The correlation between the usage of kami pekarasa card (cards of pregnant mother for posyandu’s members and villages authority holders) and the visit coverage of k4 pregnant mother during COVID-19 pandemic event

Iis Hanifah*, Tutik Hidayati1, Riska Faraswati1

ABSTRACT

Introduction: Covid-19 Pandemic event in Indonesia is still spreading, with one of the worst outbreaks occurring in Probolinggo, East Java. Pregnant mother is at a high risk of getting covid-19 pandemic, thus prenatal checkups at Public Health Center or independent practice midwives are limited during the pandemic. The purpose of this study is to investigate the correlation between the usage of the kami pekarasa card (cards of pregnant mother for posyandu’s members and villages authority holders) and the coverage of the visit of k4 pregnant mother during the covid-19 pandemic event.

Methods: Correlational analytic research design was adopted in this study. This study used a 32-person sample. Data was collected by cadres using health protocols and analyzed using the chi-square test.

Results: The data revealed a p-value=0.018 and r=0.05, indicating that there is a correlation between the usage of kami pekarasa card and visit coverage of k4 pregnant mother during covid-19 pandemic.

Conclusion: Based on the result there was a significant between the usage of kami pekarasa card and the visit coverage of k4 pregnant mother during covid-19 pandemic event.

Keywords: kami pekarasa card, k4 coverage, covid-19.

INTRODUCTION

Integrated antenatal care is the integration of routine antenatal care with several other programs that target pregnant mother, according to the priorities of the Ministry of Health, which are needed to improve the quality of antenatal care.1 WHO has standardized in directing antenatal care, something like four times throughout pregnancy. To realize the number of pregnant mothers who have done antenatal care, specifically the trimester of pregnancy. Regardless of the reality, K4 is a visit for the pregnant mother to get antenatal care services something like four times, in particular, one time in the primary trimester, once in the second trimester, and twice times in the third trimester.2

During the covid-19 Pandemic event, public health administrations should keep on running ideally, secured environment for patients and maternity specialists, with various adjustments and directions for taking care of Coronavirus or in another name, is the health protocols.3,4 Founded on a preliminary study led at the Gading’s Community Health Center at Probolinggo utilizing strict health protocols around March to December 2020 on 42 pregnant mothers, it was tracked down that 10 individuals (23.80%) were not consistent in antenatal visits due to factors, not unadulterated K1 toward the start of the assessment since they are moved people from another village and amenorrhea family planning service on the grounds because of difficult territory to reach health facilities and 32 others (76.19%) were submissive in antenatal visits.5,6

During this covid-19 pandemic event, there are numerous limitations on routine health services including maternal and infant health services.7 For instance, the pregnant mother is hesitant to go to the PUSKESMAS or other Community Health Center inspired by a paranoid fear of being tainted, there are suggestions for deferring pregnancy registration and classes for pregnant mother, just as the ineptness of administrations as far as personnel and infrastructure as well as personal protective equipment.8 The endeavors to enhance health services during the covid-19 pandemic event identified with the inclusion of k4 pregnant mothers in gading village, a leap forward or breakthrough was made through the making of kartu kami pekarasa (cards of pregnant mother for POSYANDU’s members and villages

Received: 2022-07-18
Accepted: 2022-08-25
Published: 2022-10-01

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Cite This Article: Hanifah, I., Hidayati, T., Faraswati, R. 2022. The correlation between the usage of kami pekarasa card (cards of pregnant mother for posyandu’s members and villages authority holders) and the visit coverage of k4 pregnant mother during COVID-19 pandemic event. Bali Medical Journal 11(3): 1350-1353. DOI: 10.15562/bmj.v11i3.3555
The idea of executing the kami pekarasa card in gading town gives the card to pregnant mother and stick it on the maternal health services book, then, at that point use it as a checklist by the POSYANDU’s units. To evaluate whether pregnant mothers have checked by the POSYANDU’s standard operation procedure or not and have checked the time interval or not, a monitoring event is carried out at the POSYANDU session. In case there is the pregnant mother who doesn’t come for check-ups at intervals, a home visit (sweeping) will be done by the POSYANDU’s units, and any villages authority (TP, PKK), KPM (Community Empowerment Cadre) implementation of activities and permanent services by implementing health protocols to prevent transmission of covid-19 pandemic event. the kami pekarasa card contains primary information including mother’s name and spouse’s name, current address (village, RT/RW), assessed date of birth, the number of pregnancies, gestational age (in months), check how frequently. Secondary data incorporates; child’s name, the spot of the birth, the child’s date of birth, and time.

**METHODS**

The design of this study utilizes a quantitative research design in the sort of correlational logical exploration with a cross-sectional exploration approach, in particular, the technique utilized intends to depict the connection between the kami pekarasa card with the inclusion of K4 pregnant mother during the covid-19 pandemic time period. The participant in this research was the pregnant mother in Gading Village, Probolinggo Regency upwards of 32 pregnant mothers. This examination utilizing the all-out testing procedure contained in the non-probability sampling. the independent variable of this examination was kartu kami pekarasa and the dependent variable of this investigation was the inclusion of visits by pregnant mother over the K4 level. In this examination, the instrument utilized for the K4 pregnant mother’s visit variable by our pekarasa card. univariate data analysis utilizing recurrence circulation. Bivariate investigation utilizing Chi-Square test.

**RESULTS**

Based on the Table 1 below, it was found that most of the respondents used or holder of kami pekarasa cards as many as 22 people (68.8%).

Based on Table 2, it is found that most of the participant’s coverage of K4 pregnant mother is according to the SOP as many as 20 people (62.5%).

According to the table before, it very well may be seen that participants who utilized the kami pekarasa card during the covid-19 pandemic event would tend to cover K4 pregnant mother visits as per standard of 53.1%, while participant who didn’t utilize Kami Pekarasa Cards will in general cover K4 pregnant mother’s visits not as indicated by the standard of 37.5%. Based on the chi-square test, it was discovered that p-value 0.018, implying that H0 was rejected and Ha was accepted so that there was a connection between the utilization of Kami Pekarasa with the coverage of visits for Pregnant mother K4 in Gading village, Gading district Probolinggo regency.

**DISCUSSION**

The results indicated that most of the participants used or owned the kami pekarasa card during the covid-19 pandemic event as many as 22 people (68.8%). This indicated that more than 50% of participants have utilized or owned the kami pekarasa card.

The kami pekarasa card is the cards of pregnant mother for POSYANDU’s members and villages authority holders, which is an advancement in gading village which is manifested as a card, which is attached to the maternal health services book to monitor pregnant mother’s visits to health workers at intervals. In light of data from the village maternity specialist, she clarified that the purpose for the presence of the perkasa card depended on the absence of participation of pregnant mothers in conducting health visits or health checks during the covid-19 pandemic event and furthermore because of limited access because of the mountainous landscape, as an effort to suppress maternal participation nonappearance in prenatal care and hygiene.

Table 1. Frequency distribution of respondents based on the utilization of kami pekarasa cards during the covid-19 pandemic event.

<table>
<thead>
<tr>
<th>No</th>
<th>Use of our Pekarasa Card</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Card holder</td>
<td>22</td>
<td>68,8</td>
</tr>
<tr>
<td>2</td>
<td>Card void</td>
<td>10</td>
<td>31,3</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>32</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 2. Frequency distribution of respondents based on the coverage of K4 pregnant mother’s visits during the covid-19 pandemic event.

<table>
<thead>
<tr>
<th>No</th>
<th>K4 pregnant mother’s visits coverage</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>According SOP</td>
<td>20</td>
<td>62,5</td>
</tr>
<tr>
<td>2</td>
<td>Avoid the SOP</td>
<td>12</td>
<td>37,5</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>32</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 3. Cross tabulation for the utilization of kartu pekarasa with coverage of K4 pregnant mother visits during the covid-19 pandemic event.

<table>
<thead>
<tr>
<th>Coverage of K4 Pregnant mother visits</th>
<th>According SOP</th>
<th>Avoid SOP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pekarasa card utilization</td>
<td>f %</td>
<td>f %</td>
<td>f %</td>
</tr>
<tr>
<td>Card holder</td>
<td>17 53,1</td>
<td>5 15,6</td>
<td>22</td>
</tr>
<tr>
<td>Card void</td>
<td>3 9,4</td>
<td>7 21,9</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>20 62,5</td>
<td>12 37,5</td>
<td>32</td>
</tr>
</tbody>
</table>
care, a breakthrough was made by issuing the kami pekarasa card. This card actually aims to seek out the actual condition of pregnant mothers under village health services during the covid-19 pandemic event and as a monitoring tool for POSYANDU’s units and villages authority for pregnant mothers.

**Coverage of K4 pregnant mother’s visits in Gading village, Probolinggo Regency during the Covid-19 Pandemic event**

Based on the previous table, it can be perceived that participants who utilize the kami pekarasa card have a K4 inspection coverage tendency according to the SOP is around 53.1%, while participants whose do not utilize the kami pekarasa card lean towards to the coverage of visits for pregnant mother K4 did not meet the SOP is about 37.5 percentile level. According to the chi-square test, p-value of 0.018 < 0.05 was acquired, implying that Ho was dismissed, and Ha was accepted so that there was a connection between the utilization of the kami pekarasa card with the coverage of visits for pregnant mother K4 in gading village. The hypothesis in this study is accepted and genuinely proven.

As mentioned by Liliweri (2011) health communication is an orderly work to emphatically impact the health conduct of people and networks, utilizing various principles and methods for communication, both interpersonal correspondence and mass correspondence. What’s more, health communication is likewise perceived as an investigation that reviews how to utilize correspondence procedures to disperse health information that can impact people and networks to settle informed decisions regarding health management. In light of examination by Nurmayati and Indrawati (2018), there is a connection between age, pregnancy distance, knowledge, media information, spouse’s help, and backing from health laborers, and there is no connection between education, equality, and service facilities with inclusion of ANC visits to pregnant mother at the Kambu Community Health Center, Grobogan Regency. Given the importance of prenatal checkups, pregnant mothers should keep ongoing routine health checks through them regularly even in the Covid-19 Pandemic event. The timetable for prenatal check-ups for third-trimester pregnant mothers ought to be considerably more frequent since it is close to baby delivery time.

Under the researcher’s analysis, the issuance of the kami pekarasa card by health laborers is a correspondence medium that will give two-way data both to pregnant mothers and health laborers. this kami pekarasa card information will be able to change the behavior of pregnant mothers in utilizing health services. the association among interaction between health laborers and pregnant individual behavior through the kami pekarasa card influences the health status of a pregnant mother. In the future through this card, health program interventions can be fostered that plan to change individual behavior to turn out to be more obedient and healthier.

**CONCLUSION**

Based on the results of our research entitled the correlation between the usage of kami pekarasa card and the visit coverage of k4 pregnant mother during covid-19 pandemic event, the results showed that there was a connection amongst the use of kami pekarasa cards and visits by pregnant mother throughout the covid-19 pandemic event. this indicated that the utilization of the kami pekarasa card is paramount to obtain health services for pregnant mothers. health services in the time of the covid-19 pandemic event are limited to break the spread chain of the coronavirus, with the existence of the kami perkasa card, this an innovation in gading village which is acknowledged as a card, which is attached to the maternal health services book to monitor visits by pregnant mother to wellbeing laborers as indicated by the span. we trust that it tends to be helpful for readers so that in the time of the covid-19 pandemic event, we can give wellbeing administrations to pregnant mothers.

**FUNDING**

The authors are responsible for all of the study funding without a grant or any external funding source.

**CONFLICT OF INTEREST**

No potential conflict of interest relevant to this article was reported.

**AUTHOR CONTRIBUTION**

All authors similarly contribute to the think about from the investigate concepts, information acquisitions, information investigation, factual investigations, changing the paper, until detailing the consider comes about through publication.

**ETHICAL CONSIDERATION**

Researchers submitted an application to the ethics commission of PHC Surabaya Hospital by giving a research proposal before conducting the research at PHC Hospital. The research was undertaken after the ethical feasibility test was completed with certificate number 2482/EC/KEPK/UNUSA/2021.

**ACKNOWLEDGMENTS**

Our appreciation goes to the Head of Stikes Hafshawaty and the research and service institution (LPPM) Stikes Hafshawaty who have offered help and support in funding, the head, and maternity specialist of Gading village, and then the research team who have aided the enactment until the publication of this research article.

**REFERENCES**

6. de Oliveira KF, de Oliveira JE, Wernet M, Carvalho Paschoini M, Ruiz MT. COVID-19

