cells (66.7%) have expected count less than 5. The minimum expected count is .81.

Source: The primary data,

The results of data analysis using the Chi square test showed that there was a relationship between knowledge and the selection of birth assistants for mothers in Loru Village, Biro maru

Health Center Work Area, Sigi Regency, Central Sulawesi Province. With level of significance  $0.012 < \alpha = 0.05$ .

#### IV. Conclusion

Based on the results of research and discussion about The Relationship between Knowledge and the Selection of Birth Assistance for Mothers in Loru Village, Biromaru Health Center Working Area, Sigi Regency, Central Sulawesi Province, then the researcher concluded that Most respondents have good knowledge about childbirth and most respondents choose to be assisted by health workers during their childbirth. Then the data analysis found that there was a relationship between knowledge and the selection of birth assistants for mothers in Loru Village, Biromaru Health Center Work Area, Sigi Regency, Central Sulawesi Province with Value.012.

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