



Achievements of the K1 & K4 Program with Standard Practices of Pregnancy Services during the Covid-19 Pandemic

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ABSTRACT

WHO has designated the Covid-19 (Corona Virus 2019) case as a Pandemic. Covid-19, caused by the coronavirus (SARS-CoV-2), is a new type of respiratory disease (pneumonia) and is contagious. The state has made various efforts to control covid-19, but there are still many infected victims. Pregnant women have changes in their immune system and anatomy, making them susceptible to viral infections. Pregnancy examinations at the hospital will be at risk of transmitting covid-19 to pregnant women, while antenatal care is very important to identify any pregnancy complications. This study aims to identify the K1 and k4 programs' achievements with midwives' practice in standard pregnancy services during the Covid 19 Pandemic, using a questionnaire given to midwives as health service workers. The study design used a cross-sectional with a chi-square statistical test, with 30 midwives as respondents who opened independent practice services during the Covid-19 pandemic. The research instrument used a questionnaire. This study indicates that 70% of midwives have good knowledge but do not implement standard pregnancy care during the pandemic. The analysis results show no relationship between knowledge and standard practice of pregnancy services during the Covid-19 pandemic. Conclusion: Most midwives have good knowledge and do not practice standard pregnancy services during the Covid-19 pandemic. Suggestion. The following research is to identify the achievements of the pregnancy care program during the Covid-19 pandemic.

Keywords: program achievements, practice, service, pregnancy, Covid-19

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INTRODUCTION

The Covid-19 pandemic is a situation that threatens the health of mothers and babies. Antenatal, intrapartum, and postnatal care significantly affect health conditions. Providing antenatal care is very important because it involves the health of the mother during her pregnancy. Provision of health services as an effort to prevent and manage pregnancy complications is needed. The World Health Organization has recommended contact with patients for antenatal care (WHO, 2016).

The incidence of covid 19 in pregnant women is still limited, there are cases of 18 pregnant women with covid-19, who have been infected in the third trimester, and with these conditions, it is stated that there have been cases of fetal distress and premature birth (Breslin et al., 2020). Babies whose birth weight is appropriate for gestational age are born prematurely with respiratory distress syndrome requiring surfactants, and one of them has bronchopulmonary dysplasia (Dashraath et al., 2020).

In the COVID-19 pandemic situation, access to all routine services, including maternal and neonatal health services, has been restricted, such as pregnant women being reluctant to go to Puskesmas or other health service facilities for fear of contracting them. Likewise, many independent health services limit direct contact with patients because several things have happened, such as the lack of PPE, so that medical personnel, especially midwives, are also afraid of being infected because of patient visits so that this affects the target achievement of the program in antenatal care, neonatal visits, and others.

This study intends to determine the achievements of the K1 and K4 programs on the standard practice of pregnancy care during the Covid 19 pandemic

METHOD

This research is quantitative research with a survey method. The design used is cross-sectional. It was using primary data, with instruments in the form of a standard pregnancy service questionnaire during the Covid-19 pandemic given to respondents. The sample in this study were midwives who had PMB (Independent Practice Midwives) and were active / served patients during the Covid-19 pandemic and were willing to become respondents, with a total sample of 30 respondents.

The instrument used for data collection has been tested for validity with Pearson Product Moment and Reliability with Consistency Chronbach's Alpha. The validity test value is 0.62, and the reliability test value is 0.68 so that this questionnaire is valid and reliable. The data analysis used was the exact fisher test with a significance level of $P < 0.05$ because the chi-square test did not meet the requirements.

RESULTS

Data collection was carried out from December 1, 2020, to December 7, 2020. The following are the results of the research obtained.

Table 1. Univariable analysis of practices and achievements of the K1 and K4 programs for pregnancy services during the Covid-19 pandemic

	Total	Percentage
Service practices		
Does not implement the protocol	19	63,3
Implement Protocol	11	36,7
Achievements of the pregnancy care program		
K1		
Not achieved	20	70
Achieved	10	30
K4		
Not achieved	22	73,3
Achieved	8	26,7

From table 1, it is known that the majority of midwives did not implement the pregnancy service protocol during the Covid-19 pandemic, indicating that most of the achievements of the K1 and K4 programs were not achieved.

Table 2. Bivariable analysis of the standard practice of pregnancy services during the Covid-19 pandemic with the achievement of K1

Service Practices	Achievement K1		Total
	Achieved	Not Achieved	
Does not implement the protocol	6 (31,5%)	13 (68,5%)	19 (100%)
Implement Protocol	4 (36,3%)	7 (63,6%)	11 (100)
Total	10 (30%)	20 (70%)	30 (100%)

Chi square test $P = 0,007$

Table 2 shows that most of the achievements of the K1 program were not achieved, and most of them did not carry out standard pregnancy service practices according to the protocol during the Covid 19 pandemic. during the covid 19 pandemics with the achievement of K1

Table 3. Bivariable analysis of standard pregnancy services during the Covid-19 pandemic with the achievement of K4.

Service Practices	Achievement K4		Total
	Achieved	Not Achieved	
Does not implement the protocol	4 (21,1%)	15 (78,9%)	19 (100%)
Implement Protocol	4 (36,3%)	7 (63,7%)	11 (100)
Total	8 (26,7%)	22 (73,3%)	30 (100%)

Chi square test P = 0,001

Based on table 3, shows that most of the achievements of the K4 program were not achieved. Most of them did not carry out standard pregnancy service practices according to the protocol during the Covid 19 pandemic. during the covid 19 pandemics with K4 achievements.

DISCUSSION

During the Covid-19 pandemic, the Indonesian health ministry tried to continue to provide health services, especially in pregnancy services by midwives, by publishing a standard midwifery service in the era of the Covid-19 pandemic in 2020, with the hope that the practice of pregnancy services can still be appropriately provided during the Covid-19 pandemic.

The study results stated that most midwives did not carry out the standard practice of pregnancy services according to health protocols during the pandemic and the introduction of pregnancy services during the Covid-19 pandemic. Most midwives did not reach the target both at K1 and K4. Several reasons arise from medical personnel, especially midwives in providing health services during the pandemic, such as restrictions on movement and contact with patients, fear of infection, and the lack of medical equipment such as PPE as an effort to protect themselves, so that for these reasons, they do not apply standard pregnancy services in the future. The covid-19 pandemic. As we know that Covid-19 is an acute infectious respiratory disease, transmission occurs through direct contact with an infected person, with a long incubation period. Research shows that the average incubation period for SARS-Cov-2 is 3-24 days, through a patient who is declared covid-19 (Guan et al., 2020). This can occur because nosocomial infections can spread the infection between medical staff and patients (Van et al., 2020).

Providing pregnancy services is very important and can be done in various ways, including providing information by midwives through interactive media forms as education to pregnant women, such as providing information about special precautions needed to prevent nosocomial infections patients healthy. (Wang et al., 2020b, Cabrini et al.,2020). Pregnancy-related information is also very

important in order to detect early pregnancy abnormalities or complications. Therefore, midwives must strictly control every aspect of pregnancy services and carry out health promotion to prevent the transmission of infections, especially the covid-19 virus. Pregnant women are very susceptible to transmission of viral infections. The inflammatory reaction caused will make the disease progress rapidly after exposure. (Paquette et al.,2015 & Chen SH, 2020).

One of the efforts that midwives can make in providing services during the Covid-19 pandemic is forming an online class for pregnant women that can be applied to the WhatsApp group media (WA) to provide information about pregnancy, childbirth, postpartum, and babies. Newborns will make it easier for mothers to get information and share according to what they are experiencing, related to complaints experienced, including pregnant patients infected. Any changes in the fetal heart rate must be monitored and emergency measures are taken as necessary to maintain the health of the mother and baby; and in addition to health services, psychological care is also important during this pandemic (Wang et al., 2020a).

According to psychological research reports and attitudes towards new coronavirus pneumonia, cases among 3165 respondents in the general population showed that 98.54% of respondents expressed high fear, and 94.45% were concerned about themselves or their family members being infected (Qi Yi, 2020.02.11). Research has shown that more than half of respondents who experienced mental health problems in previous public health emergencies are in dire need of psychological intervention (Fang et al., 2020, Abdelaziz et al., 2020, Chan dan Huak, 2004).

Health workers, especially midwives, must be aware of pregnant women's potential psychological problems during the Covid-19 pandemic. Providing psychological counseling must still be provided, while midwifery management in pregnancy services with Covid-19 depends on the individual situation and the specific needs of each patient. Midwives should provide practical steps, such as preventing and reducing complications related to nosocomial care and infection, ensuring adequate care for infected pregnant patients, and ensuring the safety of mothers and babies, as well as the medical staff.

CONCLUSION

Most of the midwives did not practice prenatal care following the standard of pregnancy services with health protocols during the Covid-19 pandemic, so that the achievement of K1 and K4 coverage was essentially not achieved

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