

# Analysis of Factors Influencing Antenatal Care (ANC) Visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands District

Dorkas Batilmurik<sup>1\*</sup>, Yenny Puspitasari<sup>2</sup>, Rahmania Ambarika<sup>3</sup>

<sup>1,2,3</sup> Universitas Strada Indonesia, Kediri, Indonesia

\*Corresponding author: [dorkasbatilmurik@gmail.com](mailto:dorkasbatilmurik@gmail.com)

## ABSTRACT

This study aims to analyze the factors that influence Antenatal Care (ANC) visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands Regency. Regular ANC visits are essential in preventing pregnancy complications and improving the health of mother and baby. This research uses a quantitative approach with a cross-sectional survey design. The research respondents were 50 pregnant women who were selected using purposive sampling. Data was collected through questionnaires and analyzed using multiple linear regression. The research results showed that maternal age, socio-cultural status, economic status, and husband's support had a significant effect on the regularity of ANC visits. Pregnant women in the ideal reproductive age range (20–35 years) have higher visit rates. Economic factors, including household income, influence mothers' ability to access health services. Husband's support, whether in the form of emotional, informational or material, plays an important role in increasing maternal compliance with the ANC visit schedule. The conclusions of this study emphasize the importance of interventions that support pregnant women, especially through family empowerment and increasing economic access. It is hoped that the research results can become a reference for health workers in improving the quality of ANC services and more comprehensive public health policies.

**Keywords:** Antenatal Care (ANC) visits, cultural factors, husband's support, pregnant women's health, socio-economic factors

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## BACKGROUND

The high maternal mortality rate in Indonesia is likely to occur in pregnant women who are at risk of not being detected early. The number of maternal deaths by province in 2018-2019 saw a decrease from 4,226 to 4,221 maternal deaths in Indonesia based on reports. In 2019, the most common causes of maternal death were bleeding (1,280 cases), hypertension in pregnancy (1,066 cases), infection (207 cases). Even though the number of maternal deaths decreased from 2018 to 2019, this figure is still relatively high in Indonesia (Ministry of Health of the Republic of Indonesia, 2020).

The biggest causes of maternal death are bleeding, hypertension in pregnancy, infection, prolonged/obstructed labor, and abortion. Maternal mortality in Indonesia is still dominated by three main causes of death, namely bleeding, hypertension in pregnancy, and infection. However, the proportion has changed, where bleeding and infection tend to decrease, while the proportion of hypertension in pregnancy is increasing. (RI, 2015).

One form of monitoring to measure the level of health of pregnant women is the maternal mortality rate. According to WHO (World Health Organisation), maternal mortality is death during pregnancy and 42 days after termination of pregnancy from any cause related to the pregnancy and its treatment. In Indonesia, deaths of pregnant women are usually due to bleeding during pregnancy (28%), abortion complications (5%), eclampsia (24%), infection (11%), and parturition (5%) (WHO 2015). Apart from health problems, the high number of deaths of pregnant women is also due to a lack of women's empowerment, level of education, local culture, economy, and lack of attention from husbands towards pregnant women. This maternal and infant mortality rate can be prevented if the complications and risks experienced can be detected early, so that they receive immediate treatment. One treatment that can prevent the death of pregnant women is ANC (Antenatal Care) treatment.

Pregnant women must routinely have their pregnancy checked by a midwife or doctor, provided that 2 times in the 1st trimester, one of which is carried out by a doctor to screen for risk factors, 1 time in the 2nd trimester, and 3 times in the 3rd trimester, where at the 5th visit a screening is carried out. risk of delivery by a doctor to determine the place and type of delivery, if a high risk of delivery is found then an early referral can be planned. The impact of mothers who do not carry out examinations according to the midwife's recommendations is that risks cannot be detected early and referrals are made too late, so that mothers and babies cannot be treated optimally (Ministry of Health of the Republic of Indonesia. 2020).

Antenatal care visits by pregnant women are influenced by two main factors. Based on the theory of Lawrence Green (1980), namely behavioral factors (behavioral causes) and factors outside of behavior (non-behavioral causes). Furthermore, the behavior itself is determined or formed from three factors, namely predisposing factors including age, level of education, parity of pregnant women, employment status, knowledge of pregnant women and attitudes of pregnant women. Enabling factors include family income, distance from residence and information media. Reinforcing factors include husband/family support. (Rachmawati, Puspitasari and Cania, 2017).

Complications of pregnancy and childbirth as the highest cause of maternal death can be prevented by regular pregnancy checks through antenatal care (ANC). Antenatal care or antenatal services provided by trained and professional health personnel can prevent and detect complications in fetuses and pregnant women early so that undesirable things do not happen in the future. (Rachmawati, Puspitasari and Cania, 2017). Prenatal care (ANC) is a service provided by health workers to mothers during pregnancy. This is done to monitor physical and psychological health, including fetal growth and development as well as preparing for the labor and birth process. Complications of pregnancy and childbirth can be

prevented by regular pregnancy checks (antenatal care). The use of antenatal care services by a number of pregnant women in Indonesia is not yet fully in accordance with established guidelines, this tends to make it difficult for health workers to provide regular and comprehensive health care for pregnant women, including early detection of pregnancy risk factors (Risksdas, 2018).

There are several factors that can influence antenatal care visits for pregnant women, namely predisposing factors (including mother's age, parity, birth spacing, education, knowledge and attitudes), enabling factors (including work, family economy, cost, time, availability of services and distance) and need factors which include disease history, complaints, healthy perception, mother's condition, treatment plan and Hb levels) (Sarminah, 2012).

Factors that influence the regularity of Antenatal Care include Parity, Age, Knowledge, Attitude, Occupation, Social Culture, Geographic, Information, Support, Education (Ministry of Health of the Republic of Indonesia, (2010). Age influences a person's mindset. Mothers of productive age (20 -35 years) can think more rationally compared to mothers who are younger or too old so that mothers of productive age have more motivation to check their pregnancy (Rachmawati et al., 2017). Ministry of Health, RI (2015), factors that influence Antenatal Care visits include knowledge, education, age, economics, information, geographic location and family support. Apart from the research results, there are several factors that influence ANC visits, namely knowledge, attitudes, family support as well as the role of Health officers (Ningsih, P, 2020).

A person's education determines how much knowledge they have. Educated pregnant women have a greater understanding of health problems, which influences their attitudes towards their own pregnancy and nutritional needs during pregnancy (Ningsih, 2018). In some communities in Indonesia, work is an important thing that must be a priority because it is related to income that can be used to fulfill living needs. This is a model that has been developing, especially in developed countries like Indonesia. A pregnant mother who works tends to spend her time doing her work activities rather than having to make antenatal care visits (Pangosbidan, 2012). Pregnant women who work with high and busy activities prefer to prioritize their careers rather than their own health, so it is difficult to comply with ANC visits compared to housewives who have more free time to be able to organize and schedule ANC visits optimally (Wulandatika, 2017).

One important factor that influences pregnant women's participation in ANC visits is husband's support. Husband's support, whether in the form of emotional, instrumental or financial support, has been proven to play a significant role in encouraging pregnant women to attend regular pregnancy checks. Strong husband support can increase pregnant women's motivation to maintain the health of themselves and their fetuses, thus contributing to increasing the frequency of ANC visits.

Research shows that husband's support can increase pregnant women's access and participation in health programs, including ANC visits. Studies in several regions in Indonesia after 2018 revealed that husbands' participation in reproductive health, especially during pregnancy, was positively correlated with high ANC visits (Asriani & Wahyuni, 2020; Pratiwi & Nugraheni, 2019).

Pregnant women who do not regularly carry out pregnancy checks will experience further complications which will result in the death of the mother and baby. The risk assessment system cannot predict whether pregnant women will have problems during their pregnancy. Therefore, antenatal care or services is an important way to monitor and support the health of normal pregnant women and detect mothers with normal pregnancies (Saiffudin, 2014).

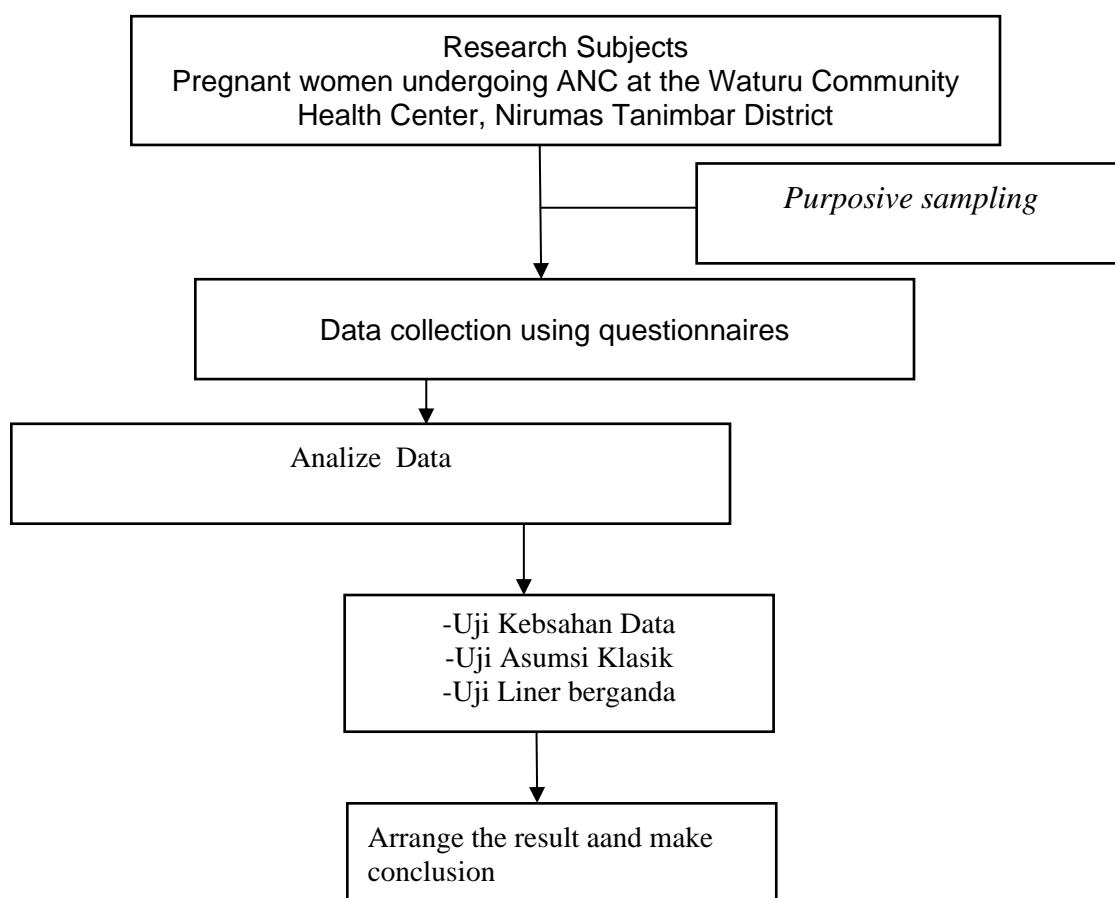
## METHODS

### Research Design

The type of research carried out in this research is quantitative research

"This quantitative approach allows researchers to collect numerical data through statistical analysis of samples using predetermined instruments" (Creswell, 2012). "Survey research design is carried out to describe attitudes, behavior, and characteristics of the population obtained through samples in the population" (Creswell, 2012, p. 21). The type of survey used is a cross-sectional survey, collecting data from a large number of samples at the same point in time. This research was conducted using a cross-sectional approach. Researchers used a cross-sectional survey design to determine the relationship between factors related to ANC achievement.

### Framework



### Research Variables

The variables contained in this research consist of independent variables and dependent variables.

- Independent variables are variables that influence the dependent variable or dependent variable. According to Sugiyono (2019:61) The independent variables in this research are the age of the pregnant mother, socio-cultural, socio-economic and husband's support.
- Dependent variables according to Sugiyono (2019:39) dependent variables are often referred to as output variables, criteria and consequences. Dependent variables are variables that are influenced or are the result of the existence of a dependent variable. The dependent variable in this study is ANC visits of pregnant women.

## RESULTS

**Table 1.** Research Partial Test Results

Connection	Information	T statistic	Say.
X1 with Y	H1 is accepted	4,785	0,006
X2 with Y	H2 is rejected	0,580	0,065
X3 with Y	H3 is accepted	2,091	0,000
X4 with Y	H4 accepted	2,919	0,001

Based on the results of the regression analysis on the variable Age of Pregnant Women (X1), the t statistics value was obtained at 4.785 with a significance value of 0.009. The t statistical value of the variable Pregnant Mother's Age (X1) is greater than the t table, namely 1.677 at a significance level of 0.05. Based on these results, H1 is accepted, meaning that the variable age of pregnant women has a significant effect on Antenatal Care (ANC) visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands Regency.

The socio-cultural factor variable (X2) obtained a t statistical value of 0.580 with a significance of 0.065. The t statistical value for this variable is smaller than the t table value of 1.677, which means that the socio-cultural factor variable does not have a significant effect on Antenatal Care (ANC) visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands Regency.

The Economic Factor variable (X3) obtained a t statistical value of 2.091 with a significance level of 0.000. The statistical value of the Economic Factor variable is greater than t table 1.677, which means that the Economic Factor variable has a significant influence on Antenatal Care (ANC) visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands Regency.

The Husband's Support variable (X4) obtained a t statistical value of 2.919 with a significance level of 0.001. The statistical value of the Husband's Support variable is greater than the t table of 1.677, which means that the Husband's Support variable has a significant influence on Antenatal Care (ANC) visits at the Waturu Community Health Center, Nirunmas District, Tanimbar Islands Regency.

### Results of Determination Coefficient Analysis in Regression

**Table 2.** Regression Analysis Test Results

Model	Unstandartifed Coeffisients	
	B	Std. error
Constant	0,774	0,950
X1 (Maternal Age)	0,116	0,147
X2 (Socio-Cultural Factors)	0,069	0,118
X3 (Economic Factors)	0,013	0,145
X4 (Support of Husband)	0,019	0,189

$$Y = 0,774 + 0,116X_1 + 0,069X_2 + 0,013X_3 + 0,019X_4 + e$$

Where:

- AND : ANC visit  
 $X_1$  : Mother's age  
 $X_2$  : Socio-Cultural Factors  
 $X_3$  : Economic Factors  
 $X_4$  : Husband's support

and : Errorterm

From the results of the multiple linear regression analysis above, several conclusions can be drawn. The first discussion starts from a constant value of 0.774, which means that if the variables of maternal age, socio-cultural factors, economic factors, and husband's support are assessed as 0, then there will still be patients who visit Antenatal Care (ANC) at the Waturu Community Health Center, Nirunmas District, Regency. Tanimbar Islands with a value of 0.774.

The regression coefficient value for the variable age of pregnant women was found to be 0.116, which means that if the age of pregnant women increases, this will also increase the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center. The coefficient value for the Economic Factor variable is 0.013, which means that if the economic factor variable increases by one unit, the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center will also increase. The regression coefficient value for the Husband's Support variable was found to be 0.019, which means that the higher the husband's support, the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center will also increase.

## CONCLUSION

1. The variable Pregnant Mother's Age has a significant and positive influence on Antenatal Care (ANC) Visits at the Waturu Community Health Center. The older the mother's age, the higher the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center.
2. Sociocultural factor variables do not have a significant influence on Antenatal Care (ANC) visits at the Waturu Community Health Center.
3. Economic factor variables have a significant and positive influence on Antenatal Care (ANC) visits at the Waturu Community Health Center. The higher the respondent's economic status, the higher the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center.
4. The husband's support variable has a significant and positive influence on Antenatal Care (ANC) visits at the Waturu Community Health Center. The higher the husband's support for pregnant women, the higher the frequency of Antenatal Care (ANC) visits at the Waturu Community Health Center.

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