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# Relationship between Husband's Social Support and Participation in Pregnant Women Class in Denpasar City in 2019

### Ni Putu Citra Laksmi\*

Health Polytechnic Kemenkes Denpasar, Indonesia, citra.lalaksmi.cl@gmail.com Correspondence Author\*

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#### **Abstract**

The Pregnant Women class program is one of the government programs to increase the knowledge of pregnant women about pregnancy, preparation for childbirth, postpartum, newborns, and toddler development so that mothers are expected to be able to identify health problems experienced, but maternal participation in the class of pregnant women is low. The husband's social support is a strengthening factor for mothers to be able to participate in classes for pregnant women. This study aims to see whether there is a relationship between a husband's social support and participation in classes for pregnant women. This study is an observational analytical study with a cross-sectional approach. The sampling technique is non-probability sampling by consecutive sampling of 78 people. This research was conducted from April 1 to May 1, 2019, at the Denpasar City Health Center. The results showed that most of the husband's social support was weak (56%) and mothers did not participate in classes for pregnant women (56%). Statistical tests with the correlation of contingency coefficients obtained  $\rho = 0.000$ value and r value = 0.707, meaning that there is a strong relationship between the husband's social support and participation in pregnant women's classes. The implication of this study is to increase knowledge related to husbands' social support factors that play a role in women's participation in pregnant women's classes.

**Keywords**: social support, husband, participation

### Introduction

The maternal mortality rate in Bali Province in the last 5 years is below the national rate and below the target set at 100 per 100,000 live births, but every year it has not been significantly reduced. The maternal mortality rate in 2017 was 68.6 per 100,000 live births, the lowest rate in the last three years (Dinkes Kota Denpasar, 2017). Government programs have been implemented to reduce MMR and AKB through P4K, antenatal care and pregnant women

classes (Kementrian Kesehatan Republik Indonesia, 2014). The pregnant women class program is one of the government's programs for Increase knowledge of pregnant women through meetings with health workers and other pregnant women.

Classes for pregnant women is a means to learn together to improve the knowledge and skills of mothers regarding maternity care, childbirth, postpartum care, newborn care, myths, infectious diseases, maternal and fetal health, high-risk pregnancy, danger signs, complications that can occur, empowerment of mothers, families in planning for prevention of complications and referrals and birth certificate (Kementrian Kesehatan RI, 2014). Research data in Malang found that 50% of Puskesmas in Malang ultimately did not hold classes for pregnant women due to the low participation of pregnant women to attend classes for pregnant women (Kusbandiyah et al., 2013). Puskesmas in Bali according to Bali provision data in 2017 is as many as 120 puskesmas and all Puskesmas have carried out classes for pregnant women.

### **Literature Review**

Based on the results of previous research It is known that the implementation of pregnant women classes in Puskesmas for the Denpasar region only reached 27.2% (three out of 11 Puskesmas) with the average participation of pregnant women to take part in pregnant women classes reached 50% followed by five out of ten target participants (Widiantari, 2015). The involvement of family members or closest people can help change to behave towards a healthy life and be able to increase awareness of change (E.P Sarafino & Smith, 2014). Women with greater support from their husbands and mothers-in-law generally have an increased ability to use ANC services (Ghaffar et al., 2015).

Research by Rima Melati and Raudatussalamah found a significant relationship between the husband's social support and maintaining health during pregnancy (Melati & Raudatussalamah, 2012). By involving the husband, it is hoped that the participation of pregnant women in participating in the class for pregnant women can increase. The purpose of this study was to determine the relationship between husband's social support and participation in classes for pregnant women in Denpasar City in 2019.

# **Research Method**

This study is a type of observational analytical research. This study design used a cross-sectional time approach. This research was conducted in four Puskesmas in Denpasar City, namely Puskesmas I Denpasar Utara, Puskesmas I Denpasar Barat, Puskesmas I Denpasar Selatan, and Puskesmas I Denpasar Timur on April 1 - May 1, 2019. The sample size was 78 people with a non-probability sampling technique in the form of consecutive sampling. The data collected is in the form of primary data with questionnaire guidelines. Kolmogorov-Smirnov normality test results with a value of (p) = 0.000, so the data are abnormally distributed and the data are presented with the median value. Univariate analysis to explain the distribution and frequency of each variable. The statistical test used is the correlation of

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contingency coefficients. Data analysis using computer software, with significance ( $\alpha$ ) = 0.05 and 95% confidence level. The significance value in this test is p<0.05.

## Result

The characteristics of respondents based on the results of research at the Denpasar City Health Center can be presented in Table 1, which are as follows:

Table 1. Distribution of respondents by characteristics

Characteristic	Frequency (f)	Percentage (%)
Education		
Elementary (Elementary-	18	23%
Junior High)		
Secondary (SMA/SMK)	26	65%
High (D1, D3, D4/S1,	9	12%
S2)		
Parity		
Primigravida	30	38%
Multigravida	48	62%
Ethnicity		
Bali	52	67%
Javanese	26	33%

Based on the table above, from 78 respondents, it is known that most respondents have high school / vocational education equivalent (65%), multigravida or have had 1 or more children (62%) and are dominated by Balinese (67%). All respondents were housewives and healthy reproductive groups of 20-35 years. The distribution of pregnant women who receive their husband's social support can be seen in Table 2 below.

Table 2. Distribution of respondents based on the husband's social support

		Strong S	upport	Weak S	Weak Support	
Husband Support	n	Frequency (f)	Percenta ge (%)	Frequenc y (f)	Percentag e (%)	
emotional	78	38	49%	40	51%	
Instrumental	78	36	46%	42	54%	
information	78	26	33%	52	67%	
Mentoring	78	31	40%	47	60%	

Based on the table above, of the 78 respondents more received weak emotional support (51%), instrumental support was also weaker (54%), informational support was also mostly

weak (67%) and companionship support was weak (60%). Overall support was obtained as a result of weak husbands' social support (56%), this shows that more respondents received weak husbands' social support

The frequency distribution of pregnant women who attend the pregnant women class can be presented in tables and narratives as follows:

Table 3. Distribution of respondents based on participation in classes of pregnant women

Participation	Frequency (f)	Percentage (%)
Participate	34	44%
Not participating	44	56%

Based on the table above, 78 respondents have never attended a class for pregnant women (56%), while 34 respondents have attended a class for pregnant women at least once (44%). So it can be concluded that more mothers do not participate in pregnant women's classes.

The results of the bivariate analysis test with the contingency coefficient correlation method are presented in the form of a table. The following describes about the relationship between the husband's social support and participation in classes for pregnant women in Table 4.

Table 4. The relationship between the husband's social support and participation in classes for pregnant women

Participation in classes for pregnant							
Backing	women		r	ρ			
	Not participating	<b>Participate</b>					
Weak	44	0	0,707	0,000			
Percentage	100%	0%					
Strong	0	34					
Percentage	0%	100%					

The table above shows that the contingency coefficient correlation test obtained a value of  $\rho = 0.000$  and a value of r = 0.707, because p < 0.05 it can be concluded that there is a strong relationship between the husband's social support variable and participation in the class for pregnant women in Denpasar City in 2019.

### Discussion

The study involving 78 respondents found that pregnant women who received strong husband social support 100% participated in pregnant women's classes at least one meeting, while pregnant women who received weak husband social support 100% did not participate in pregnant women's classes. The results of this study got a value of  $\rho = 0.000$  which means that there is a meaningful relationship between the husband's social support and participation in classes for pregnant women. The value of the contingency coefficient between the two

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variables is r = 0.707 which means that there is a strong relationship between the two variables. The value of the correlation strength of the contingency coefficient is in the range of 0-1, the closer to one, the stronger the correlation strength. It can be said that when the husband provides strong support to the mother, the mother will attend the class for pregnant women, while mothers who get low husband social support do not participate in the class for pregnant women.

This research is in line with research by Septiani, and Rani, which examines the factors of knowledge, attitudes, and support of husbands by participating in classes for pregnant women with the result that the most dominant factor is husband support, namely values  $\rho = 0.000$  (Septiani, 2013). Another supporting research is research by Widiantari which examines the relationship between maternal characteristics and husband support with participation in pregnant women's classes, finding that husband support is the most dominating factor in women's participation in pregnant women's classes with grades  $\rho = 0.001$ . Based on multivariate analysis, husband support gets a PR score of 27.1 times, which means pregnant women who get husband support are 27.1 times more likely to attend classes for pregnant women (Widiantari, 2015).

Husband's social support can be seen from four forms of support, namely emotional support in the form of affection, appreciation, praise given by the husband to the mother, instrumental support in the form of providing easy infrastructure facilities such as providing vehicles or delivering directly so that mothers can attend classes for pregnant women, informational support in the form of providing advice or health information to mothers, and mentoring support in the form of accompanying and assisting mothers in doing Her daily job includes accompanying mothers to attend classes for pregnant women. The husband's social support also helps the mother feel comfortable and motivates the mother to always maintain and care for the health of her pregnancy (Edward P. Sarafino & Smith, 2011).

Support from the husband and a good relationship can make an important contribution to the mother's health. The social support needed is in the form of emotional support that underlies the action. It will make people feel cared for, loved, glorified, and valued (E.P Sarafino & Smith, 2014). One of the husband's roles in the presence of mothers in conducting pregnant women classes is to provide motivation to mothers in the form of psychological support and real support for mothers to be able to participate in the pregnant women class program11. Research on husband social support by Risneni, R & Helmi Yenie said that pregnant women who received husband support were more present in pregnant women's classes (Risneni & Yeni, 2017).

# Conclusion

Based on the results of research and discussion, it can be concluded that there is a relationship between husband's social support and participation in classes for pregnant women. Pregnant women are advised to be able to participate in regular pregnant women class activities, to MCH program holders at Puskesmas to further increase pregnant women's awareness of the importance of attending pregnant women's classes for mothers and involving

husbands during pregnancy checks and providing socialization about pregnant women class programs so that husbands are also aware of the importance of pregnant women's classesand motivation to pregnant women and husbands regarding the implementation of classes for pregnant women and providing education to pregnant women to maintain their pregnancy and prepare for childbirth properly, and further researchers are expected to conduct further and indepth research on other factors related to the participation of mothers in the class of pregnant women.

#### **Declaration of conflict interest**

The author declare that there is no conflict of interest in this work.

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