Husband's Support for Regularity of Antenatal Care (ANC)
(In the village polyclinic in Drenges Village, Sugihwaras District Bojonegoro Regency)

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Abstrak

Ini adalah dukungan dari suami, mengetahui keteraturan perawatan antenatal dan analisis hubungan dukungan suami untuk keteraturan perawatan antenatal. Penelitian ini adalah penelitian analitik deskriptif dengan pendekatan Cross Sectional. Sumber data diperoleh dari semua wanita yang diperiksa di Poliklinik Desa di Desa Drenges, Kabupaten Bojonegoro pada 1 November 2017 - 1 Mei 2018 dengan populasi 28 orang. Teknik pengambilan sampel menggunakan total sampling. Teknik pengumpulan data menggunakan data primer dan data sekunder. Data primer berupa data tentang dukungan suami untuk perawatan antenatal diperoleh dari kuesioner, sedangkan data sekunder berupa data tentang keteraturan perawatan antenatal diperoleh dari rekam medis dan buku KIA, kemudian data dianalisis secara deskriptif dan dengan Analisis statistik. menggunakan uji korelasi SPSS 22. Hasil penelitian ini menunjukkan bahwa mayoritas dukungan suami kurang sebanyak 19 responden (68%), 17 responden (61%), mayoritas responden yang mendapat dukungan suami Antenatal Care secara rutin dilakukan, yaitu 6 responden (67) %), dan responden yang kekurangan dukungan suami, mayoritas dari mereka tidak secara teratur melakukan Perawatan Antenatal, yaitu 14 responden (74%). Dari hasil uji korelasi, nilai sig = 0,000 berarti bahwa H0 ditolak dan H1 diterima. Dari hasil uji korelasi juga diperoleh koefisien korelasi sebesar 0,8 yang berarti bahwa keteraturan ANC sangat kuat. Kesimpulan dari hubungan antara dukungan suami dan keteraturan ANC dengan hubungan yang sangat kuat.

Kata kunci: Dukungan Suami, Perawatan Antenatal.

Abstract

This study aims to determine the support of the husband, know the regularity of antenatal care and analyse the relationship of husband's support for the regularity of antenatal care. This research is a descriptive analytic study with Cross Sectional approach. Sources of data were obtained from all pregnant women who examined at the village polyclinic in Drenges Village, Bojonegoro Regency on November 1, 2017 - May 1, 2018 with a population of 28 people. The sampling technique uses Total Sampling. Data collection techniques use primary data and secondary data. Primary data in the form of data about husband's support for antenatal care obtained from the questionnaire, while secondary data in the form of data about the regularity of antenatal care obtained from medical records and MCH books, then the data were analyzed descriptively and by statistical analysis using SPSS 22 correlation test. The results of this study indicate that

the majority of husbands' support is lacking as many as 19 respondents (68%), the majority of respondents do not regularly conduct Antenatal Care examinations as many as 17 respondents (61%), the majority of respondents who received husband's support regularly conducted Antenatal Care, namely 6 respondents (67 %), and respondents who lacked husband's support, the majority of them did not regularly conduct Antenatal Care, namely 14 respondents (74%). From the results of the correlation test, the value of sig = 0,000 means that H0 is rejected and H1 is accepted. From the results of the correlation test also obtained a correlation coefficient of 0.8 which means that the support of the husband with the ANC regularity is very strong. The conclusions from this study are the relationship between husband's support and the regularity of the ANC with a very strong relationship.

Keywords: *Husband's Support, Antenatal Care.*

1. INTRODUCTION

Women in their lifetime experience a unique life cycle, one of which is the period of pregnancy. Pregnancy occurs from conception to the process of fetus growth in the uterus which lasts for approximately 280 days (40 weeks or 9 months 7 days) calculated from the first day of the last menstrual period until the birth of the fetus (Prawiroharjo, 2008). Pregnancy is actually a natural process, but during the pregnancy process, it is necessary to monitor the health of pregnant women and their fetuses periodically and continuously so that pregnancy is expected to be normal and there are no problems or accompanying complications. To achieve this it is necessary to do antenatal care. Care during a good pregnancy can reduce maternal and perinatal deaths (Fajrin, 2017). Based on the WHO recommended program policy a minimum pregnancy check is carried out 4x (K4) during pregnancy, which is 1x in the first trimester, 1x in the second trimester and 2x in the third trimester (Fajrin, 2017).

The achievement of coverage of K4 pregnant women in East Java Province in 2016 was 89.53%. This figure has decreased compared to 2015 which reached 91.24%, while the K4 coverage target for 2016 was 88%. There are 16 regencies or cities that have not reached the target, one of which is Bojonegoro regency (Ministry of Health, East Java Province, 2017). Based on data in Bojonegoro regency in 2016, the number of pregnant women was 18,745 people with K4 coverage as many as 16,245 people (86.6%), while in Sugihwaras sub-district in 2016, the number of pregnant women were 664 people with K4 coverage of 563 people (84.8 %) (Health office in Bojonegoro Regency in 2017). Pregnancy examination visits (antenatal care) is one form of behavior in the utilization of health services. According to Lawrence Green in Notoatmodjo (2007) individual health behavior is influenced by three main factors, namely predisposing factors, enabling factors, and reinforcing factors. The presdisposing factor relates to individual characteristics which include age, education, occupation, culture, knowledge, attitudes, and trust in health services. Enabling factors are factors that enable or facilitate behavior or actions, including facilities and infrastructure or facilities for the

occurrence of health behaviors, such as community health centers, integrated service posts, midwife clinics and so on. Reinforcing factors are factors that encourage or strengthen the occurrence of behavior, one of which is husband's support.

2. METHOD

In this study, the research design was descriptive analytic with a Cross Sectional approach. Sources of data were obtained from all pregnant women who examined at the village polyclinic in Drenges Village, Bojonegoro Regency on November 1, 2017 - May 1, 2018 with a population of 28 people. The sampling technique uses Total Sampling. Data collection techniques use primary data and secondary data. Primary data in the form of data about husband's support for antenatal care obtained from the questionnaire, while secondary data in the form of data about the regularity of antenatal care obtained from medical records and MCH books, then the data were analyzed descriptively and by statistical analysis using SPSS 22 correlation test.

3. RESULT AND DISCUSSION

3.1 General Data of Respondent Characteristic

Table 1. Frequency Distribution based on general data on the Respondent Characteristics in the village polyclinic in Drenges Village, Sugihwaras District, Bojonegoro Regency.

No.	General Data of Respondents Characteristics	Frequency	Percentage (%)
1.	**Age of respondent's husband**		
	<20 years old	2	7 %
	20-35 years old	14	50 %
	>35 years old	12	43 %
2.	**Education of the respondent's husband**		
	Elementary Education (SD/SMP)	10	36 %
	Secondary Education (SMA)	15	53 %
	Higher Education (Diploma, S1, S2)	3	11 %
3.	**Respondent's husband's work**		
	Labor / Farmers	16	57 %
	Entrepreneur	10	36 %
	civil servants	2	7 %
4.	**Pregnancy to**		
	1	8	28 %
	2-4	17	61 %
	>4	3	11 %

Source: Primary Data

Based on Table 1, it can be seen that the majority of respondents' husbands aged 20-35 years are 14 respondents (50%), the majority of them are Secondary Education (SMA) as many as 15 respondents (53%), the majority work

as farmers as many as 16 respondents (57%) and the majority were pregnancy (2-4) as many as 17 respondents (61%).

3.2 Data of husband's support

Table 2. Frequency Distribution is based on husband's support in the village polyclinic in Drenges Village, Sugihwaras District, Bojonegoro Regency.

No.	Husband's Support	Frequency	Percentage (%)
1.	Good	9	32%
2.	Less	19	68%
	Total	28	100%

Source: Primary data

Figure 2. Husband's support

Based on Table 2, it can be seen that the majority of husband's support is less, as many as 19 respondents (68%).

3.2 Regularity Data on Antenatal Care

Table 3. Frequency Distribution based on the Regularity of Antenatal Care in the Village Polyclinic in Drenges Village, Sugihwaras District, Bojonegoro Regency.

No.	Regularity of Antenatal Care	Frequency	Percentage (%)
1.	Regular	11	39%
2.	Irregular	17	61%
	Total	28	100%

Source: Secondary data

Figure 3. Regularity in Antenatal Care

Based on Table 3, it can be seen that the majority of respondents did not regularly perform inspection Antenatal Care as many as 17 respondents or 61%.

3.3 Data on Husband's Support for Regularity in Antenatal Care

Table 4. Frequency Distribution based on Husband's Support to Regularity in Antenatal Care at the Village Polytechnic in Drenges Village, Sugihwaras District, Bojonegoro Regency.

| Husband's Support | Regularity in Antenatal Care | | | | Total | |
| | Regular | | Irregular | | | |
	Number	%	Number	%	Number	%
Good	6	67 %	3	33 %	9	32 %
Less	5	26 %	14	74 %	19	68 %
Total	11	39 %	17	61 %	28	100 %

Source: Primary data and secondary data

Based on Table 4, shows that the majority of respondents who obtained husband support by regularly doing Antenatal Care were 6 respondents (67%), and the majority of respondents who did not get her husband's support were not regularly doing Antenatal Care, namely 14 respondents (74%). From the results of the correlation test, the value of sig = 0,000 means that H0 is rejected and H1 is accepted. From the correlation test results also obtained a correlation coefficient of 0.8 which means that the support of the husband with the ANC regularity is very strong. Thus it can be seen that there is a relationship between husband's support and ANC regularity.

3.4 Husband's Support

The results of research conducted on 28 pregnant women who were in the village polyclinic in Drenges Village, Sugihwaras District, Bojonegoro Regency, found that the majority of husband's support was lacking, namely 19 respondents (68%). This can happen

because the majority of the husband's work is as a worker/farmer. Work is something that is done to get a living. Some of the husbands work as laborers of Indonesian migrant workers abroad so that this is the reason for the lack of intensity of communication because of the limitations of time and place that the wife is at home while their husbands work abroad. Thus the intensity of support from the husband is very lacking. In addition, only 11% of husbands with higher education, the majority of all are middle and elementary education so this can be the reason for the low level of knowledge about the importance of a husband's support. In terms of pregnancy, usually in the first pregnancy the husband's support is very good but in the next pregnancy the husband's support begins to decline. This is usually the case because the husband considers his wife to be experienced so that the husband ignores his support for an ANC examination such as the first pregnancy.

Kuntjoro (2002) in Fithriany (2011) said that support is verbal or non-verbal information, advice, assistance, real or behavior given by people closest to their social environment or in the form of presence, things that can provide emotional benefits and which influences the behavior of the recipient or support is the existence, willingness, concern of the closest people who can appreciate and love us.

3.5 Regularity in Antenatal Care

Based on the results of the study showed that the majority of respondents did not regularly conduct examinations of Antenatal Care as many as 17 respondents or 61%. Antenatal Care aims to monitor the progress of pregnancy, ensure the health of the mother and the development of the baby, improve and maintain the physical, mental and social health of the mother and baby, recognize early abnormalities or complications that may occur during pregnancy, including a history of general illness, obstetrics and surgery, preparing for full-term childbirth, giving birth safely, mother and baby with trauma to a minimum, preparing the role of mothers and families in accepting the birth of a baby so that they can grow and develop normally (Fajrin, 2017).

3.6 Relationship of Husband's Support to Regularity of Antenatal Care

Based on the results of the study showed that the majority of respondents who received husband's support regularly doing Antenatal Care were 6 respondents (67%), and respondents who lacked husband's support were the majority of them who did not regularly do Antenatal Care, namely 14 respondents (74%). From the results of the correlation test, the value of sig = 0,000 means that H0 is rejected and H1 is accepted. From the results of the correlation test also obtained a correlation coefficient of 0.8 which means that the support of the husband with the ANC regularity is very strong. Thus it can be seen that there is a relationship between husband's support and the regularity of the ANC with a very strong level of relationship.

The support given by the husband is important because sometimes pregnant women are faced with a situation of fear and solitude, so the husband is expected to always motivate and accompany pregnant women. In addition, the support given by the husband can reduce anxiety

and restore confidence in undergoing the process of pregnancy (Kusmiyati, 2008). This is in accordance with the husband's concept of being alert, that the husband's vigilance recognizes the danger signs of pregnancy and the readiness of the husband to accompany his wife to the place of health care for antenatal care is very necessary at every antenatal visit, so that he can find out the condition of his wife's pregnancy (Rahmawati, 2004).

Through the husband's support for ANC examination will be known to be related to the condition of the wife's pregnancy so that it can be done the right action and preparation in maintaining pregnancy and preparing for childbirth. Husband's support also exerts a psychological influence on the wife's mentality, because with the support of the husband during the ANC examination, it will foster a sense of caring by her husband and this can foster a sense of happiness and strengthen the wife's mentality.

4. CONCLUSION

Based on the data analysis, things that can be concluded are:
1. The majority of husbands' support is lacking as many as 19 respondents (68%).
2. The majority of respondents did not regularly conduct examination of Antenatal Care as many as 17 respondents (61%).
3. The majority of respondents, who received husband's support, regularly conducted Antenatal Care, namely 6 respondents (67%), and respondents who had fewer husbands support, the majority of them did not regularly conduct Antenatal Care, namely 14

respondents (74%). From the results of the correlation test, the value of sig = 0,000 means that H0 is rejected and H1 is accepted. From the results of the correlation test also obtained a correlation coefficient of 0.8 which means that the support of the husband with the ANC regularity is very strong. Thus it can be seen that there is a relationship between husband's support and ANC regularity.

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