

The Relationship Between Pregnant Women's Knowledge About High Risks and Danger Signs in Pregnancy, Childbirth, Puerperium with Maternal Attitudes and Behaviors in Pregnancy Care

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Abstract

High risk pregnancy is a dangerous pregnancy. Can cause major complications in the mother and fetus in the womb, compared to normal pregnancy, childbirth, postpartum. Aim research is to determine the relationship between pregnant women's knowledge about high risks and danger signs of pregnancy, childbirth, postpartum with attitudes and behavior in pregnancy care. Research method use descriptive analytics with a cross-sectional design. Sample 95 with accidental sampling technique. Chi-square test data analysis. Results are Of the 95, 11(11.6%) had good knowledge, 84(88.4%) had poor knowledge, 15(15.8%) had positive attitudes, 80(84.2%) had negative attitudes, 14(14.2%) positive attitudes. .7%), negative behavior 81(85.3%). The results of the test using chi-square showed that there was a relationship between knowledge and attitude, with a p -value of $0.000 < 0.05$ and between knowledge and behavior, a p -value of $0.000 < 0.05$ was obtained. There is a relationship between knowledge about high risks and danger signs of pregnancy, childbirth, postpartum with attitudes and behavior in pregnancy care.

Keywords: High risk, pregnant women, knowledge, attitudes, behavior.

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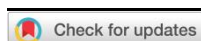
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Abstrak

Kehamilan risiko tinggi merupakan suatu masalah yang dapat membahayakan masalah kehamilan. Masalah tersebut bisa menimbulkan masalah besar bagi ibu dan anak yang ada dalam kandungan di masa kehamilan, persalinan, dan nifas dalam kondisi normal. Tujuan adalah untuk mengetahui keterkaitan antara ibu hamil dengan masalah dan tanda bahaya yang muncul saat masa hamil, persalinan, dan nifas melalui sikap yang selalu positif sehingga menimbulkan sikap positif di dalam merawat diri. Metode penelitian menggunakan deskriptif analitik dengan rancangan *cross-sectional*. Sampel 95 dengan teknik *accidental sampling*. Analisa data uji *chi-square*. Dari 95 didapatkan pengetahuan baik 11(11,6%), pengetahuan kurang 84(88,4%), sikap positif 15(15,8%), sikap negative 80(84,2%), perilaku positif 14(14,7%), perilaku negative 81(85,3%). Hasil uji menggunakan *chi-square* didapatkan ada hubungan pengetahuan dan sikap diperoleh nilai p -value $0,000 < 0,05$ dan pengetahuan dengan perilaku diperoleh nilai p -value $0,000 < 0,05$. Terdapat hubungan pengetahuan tentang risiko tinggi dan tanda bahaya kehamilan, persalinan, nifas dengan sikap dan perilaku dalam perawatan kehamilan.

Kata kunci: Risiko tinggi, ibu hamil, pengetahuan, sikap, perilaku.



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Introduction

High-risk pregnancy is one of the biggest contributors to the maternal mortality rate (MMR). Survey results show that the MMR has declined over the years. However, Indonesia still ranks highest among ASEAN countries, with MMR of

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228/100,000 live births in 2007 (SDKI 2007). The World Health Organization (WHO) claims that from 2000 to 2017, maternal mortality worldwide will decrease by more than a third by 2018. Every day, around 810 women die from complications of pregnancy and childbirth. Most of these are caused by preventable or treatable causes, such as infectious

diseases and complications during pregnancy and childbirth (WHO, 2018).

According to the Indonesian Ministry of Health, the number of maternal deaths in Indonesia in 2020 reached 4,627, an increase from 4,221 in 2019. Most of the causes of maternal deaths were caused by bleeding with 1,330 cases, hypertension in pregnancy with 1,110 cases, and circulatory system disorders with 230 cases (Indonesian Ministry of Health, 2020). In 2018 in Makassar the number of maternal deaths was 65 out of 43,434 babies born, including bleeding 16, eclampsia 13, infection 3, and additional deaths 33 (Makassar City Health Office, 2018).

High risk events can be avoided if the mother is given good knowledge about her pregnancy including knowing high risks and danger signs in pregnancy which can help avoid unwanted things (Ananda, 2022). Maternal knowledge about danger signs in pregnancy is very important, because mothers can immediately take action decisions. In order to minimize the occurrence of complications and worsening of the mother's condition, problems are detected early and treatment is carried out faster (Riset, 2023). The determinants and improvement of knowledge are higher educational status and more pregnancy experience (Yunitasari et al., 2023).

The behavior of pregnant women in seeking health services is influenced by maternal knowledge about signs and dangers during pregnancy, education, economic status, and access to health (Tawfiq et al., 2023). Knowledge of pregnancy danger signs in fertile women is low, this shows the large proportion of women who do not know the danger signs of pregnancy (Yosef & Tesfaye, 2021).

Methods

This type of research is quantitative research. The design used in this study was descriptive analytic with cross-sectional design. The research location was at the Mother and Child Hospital Pertiwi Makassar. The research was conducted on February 28-March 6, 2024. sampling in this study was using non-probability sampling with accidental Sampling technique. Data collected using a questionnaire.

The inclusion criteria in this title are pregnant women who are hospitalized and outpatient at the Pertiwi Makassar Mother and Child Hospital, pregnant women in the first, second and third trimesters, pregnant women who are willing to be

respondents and pregnant women who are able to communicate well. The exclusion criteria are pregnant women who are hospitalized or outpatient who have complications at the Pertiwi Makassar Mother and Child Hospital, pregnant women who are unwilling to be respondents or are uncooperative and pregnant women who are unable to communicate well.

This research instrument uses a questionnaire, where the questionnaire I used was the questionnaire proposed by AD Putri (2017) to collect data. A questionnaire is a data collection technique by collecting various questions in one or more sheets containing several question references related to the research theme (Sugiyono, 2017) and the statistical test used is the chi-square test.

Results

Univariate Analysis

Tabel 1 Frequency Distribution of Respondents Based on Knowledgem, Attitude, and Behavior of Pregnant Women at Pertiwi Mother and Child Hospital Makassar.

Knowledge	n	%
Good	11	11,6
Less	84	88,4
Total	95	100
Attitude	N	%
Positive	15	15,8
Negative	80	84,2
Total	95	100
Behavior	N	%
Positive	14	14,7
Negative	81	85,3
Total	95	100

Source: Primary data February 2024

According to table 1, the knowledge of pregnant women at Pertiwi Mother and Child Hospital Makassar was obtained, where 11 people (11.6%) had good knowledge and there were 84 people (88.4%) who had poor knowledge. The mother's attitude in pregnancy care at Pertiwi Mother and Child Hospital Makassar, where out of 95 (100%) of respondents, 15 people (15.8%) had a positive attitude in pregnancy care and 80 (84.2%) had a

negative attitude in pregnancy care. While, the mother's behavior in pregnancy care at Pertiwi Mother and Child Hospital Makassar, where out of 95 (100%) of respondents, 14 people (14.7%) had positive behavior in pregnancy care and 81 (85.3%) had negative behavior in pregnancy care.

Bivariate Analysis

Table 2 Relationship between Pregnant about High Risk and Danger Signs of Pregnancy, Childbirth, Postpartum with Pregnant Women's Attitude in Pregnancy Care.

Knowledge	Attitude				Total		P Value
	Positive		Negative				
	n	%	n	%	n	%	
Good	11	100	0	0,0	11	100	0,000
Less	4	4,8	80	95,2	84	100	
Total	15	15,8	80	84,2	95	100	

Table 2 shows that out of 95 (100%), 11 respondents (100%) had good knowledge with positive attitudes, and pregnant women with good knowledge but negative attitudes were 0 respondents (0.0%). While pregnant women with poor knowledge but positive attitudes amounted to 4 respondents (4.8%) and pregnant women with poor knowledge but negative attitudes amounted to 80 respondents (84.2%). Based on the results of statistical test analysis using the *chi-Square* test, the p value = 0.000 < (α = 0.05). These results indicate that H_a is accepted. Thus, it can be concluded that there is a significant correlation between the knowledge of pregnant women and the attitude of mothers in pregnancy care at Pertiwi Mother and Child Hospital Makassar with a p value = 0.000.

Based on table 3 shows that out of 95 (100%), who have good knowledge with positive behavior are 11 respondents (100%), and pregnant women with good knowledge but negative behavior are 0 respondents (0.0%). While the mother's knowledge was lacking but positive behavior was 3 respondents (3.6%) and the pregnant women's knowledge was lacking but negative behavior was 81 respondents (96.4%). Based on the results of statistical test analysis using the *chi-Square* test, the p value = 0.000 < (α = 0.05). These results indicate that H_a is accepted. Thus, it can be concluded that there is a significant correlation between the knowledge of pregnant

women with maternal behavior in pregnancy care at Pertiwi Mother and Child Hospital Makassar with a p value = 0.000.

Table 3 Relationship between Pregnant Women's Knowledge about High Risk and Danger Signs of Pregnancy, Childbirth, Postpartum with Pregnant Women's Behavior in Pregnancy Care.

Knowledge	Behavior				Total		P Value
	Positive		Negative				
	n	%	n	%	n	%	
Good	11	100	0	0,0	11	100	0,000
Less	3	3,6	81	96,4	84	100	
Total	14	14,7	81	85,3	95	100	

Discussion

Pregnant women's knowledge of high risks and danger signs of pregnancy, labor, postpartum

Based on the results of the research conducted, the knowledge of pregnant women at Pertiwi Mother and Child Hospital Makassar was obtained, where 11 people (11.6%) had good knowledge and there were 84 people (88.4%) had poor knowledge. The low knowledge of respondents in this study can be caused by inadequate information obtained by pregnant women about the implementation of pregnancy, childbirth, postpartum examinations and exposure to inaccurate sources of information from the sources of information obtained.

The knowledge of pregnant women is influenced by the level of education, the higher the level of education makes the mindset relatively good, the ability to analyze a problem and capture information relatively well. This is supported in the theory of Notoatmodjo (2017) that factors that influence knowledge are education, information, work, experience and age. Researchers assume a good level of knowledge due to the mature age factor at the age of 26-35 years.

According to the researcher's assumption that the knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum still needs to be considered to be applied in real terms in carrying out pregnancy care. Based on the results of respondents that good maternal knowledge

about high risks and danger signs of pregnancy, labor, puerperium is more compliant in conducting examinations, compared to mothers with less knowledge who are not compliant in conducting pregnancy, labor and puerperium examinations.

Maternal attitude to Pregnancy Care

Based on the results of the research conducted, it was found that the mother's attitude in pregnancy care at Pertiwi Mother and Child Hospital Makassar, where out of 95 (100%) respondents, 15 people (15.8%) had a positive attitude and as many as 80 people (84.2%) had a negative attitude. Attitude is a person's reaction or response that is still closed to a stimulus or object. Attitude is not automatically realized in an action. The realization of attitudes in order to become real actions requires support factors from certain parties, such as health workers and people closest to the mother Notoatmodjo (2017).

Based on the researcher's assumption that positive attitudes are important for pregnant women to motivate them to undergo regular check-ups. Therefore, it indicates that improving pregnant women's attitudes towards high risk and danger signs of pregnancy can potentially improve their adherence in undergoing antenatal, delivery, postpartum visits with a positive impact on optimal antenatal care.

Maternal behavior in Pregnancy Care

Based on the results of the research conducted, the behavior of mothers in pregnancy care at Pertiwi Mother and Child Hospital Makassar was obtained, where out of 95 (100%) respondents, 14 people (14.7%) had positive behavior and 81 (85.3%) had negative behavior. Human behavior is formed on the basis of the existence of knowledge first Notoatmodjo (2017). This study proves that behavior based on knowledge is more lasting than behavior without knowledge. From the results of the study, it was still found that there were still many pregnant women with negative behavior compared to pregnant women with positive behavior.

Based on the researcher's assumption that knowing the high risks and danger signs of pregnancy, childbirth, and postpartum can provide motivation to mothers in checking pregnancy. Actions taken by pregnant women during the

process of pregnancy until postpartum can improve the care behavior of pregnant women so that it determines the success of the mother in pregnancy until the process of delivery and postpartum.

The relationship between pregnant women's knowledge about high risks and danger signs of pregnancy, labor, and postpartum with the attitude of pregnant women in pregnancy care.

The results showed that out of 95 respondents, the knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum with maternal attitudes in pregnancy care. The results of the test carried out, namely the *Chi-Square* test, obtained a value of $p = 0.000 < (\alpha = 0.05)$, so it can be said that there is a relationship between the knowledge of pregnant women about high risk and danger signs of pregnancy, labor, postpartum with maternal attitudes in pregnancy care.

This shows that if pregnant women with good knowledge then the mother has a positive attitude in pregnancy care. Vice versa, if the knowledge is lacking then the mother can be negative in pregnancy care. Factors that influence the level of knowledge are internal and external factors. These internal factors consist of education, age, motivation, perception. And external factors are information, social culture and environment. A person has knowledge about something, can be driven by exposure to information from mass media such as television, newspapers, the internet and others. Pregnant women's knowledge about the high risk of pregnancy, childbirth, postpartum is the most important aspect to know how to prevent the high risk of pregnancy, childbirth and postpartum (Notoatmodjo 2017).

According to the researcher's assumption, knowledge about high risks and danger signs in pregnancy, childbirth, postpartum with maternal attitudes in pregnancy care will be very beneficial for pregnant women, because this knowledge can help prevent complications that may occur and help take appropriate action during pregnancy.

The relationship between pregnant women's knowledge of high risks and danger signs of pregnancy, childbirth, postpartum with pregnant women's behavior in pregnancy care

The results of the above research from 95 respondents of pregnant women's knowledge about high risks and danger signs of pregnancy, childbirth, postpartum with maternal behavior in pregnancy care. The results of the test conducted, namely the Chi - Square test, obtained a value of $p = 0.000 < (\alpha = 0.05)$, so it can be said that there is a relationship between the knowledge of pregnant women about high risk and danger signs of pregnancy, childbirth, postpartum with maternal behavior in pregnancy care.

This shows that if pregnant women with good knowledge then the mother behaves positively in pregnancy care. Vice versa if the knowledge is lacking then the mother behaves negatively in pregnancy care. Human behavior is influenced by many factors (Notoatmodjo, 2017). In this study, in addition to attitude factors, behavioral factors also affect the knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum in pregnancy care. According to the researcher's assumption, good knowledge of pregnant women with positive maternal behavior is based on several factors, one of which is maternal education. Maternal knowledge about high risks and danger signs of pregnancy, childbirth, and postpartum increases with higher education and vice versa, maternal knowledge about high risks and danger signs of pregnancy, childbirth, and postpartum decreases with lower education.

Conclusion

The characteristics of respondents in this study are age 20-30 years with the majority higher education and work as housewives. Knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum at Pertiwi Mother and Child Hospital Makassar with poor knowledge. Maternal attitudes about high risk and danger signs of pregnancy, childbirth, postpartum at Pertiwi Mother and Child Hospital Makassar with a negative attitude. Maternal behavior about high risk and danger signs of pregnancy, childbirth, postpartum at Pertiwi Mother and Child Hospital Makassar with negative behavior. There is a relationship between the knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum with the attitude of mothers in pregnancy care at Pertiwi Mother and

Child Hospital Makassar. There is a relationship between the knowledge of pregnant women about high risks and danger signs of pregnancy, childbirth, postpartum with maternal behavior in pregnancy care at Pertiwi Mother and Child Hospital Makassar.

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