ABSTRACT

Antenatal Care (ANC) has a very important role, including to be able to do the early detection and management of complications that may arise during labor. The World Health Organization (WHO) recommends that pregnant women start contacting the first ANC treatment in the first trimester of pregnancy. This study aims to determine the behavior of pregnant women in their first pregnancy check-up in the working area of Jumpandang Baru Health Center, Makassar City and also to identify other factors that influence these behaviors. This study used qualitative methods with a phenomenological approach (based on life experience). The main informant of this study is the pregnant women who were in the working area of Puskesmas Jumpandang Baru, Kota Makassar which amounts to seven people and a key informant namely the ANC Responsible Midwife at Jumpandang Baru Health Center, Makassar City. Data collection technique of this study conducted through interviews with informants using interview guidelines. The results of the study showed that from seven informants, five informants examined their pregnancies early and two others examined their pregnancies after going through their first trimester of gestation. The behavior of informants in their early pregnancy was supported by good knowledge and attitudes about the importance of the early pregnancy check-up. The existence of motivation and support from the family as well as good service and attitudes of the officers are the factors that influence this behavior. Maternal behavior in checking pregnancy earlier can also be hampered due to lack of knowledge and attitudes regarding the importance of early pregnancy check-up, unexpected pregnancies and the late handling of Health Bureaucracies.

Keywords: antenatal care, early pregnancy check-up

INTRODUCTION

Antenatal Care (ANC) is a preventive effort for obstetric health care programs to optimize maternal and neonatal outcomes through a series of routine monitoring activities during pregnancy. One indicator to see the success of the quality of obstetric and gynecological services can be seen from the reduction in Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR). The Indonesian Demographic and Health Survey (IDHS) in 2012 MMR has increased from 228 to 359 / 100,000 live births. MMR again showed a decreased in 2015 to 305 / 100,000 live births. Even though it has decreased, these numbers have not been able to touch the 2015 Millennium Development Goals (MDGs) target of 102 / 100,000 live births. The highest causes of MMR in Indonesia are caused by, preeclampsia, bleeding, infection, and other causes, from these data it can be concluded that these causes can be detected and prevented during pregnancy through earlier ANC examinations in health facilities (Ministry of Health 2015).

Globally, World Health Statistics (WHS) data estimated that more than 40% of all pregnant women do not receive early antenatal care in 2013 (WHS, 2018). Based on the 2017 IDHS data, the proportion of ANC prenatal care is 98%, but this prenatal examination is still Access (K1 Akses), meaning that pregnant women come for their first pregnancy checkup after passing the First Trimester of pregnancy (Risksesdas, 2018). Antenatal care has a very important role including early detection and management of complications that may arise during labor. If the mother comes to a health facility at the second trimester of pregnancy or mother comes directly to maternity without any previous antenatal care history, then the risk factors and possible complications during labor will be difficult to be handled by health personnel. So that the government expects the definition of K1 to only use pure K1 instead of K1 access. The current condition where not all antenatal examining are K1 Pure (K1 Murni), so if abnormalities are found when the ANC is not enough time to overcome the disorder (Ministry of Health, 2014). World Health Organization (WHO) recommends that pregnant women start contacting the first ANC treatment in the first trimester of pregnancy. Examination during pregnancy is done 8 times, One time in the first trimester, 2 times in the second trimester, and 5 times in the third trimester (WHO, 2016). ANC visits according to the Ministry of Health are carried out at least four
times during pregnancy, the first visit is during the first trimester (<14 weeks), the second visit during the second trimester (14-28 weeks), the third and fourth visits are during the third trimester (28-36 weeks and after the 36th week) (Ministry of Health, 2015).

This program is very good and can have a big impact if it is run successfully because prevention will be carried out well if there are awareness and knowledge of the people who run it, and supported by many parts. It is not rare for us to meet pregnant women who do not have a pregnancy check-up on health workers and lead to various complications that occur during or after delivery. This is certainly very unfortunate considering the maternal mortality rate is a national problem that can be prevented, increasing the awareness of pregnant women to do early antenatal visit to medical personnel or health center. Lack of knowledge about the importance of ANC can causes programs to be difficult to realize. Especially Indonesia as a large country with a variety of diverse cultures, it is not rare for us to find cultural factors which ultimately inhibit the implementation of the program.

The research by Aryastami & Tarigan in 2012 at Pasanggrahan South Jakarta Health Center, out of 10 (5 people do early antenatal visit and 5 other doesn’t) pregnant women interviewed can be concluded that behavior of mothers in prenatal check-up influenced by mother’s knowledge about the pregnancy itself and the health condition of the mother during pregnancy are reinforcing factors for pregnant women to do early antenatal visit to medical personnel or health center. Pregnant women come late to the Health center is due to the presence of an enabling factor is the existence of a health facility/midwife practices close to home. Factors that strengthen the delay of respondents coming to the Health center are related to proximity or distance to health facilities. The Health Center was only visited when the informants were nearing the delivery period because of the low costs (Aryastami & Tarigan, 2012).

Research conducted by Adri in 2008 at the Runding Health Center in Subulussalam Municipality, NAD Province, on 75 people, showed that the things that affect the behavior of mothers in their early pregnancy check-up are distance and time, lack of public transportation and health care workers (Adri, 2008). Data from the Health Center of Jumpandang Baru in Makassar City on January - October 2018 362 pregnant women do the antenatal care examining but this count ass K1 Pure and K1 Acces, from the registration book in October, from 36 pregnant women who checked pregnancy there were 13 people (36.1%) pregnant women who had a pregnancy in the first trimester and 23 (63.9%) had a pregnancy after the second and third trimesters.

Based on the observations of researchers during midwifery clinical practice and the data, pregnant women check their pregnancies for the first time in second Trimester or third trimester even though pregnancy checks should be done after not getting menstruation, so the researcher wants to conduct a study on a Qualitative Study of the behavior of Pregnant Women in First-Time Pregnancy Examining in the Working Area of the Jumpandang Baru Health Center in Makassar City.

METHODS
This study uses a qualitative research method with a Phenomenology research design that examines a phenomenon and the meaning contained by an individual relating to the behavior of pregnant women in their first pregnancy examining. This study focuses on knowing the behavior of pregnant women in terms of knowledge, attitudes, and actions in first-time pregnancy examinations. The motivation of pregnant women who check their pregnancy on time (Pure K1) and find out the reason for pregnant women who are late for pregnancy check (K1 Access) both in terms of maternal behavior and other actors that may arise during interviews (Satori 2011).

Informants in this study were chosen purposively based on criteria determined by the researcher. The informant consisted of 7 pregnant women and a midwife who responsible for ANC as key informants. Data collection is done through in-depth interviews with informants who have been asked for approval before. The research instrument consisted of the researchers themselves, interview guides, stationery, and recording devices. (Sugyono, 2017) Data analysis using Content Analysis by reducing data then get a conclusion from information obtained through interviews and
other valid sources. The validity of the data through triangulation theory. (Satori, 2011)

RESULT AND DISCUSSION
Description of Characteristics of Informants

Based on the results of the study, there were 7 main informants and a key informant who were successfully interviewed and were the subjects in this study, as described in the following table:

<table>
<thead>
<tr>
<th>Nu</th>
<th>Name</th>
<th>Age</th>
<th>Education</th>
<th>Work</th>
<th>Gestation</th>
<th>G.age</th>
<th>The status of ANC</th>
<th>Expl</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mrs H</td>
<td>28</td>
<td>Elementary School</td>
<td>House Wife</td>
<td>Third</td>
<td>8 week</td>
<td>On Time (8 week)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>2</td>
<td>Mrs K</td>
<td>34</td>
<td>Senior High school</td>
<td>House Wife</td>
<td>Third</td>
<td>30 week</td>
<td>On Time (1 mount)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>3</td>
<td>Mrs S</td>
<td>34</td>
<td>Elementary School</td>
<td>Karyawan</td>
<td>Fifth</td>
<td>20 week</td>
<td>On Time clinic</td>
<td>Pregnant</td>
</tr>
<tr>
<td>4</td>
<td>Mrs R</td>
<td>26</td>
<td>Senior High school</td>
<td>Wirausaha</td>
<td>Second</td>
<td>12 week</td>
<td>On Time (1 week)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>5</td>
<td>Mrs I</td>
<td>19</td>
<td>Junior High school</td>
<td>House Wife</td>
<td>First</td>
<td>24 week</td>
<td>On Time (3 mount)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>6</td>
<td>Mrs A</td>
<td>29</td>
<td>Elementary School</td>
<td>House Wife</td>
<td>Third</td>
<td>24 week</td>
<td>Late (6 mount)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>7</td>
<td>Mrs R</td>
<td>36</td>
<td>Junior High school</td>
<td>House Wife</td>
<td>Third</td>
<td>32 week</td>
<td>Late (4 mount)</td>
<td>Pregnant</td>
</tr>
<tr>
<td>8</td>
<td>Mrs Nj</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Midwife</td>
</tr>
</tbody>
</table>

Knowledge Early Pregnancy Examination

From interviews with informants, it is known that the mother considers that early pregnancy checks are important to do to get treatment, to know the condition of the fetus, get treatment, vitamins, and counseling. While other informants said that the prenatal checkup was done to get a Mother and child health book and carried out in the first pregnancy only because the first pregnancy was still lack of experience.

Resources

Most of the informants obtained information about the importance of early pregnancy checks from the Health center, Posyandu, and Midwives. An informant obtained additional information from Electronic Media and the internet.
Benefits of early pregnancy checks
From interviews, information was obtained that the benefits of early pregnancy check-up were to get treatment, resolve complaints, find out the condition of the fetus and the needs during pregnancy. An informant stated that the benefits of prenatal examinations from an early age to get a KIA book, and an informant did not know the benefits of early pregnancy check-up.

Impact does not check for pregnancy early
From the interviews, information was obtained that the impact of not having early pregnancy check-up is not knowing the abnormalities in the womb, not knowing the condition of the fetus, not knowing nutritional needs, complaints that cannot be overcome, can cause anemia, high blood pressure and bleeding during childbirth and an informant did not know the impact if it did not check pregnancy early.

The place and time for the first pregnancy checkup.
From the interviews, information was obtained that prenatal care should be carried out at the Health center when not getting menstruation. An informant stated that pregnancy checks should be done at the hospital because the facilities are more complete. While other informants stated that pregnancy checks were carried out at the age of five or six months and when feeling complaints.

Pregnancy examination history
Four informants do early and routine antenatal care both in the first pregnancy to the last pregnancy. While the informants who did not check their pregnancy early in the previous pregnancy were caused by complaints and health conditions during pregnancy.

Myth or Trust
The informant stated that there were no myths or beliefs in the family and society. While 3 informants said that there were myths related to pregnancy, pregnant women were encouraged to wear onions when they left their house, drink water that had been prayed before and get a pregnancy examining after 3 months

Attitudes and Actions Responses about pregnant women who do not have a pregnancy check-up early.

Informant responded that pregnant women who did not have a pregnancy examination were pregnant women who were ignorant and did not care about themselves. A pregnant woman says that it does not matter as long as she has no complaints.

The reason for pregnant women is not to have a pregnancy checked at an early age in a health facility
From interviews pregnant women who did not have an early pregnancy examination due to busyness, laziness, and cost factors related to health insurance.

Informant's response about Puskesmas services
The informant said that the ANC service in the Health center was very good, the attitude of the health workers was also friendly except that the ultrasound examination still needed to be improved. From interviews with main informants, it can be concluded that the examinations given are almost the same. The services provided are blood pressure checks, abdominal examinations, administration of vitamins, iron tablets and vaccines. There are also mothers who get Ultrasound (USG) and additional foods.

Pregnant Mother’s actions when knowing her pregnancy
Three informants know that they are pregnant after not getting menstruation through urine tests at home and then going to the health center after testing. An informant also said she did not know that she was pregnant and knew it at 4 months' gestation. An informant said that she has examined herself at a doctor's clinic near her home after taking a urine test with dubious results. This shows an effort to make contact with health workers. while two other informants know that she was pregnant after not getting menstruation but had checked herself after 3 months and 5 months of pregnancy because she had no complaints and the health insurance had not published yet.

Family support and motivation for pregnant women
All informants said that the family supported her pregnancy. Her family always motivates her to get a pregnancy check-up at the Health Center. However, when
checking her pregnancy, the informant came alone or accompanied by her child. There were no informants accompanied by husband because they work.

**DISCUSSION**

Informants who check their pregnancies as early as possible have different characters, from age, level of education, parity and work this proves that age, education, parity, and work do not influence the behavior of pregnant women in their pregnancy examining. Knowledge and good attitude from the informants themselves are the factors for early pregnancy checks. Motivation from the family, good service from the Health center and the attitude of health workers which is also one of the factors that encourage pregnant women to check their pregnancy earlier.

Informants who did not check their pregnancy as early as possible had different levels of education so that it could be concluded that education was not a factor that prevented pregnant women from getting pregnant early. Things that affect the actions of mothers in checking their pregnancies early are mother’s knowledge and attitudes that still lack about the importance of having early pregnancy examining, besides the unexpected pregnancy and the late health bureaucracy is also the reason why pregnant women do not check for pregnancy earlier.

This is same as the research by Komariyah (2008), that there is a relationship between the knowledge and attitudes of respondents towards regularity of pregnancy check-ups (Komariyah, 2008). The research by Wulandari (2015) shows that other factors can influence the attitudes of health workers. It is said that a friendly and care attitude will build trust between the mother and the health worker so that the examination will run better. (Noviana, 2018)

The results of research by Aryastami and Taringan state that family support has a strong role for mothers to come to check their pregnancy on time.

**CONCLUSIONS AND SUGGESTIONS**

The behavior of mothers in prenatal checkups at the Jumpandang Baru Health Center is supported by good knowledge and attitudes about the importance of having early pregnancy examining. The existence of motivation and support from the family as well as the services and good attitudes from health workers are also factors that influence the behavior of pregnant mothers in early pregnancy examining at the Jumpandang Baru Health Center in Makassar City.

Pregnant mother’s behavior in early pregnancy examining can also be hampered due to lack of knowledge and attitudes about the importance of having early pregnancy examining, an unexpected pregnancy, and a late health bureaucracy.

Health workers are expected to be able to continue to provide information about the importance of early pregnancy checks to the entire community in order to change people’s perceptions of prenatal care. Although the informants found that the knowledge and attitudes held were good but the informants were a small proportion of pregnant women in Jumpandang Baru Health Center area.

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