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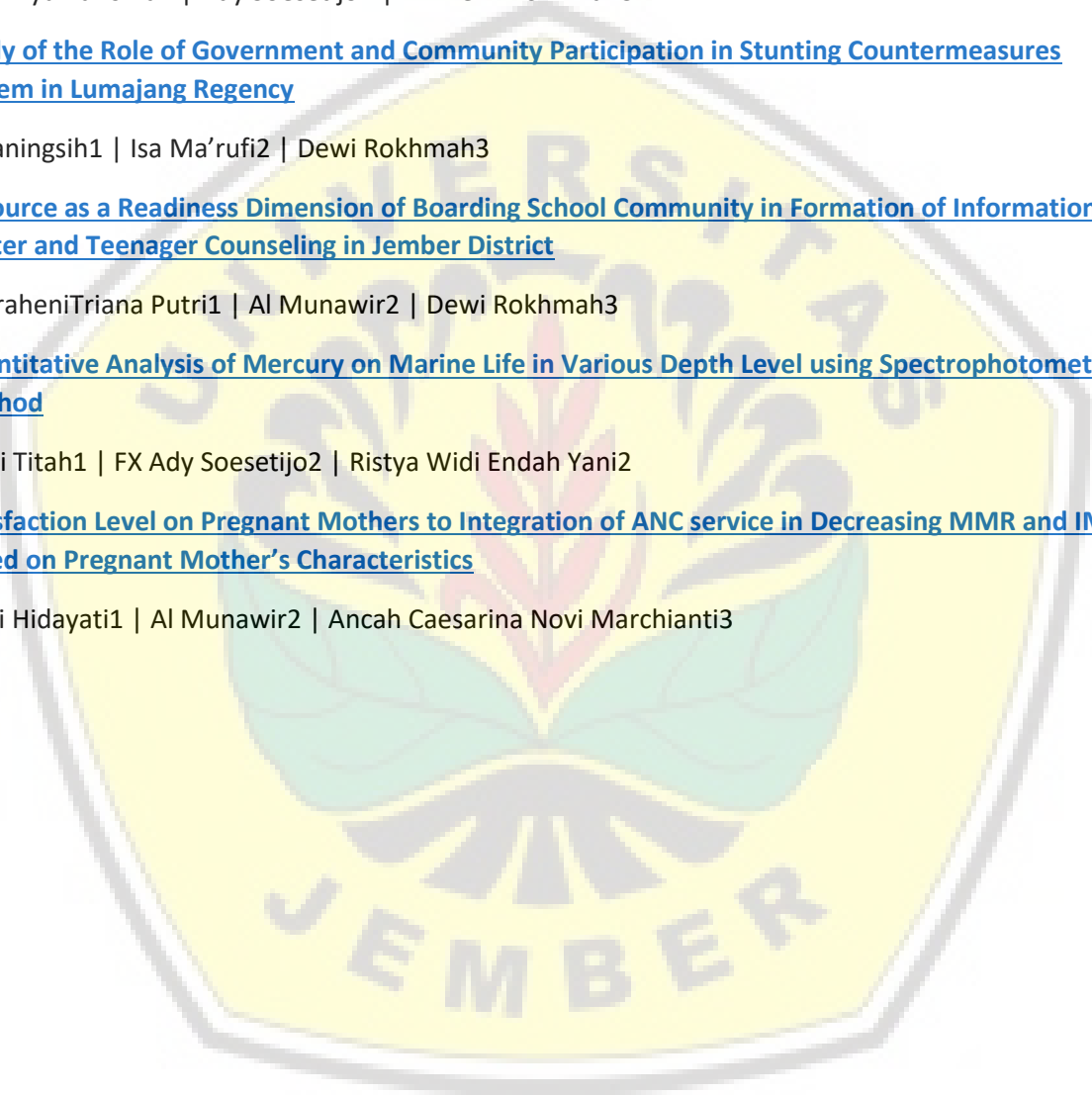
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Satisfaction Level on Pregnant Mothers to Integration of ANC service in Decreasing MMR and IMR Based on Pregnant Mother's Characteristics

Aini Hidayati¹ | Al Munawir² | Ancah Caesarina Novi Marchianti³

Abstract

MMR becomes a global issue because it is an important indicator in determining public health degree, so each country has responsibility to avoid maternal death. An effort in accelerating the decrease of MMR with pregnancy checkup program is well known as Integration of ANC service program. Integration of ANC service is a comprehensive and quality antenatal provided to all pregnant mothers temporally during pregnancy. The characteristic of pregnant mothers will affect the frequency of their visit to conduct Integration of Antenatal Care (ANC) service. The mothers feeling unsatisfied with antenatal care will not conduct further checkup, so as it will endanger them because the risk of complication for both of mothers and their child is not detected. Satisfaction is feeling level on those who have compared the performance or result acquired more than their expectation. There were 1 maternal death and 10 infant deaths in Public Health Center (Puskesmas) of Senduro in 2018. This IMR was in the fourth position from twenty-five public health centers (puskesmas) in Lumajang. For this condition, the public health center should be able to decrease MMR and IMR since it is considered to be a preventive and promotive effort in order to achieve satisfaction on the patients. This research was aimed to analyze the satisfaction level on pregnant mothers on Integration of ANC service decreasing MMR and IMR based on characteristic of pregnant mothers in Puskesmas Senduro in 2019. Type of this research was descriptive analysis using quantitative approach. Questionnaire about satisfaction level of ANC service in Puskesmas Senduro on September to October in 2019 was applied. It also took 670 populations of pregnant mothers coming to Puskesmas Senduro. Samples were taken by using systematic random sampling. Samples taken were 109 respondents based on specified criteria. Data collection results were processed by employing Chi Square statistical test with a significant level of 0.05. The result of this research showed that most patients about 58 pregnant mothers (53.2%) were quite satisfied, 45 pregnant mothers or about 41.3% were very satisfied and 6 pregnant mothers or about 5.4% were still unsatisfied on the service provided. It could be concluded that 53.2% patients were quite satisfied to the Integration of ANC service in Puskesmas Senduro.

Keywords: Satisfaction, ANC Service, Characteristic

1.0 INTRODUCTION

Maternal Mortality Rate in Indonesia is still reaching 305 per 100.000 live births. That rate is still higher than target of SDGs of Indonesia in 2030 namely <70/100.000 live births. Meanwhile, the target of SDGs to decrease Neonatal Mortality Rate is 12/1.000 live births, under-five mortality rate (U5MR) is 25/1.000 KH/live births. Trend in Maternal Mortality Rate in Lumajang since 2014 until 2018 was fluctuatingly decreased. Based on the report of Public Health of Health Department of Lumajang, MMR in 2015 were 23, 18 in 2016, 10 in 2017 but 16 in 2018. An effort to accelerate the decrease of MMR with pregnancy checkup program is well known as Integration of ANC service program provided to all pregnant mothers temporally during pregnancy. Integration of ANC service is comprehensive and quality antenatal service provided to pregnant mothers.

Public Health Center is medical facility serving public. Public Health Center is related to the medical service quality and satisfaction level. It means that if the quality of health service fulfills the patient satisfaction, the suitability level will be in high position and public health center will be needed by public. Nevertheless, suitability level will be in low position if the quality of health service does not fulfill patient satisfaction level and it will drive public to leave public health center. Thus, the quality of health service in public health center is very important to conduct. Patient satisfaction is an important element in evaluating service quality by quantifying the response of the patient after experiencing the service. Patient satisfaction is the expectation of the patient from health workers as a result of the health service performance in the process of interaction in order to provide service. According to Regulation of Ministry of Health of Indonesia 2016 about Minimum Service Standard for patient satisfaction is above 95%.

Individual characteristics which could affect patient satisfaction are age, occupation, number of children/parity and mothers level education. Several people's characteristics considered becoming major factor or priority determinant of health quality indicator and priority determinant of patient satisfaction level are: age, sex, length of stay, source of funding, diagnosis of disease, occupation, income, education level, ethnic, residence, class treatment, marital status, religion and preference. Preliminary study with interview to 10 pregnant mothers conducting Integration of ANC explained that 60% were unsatisfied with the service especially related to waiting time when they conduct checkup with general practitioner and dentist because they need long waiting time. The pregnant mothers felt that the service provided was not fast, so they found uncomfortable to stay in public health center. This condition could cause the desire of pregnant mother to conduct next ANC decreased. This issue should be considered by *Puskesmas Senduro* in order to make pregnant mothers visit to detect and avoid pregnancy complication in decreasing MMR and IMR.

2.0 METHODOLOGY

This research was descriptive analysis employing quantitative approach. The design of this research was *cross-sectional* study. Population in this research was all pregnant mothers in Public Health Center of Senduro Lumajang with 670 numbers of patients on September to October 2019. Total samples in this research were 109 pregnant mothers. Samples were taken by using *systematic random sampling*. Data were collected by questionnaire. For data analysis, the researcher used univariate with frequency distribution and bivariate with chi square.

3.0 RESULTS

Table 1 Description of the respondents based on the characteristics

No.	Characteristics	Frequency	Percentage (%)
1	Age		
	a. At risk	26	23.9
	b. No risk	83	76.1
	Total	109	100
2	Education Level		
	a. Low	79	72.5
	b. Medium	29	26.6
	c. High	1	0.9
	Total	109	100
3	Occupation		
	a. Working	40	36.7
	b. Not Working	69	63.3
	Total	109	100
4	Number of Children		
	a. Nullipara	39	35.8
	b. Primipara	62	56.9
	c. Multipara	8	7.3
	Total	109	100

The results of the research showed that riskiest pregnant mothers in pregnancy in 2019 were 83 people (76.1%). Most low educated pregnant mothers were 79 people (72.5%). Most unworking pregnant mothers were 69 people (63.3%). Most pregnant mother in primipara categories were 62 people (56.9%).

Table 2 Recapitulation of SERVQUAL counting to service for pregnant mothers in *Puskesmas Senduro*

No.	Characteristics	Frequency	Percentage (%)
1	Very satisfied	45	41.3
2	Satisfied	58	53.2
3	Unsatisfied	6	5.5
Total		109	100

Based on table 2, it was found that most pregnant mothers who were satisfied with the service were 58 people (53.2%). Very satisfied pregnant mothers were 45 people or 41.3%. Unsatisfied pregnant mothers were 6 people or 5.4% to health service in *Puskesmas Senduro*. Details of satisfaction level based on satisfaction indicator provided as follow:

Table 3 Recapitulation of SERVQUAL counting SERVQUAL for pregnant mothers in *Puskesmas Senduro*

No	Dimensioni	Scores		SERVQUAL	Satisfaction Level
		Fact (Score = Fact / Expectation)	Expectation		
1	Tangibles	17.93	22	0.82	Very satisfied
2	Reliability	18.82	22.6	0.83	Very Satisfied
3	Responsiveness	16.26	22.5	0.72	Satisfied
4	Assurance	17.52	22.4	0.78	Satisfied
5	Empathy	17.60	22.2	0.79	Satisfied

Based on table 2, it could be concluded that overall satisfaction level of pregnant mothers in *Puskesmas Senduro* in term of (*Tangible*) and reliability. Furthermore, for responsiveness, assurance and empathy were quite satisfying.

3.1 Hypothesis Testing

1. Correlation of Characteristics with Satisfaction Level to Tangibles

Table 3 Correlation between Tangible and Characteristics

No	Characteristics	P value	α (0,05)	Hypothesis	C	Criteria
1	Age	0.015	≤ 0.05	Accepted	0.267	Low
2	Education level	0.000	≤ 0.05	Accepted	0.425	Medium
3	Occupation	0.000	≤ 0.05	Accepted	0.394	Low
4	Number of Children	0.000	≤ 0.05	Accepted	0.415	Medium

Based on table 3, the result of statistical Chi Square test that showed that age, education level, occupation and number of children were related to satisfaction level.

2. The Correlation of Characteristics with Satisfaction level of Reliability

Table 4 Correlation of Reliability and Characteristics

No	Characteristics	P value	α (0,05)	Hypothesis	C	Criteria
1	Age	0.020	≤ 0.05	Accepted	0.259	Low
2	Education Level	0.000	≤ 0.05	Accepted	0.435	Medium
3	Occupation	0.010	≤ 0.05	Accepted	0.278	Low
4	Number of Children	0.001	≤ 0.05	Accepted	0.390	Low

Based on table 4, the result of statistical Chi Square test showed that age, education level, occupation, and number of children is related to satisfaction level.

3. Correlation between Characteristic and Satisfaction Level of Responsiveness

Table 5 Correlation of Response and Characteristics

No	Characteristics	P value	α (0,05)	Hypothesis	C	Criteria
1	Age	0.017	≤ 0.05	Accepted	0.264	Low
2	Education Level	0.002	≤ 0.05	Accepted	0.363	Low
3	Occupation	0.000	≤ 0.05	Accepted	0.360	Low

4	Number of Children	0.000	≤ 0.05	Accepted	0.414	Medium
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Based on table 5, Statistical Chi Square test showed that age, education level, occupation, and number of children is related to satisfaction level.

4. Correlation between Characteristic and Assurance Satisfaction Level

Table 6 Assurance Correlation with Characteristics

No	Characteristics	P value	$\alpha (0,05)$	Hypothesis	C	Criteria
1	Age	0.031	≤ 0.05	Accepted	0.244	Low
2	Education Level	0.000	≤ 0.05	Accepted	0.464	Medium
3	Occupation	0.001	≤ 0.05	Accepted	0.332	Low
4	Number of Children	0.027	≤ 0.05	Accepted	0.302	Low

Based on table 6, statistical Chi Square test showed that age, education level, occupation and number of children is related to satisfaction level.

5. Correlation between Characteristics and Empathy Satisfaction Level

Table 7 Correlation of Empathy and Characteristic

No	Characteristics	P value	$\alpha (0,05)$	Hypothesis	C	Criteria
1	Age	0.012	≤ 0.05	Accepted	0.274	Low
2	Education Level	0.000	≤ 0.05	Accepted	0.443	Medium
3	Occupation	0.266	≥ 0.05	Accepted	0.154	Very Low
4	Number of Children	0.011	≤ 0.05	Accepted	0.327	Low

Based on table 7, statistical Chi Square test showed that age, education, occupation, and number of children are related to satisfaction level.

4.0 DISCUSSION

Satisfaction level to Integration of ANC service in decreasing MMR and IMR based on the age of pregnant mothers in *Puskesmas Senduro* in 2019. Based on the research, it was found that age was related to satisfaction level in aspects of tangibility, reliability, responsiveness, assurance and empathy. Age showed the maturity of mind for person. Age is the length of life period of persons since they were born. By more mature of people's age, mature and strength level will be better in thinking and acting, this is caused from the soul experience had will affect persons act. (7) By more mature of persons' age and strength, they will be more mature in thinking and act. In aspect of public's trust, more mature person will be more trusted than immature person. This becomes the cause of soul experience (8). Another research showed that individuals characteristic considered becoming major or priority determinant of quality health service indicator and priority determinant of patient satisfaction was age (6).

Satisfaction level of pregnant mothers to Integration of ANC service in decreasing MMR and IMR based on occupation of pregnant mothers in *Puskesmas Senduro* in 2019. Based on the research, it was found that occupation was related to satisfaction level on aspects of tangibility, reliability, responsiveness and assurance. In addition, on empathy aspect, there was no correlation in age. Occupation showed a will of person in earning money. Occupation is activity carried out by person to earn money. Person who is busy with daily activities will have more time to have information because person working in somewhere will have more interaction with other people than unworking person (9). Occupation is a need should be conducted specially to support the living cost of persons' family. Working for mothers will have influence to family life (10). The result of this research showed that there was correlation between occupation and satisfaction level (11)

Satisfaction level on pregnant mothers to Integration of ANC service in decreasing MMR and IMR based on number of children in *Puskesmas Senduro* in 2019. Based on the research result, it was found that number of children is related to satisfaction level on aspects of tangibility, reliability, responsiveness, assurance and empathy. Number of children showed the experience of person in birthing. Parity is number of births had by a woman (12). Individual's characteristics which could affect patient satisfaction were age, occupation, number of children or parity and education level of the mother (13).

Satisfaction level of pregnant mothers on Integration of ANC service in decreasing MMR and IMR based on level education of mother in *Puskesmas Senduro* in 2019. Based on research result, it was found that education level was related to satisfaction level in aspects of tangibility, reliability, responsiveness, assurance and empathy. Higher

education had by persons will make formed mind to them, so they will open their mind to new things and information (14). Education level of mother affects how persons act to find cause and solution for their life. Persons with high education usually will more rationally do act. Thus, persons with higher education will easily rather accept new idea. In addition, mothers with high education will check up their pregnancy regularly to keep their health and children (2).

5.0 CONCLUSION

Referring to the research result and discussion about level satisfaction of pregnant mothers based on characteristics, it could be concluded as follow:

- a. Age is related to satisfaction level on aspects of tangibility, responsiveness, assurance and empathy.
- b. Occupation is related to satisfaction level on aspects of tangibility, reliability, and responsiveness and assurance. In addition, on empathy aspect, occupation is not correlated.
- c. Number of children is related to satisfaction level on aspect of tangibility, reliability, responsiveness, assurance and empathy.
- d. Education level is related to satisfaction level on aspects of tangibility, reliability, responsiveness, assurance and empathy.

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