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## Relationship of Pregnant Mother Satisfaction in Antenatal Care Services with Motivation to do Antenatal Care

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### ABSTRACT

Until now, the quality of health services carried out by government-owned health facilities has not or has not met the expectations of patients and the public. This study aims to determine the relationship between satisfaction of pregnant women in antenatal care with the motivation to do pregnancy checks. This analytical research was carried out with a cross sectional design. The population in this study were 58 pregnant women who performed antenatal care at the Gayaman Village Health Center, Mojokerto Regency and the sample size obtained was 30 pregnant women. Sampling using non-probability sampling technique, namely accidental sampling. Data were collected using a questionnaire for primary data and secondary data obtained from pregnant women's KMS. Techniques used in data analysis is Spearman Rank correlation. The study was conducted in Puskesmas Gayaman Kabupaten Mojokerto village on June 15 to June 29, 2022. The results of this study showed that pregnant women who feel very satisfied that as many as 23 respondents (76.7%), and pregnant women who have good motives as much as 26 respondents (86.7%). From the analysis of the data by Spearman Rank test, the result shows that the calculated  $\rho$   $\rho$  table 0.5468 and 0.364, the price can be seen that  $\rho$  greater than  $\rho$  count table that means there is a correlation between the satisfaction of pregnant women at antenatal care with the motivation to do antenatal care. Satisfaction of pregnant women in antenatal care of pregnant women affect the motivation to perform antenatal care. A good midwife services, facilities, friendly attitude of midwives, midwives skills in responding quickly to face the problems of patients so that respondents are motivated to come back. The motivation is called extrinsic motivation, namely the stimulation comes from outside or other people. Conclusions from this study are doing antenatal care satisfaction related to the motivation of doing antenatal care. Suggestions for health services in accordance with the result expected service quality can be maintained and further enhanced.

Keywords: Satisfaction, Antenatal Care, Motivation

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## INTRODUCTION

The high maternal mortality rate in Indonesia is partly due to the fact that services for antenatal care and delivery assistance by professionals have not been fully utilized by the community, thus causing many mothers to not have their pregnancy checked and many mothers do not receive prenatal care in accordance with the standards of maternal and child health programs <sup>1</sup>.

Bleeding, eclampsia and infection are direct causes of maternal death. The risk of maternal death is greater if the mother suffers from a disease that accompanies the mother during pregnancy such as tuberculosis, HIV/AIDS, anemia and malaria. Data from the Ministry of Health states that the prevalence of anemia in pregnant women is still very high, reaching 50%. The factors above are direct causes of maternal death, but these causes of death can be minimized with antenatal care. Antenatal care can periodically monitor the condition of the mother's pregnancy and can predict the risks that may arise so that preventive measures can be taken. Health monitoring during pregnancy, both normal and emergency, as well as delivery assistance by trained health personnel, plays an important role in reducing maternal mortality <sup>2</sup>.

Antenatal care is planned health services in the form of observation, education and medical treatment for pregnant women provided by professional health workers (health workers) with a frequency of visits of at least four times according to ANC service standards set out in midwifery service standards. Thus, the quality of ANC services has a significant role in preventing maternal and child deaths <sup>3</sup>. Antenatal care has the aim of monitoring developments during pregnancy, ensuring the health of the mother and the growth of the baby, improving and maintaining the physical, mental and social well-being of the mother and baby, identifying abnormalities or complications early that may occur. Prepare for full-term delivery, give birth safely to mother and baby. Prepare the mother so that the postpartum period runs normally. and preparing the role of mothers in the family in accepting the presence of babies so that they can grow and develop optimally <sup>4</sup>.

A preliminary study in April 2022 at the Gayaman Health Center contained 30 pregnant women. The researchers found that only 19 (63.3%) people were pregnant and 11 (36.7%) were not pregnant. Further studies were conducted by interview, from 11 pregnant women who did not check 8 (72.7%) of them said they were not satisfied with the services provided by midwives, because midwives were less cooperative in providing services, and in providing counseling it was not clear.

If a pregnant woman does not perform a prenatal care, it can result in the following: not being detected early any complications during pregnancy, the mother not knowing the condition of her growth and development the development of the baby, the mother does not know the interpretation of her pregnancy, causing the death of the mother and baby (Saifuddin, 2000). Every pregnant woman must check herself regularly and receive optimal midwifery services supported by a good attitude from the midwife. The good attitude of midwives while providing midwifery services to every

pregnant woman is a real strategy in an effort to increase the motivation of pregnant women for the importance of regular pregnancy check-ups. The level of satisfaction of mothers to do antenatal care is influenced by the quality of care received. The level of mother's satisfaction in this case influences the mother's motivation to do antenatal care. If the mother has a level of satisfaction with the services provided, it is likely that she will return to the same midwife to carry out antenatal care <sup>5</sup>.

### METHOD

This research is an analytic research with cross sectional approach. The population is all pregnant women who carry out pregnancy checks at the Gayaman Health Center in Mojoanyar Regency with a total of 58 mothers. After calculating the sample size, the number of samples in this study was 30 pregnant women. The sampling technique uses a non-probability sampling technique with the Accidental Sampling type. Data collection using a questionnaire and secondary data obtained from the Card of Healthy Pregnant Women. The data were processed manually to determine the satisfaction of pregnant women in antenatal care services with the motivation to do antenatal care and then analyzed using a statistical processing program. After processing, editing, coding, and entry is carried out. Data analysis in this study is univariate analysis which aims to describe or get an overview of each variable to be measured and presented. Bivariate analysis was performed on two variables that were suspected to be correlated using the Spearman Rank Test.

### RESULTS

#### 1. General Data

Table 1. Frequency distribution by age of respondents

Age	Frequency (n)	Percentage (%)
< 20 Years	4	12
20-35 Years	21	63
>35 Years	5	15
Amount	30	100

Based on table 1, the age of the respondents it is known that the largest percentage is aged 20-35 years as many as 21 people (63%).

Table 2. Frequency distribution based on respondents

Work	Frequency (n)	Percentage (%)
Work	18	60
Not Working	12	40
Amount	30	100

Based on table 2, respondents' occupations, it is known that the largest percentage is working as many as 18 people (60%).

Table 3. Frequency distribution based on the Gravida of respondents

Gravid	Frequency (n)	Percentage (%)
Primigravida	6	20
Multigravida	14	46,7
Grandemulti	10	33,3
Amount	30	100

Based on table 3, of respondents' gravity, it is known that the largest percentage is multigravida as many as 14 people (46.7%).

**2. Special Data**

Table 4. Frequency distribution of pregnant women's satisfaction with services antenatal care

Satisfaction	Frequency (n)	Percentage (%)
Very Satisfied	23	76,7
Satisfied	7	23,3
Not Satisfied	0	0
Very Dissatisfied	0	0
Amount	30	100

Based on table 4, Satisfaction of pregnant women in antenatal care services, it is known that the largest percentage is very satisfied with 23 people (76.7%).

Table 5. Distribution of the frequency of motivation of pregnant women to do antenatal care

Motivation	Frequency (n)	Percentage (%)
Fine	26	86,7
Enough	4	13,3
Less	0	0
Amount	30	100

Based on table 5, the motivation of pregnant women to do antenatal care is known that the largest percentage is Fine Motivation as many as 26 people (86.7%).

Table 6. Cross tabulation between pregnant women's satisfaction with antenatal care services and motivation to do antenatal care.

Satisfaction	Motivation						Amount	
	Fine		Enough		Less		F	%
	F	%	F	%	F	%		
Very Satisfied	20	66,7	3	10	0	0	23	76,7
Satisfied	6	20	1	3,3	0	0	7	23,3
Not Satisfied	0	0	0	0	0	0	0	0
Very Dissatisfied	0	0	0	0	0	0	0	0
Amount	26	86,7	4	13,3	0	0	30	100

**DISCUSSION**

**Satisfaction of pregnant women with antenatal care services**

Based on table 4.4, from the calculation of all respondents' answers, it is known that of the 30 respondents, there are 23 respondents (76.7%) who are very satisfied with the antenatal care service, and 7 respondents (23.3%) are satisfied.

According to Supranto (2001), when compared to their expectation, a person's level of satisfaction is measured by comparing the perceived performance or results. The Factors affecting

satisfaction are: product or service quality, service quality, emotional factors, price, cost<sup>6</sup>. As consumers compare their expectations and reality, there are three types of satisfaction that they can feel; if the expectations or needs are in accordance with the services provided, this situation will make the patient feel satisfied but the services provided to the patient cannot meet the needs or expectations of the patient then the patient will feel dissatisfied with the services provided, if the services provided exceed the expectations or expectations of consumers then consumers will be satisfied<sup>7</sup>.

The results of the research in the field showed that the respondents stated that they were very satisfied. Satisfaction is influenced by the quality of health services. The quality of midwifery services such as being friendly to patients, ANC examination, counseling and giving vitamins. The existing facilities also motivate pregnant women to visit, namely security and convenience such as the provision of closed waiting rooms and examination rooms for pregnant women so that the privacy of pregnant women is better maintained, pregnant women can freely express their complaints without fear of being disturbed by other people. In providing counseling, midwives are very cooperative and can provide appropriate advice according to complaints. In speaking, the midwife also uses good language and can be understood by others. Midwives must be responsive in dealing with midwifery problems, patients will feel satisfied because they feel cared for by midwives. So that midwives do not need to promote themselves, because from one patient who is satisfied he will tell others and by itself the number of midwife patients will increase.

#### **Motivation of pregnant women in conducting antenatal care visits**

Based on table 4.5 the results of this study from 30 respondents as many as 26 respondents (86.7%) had good motivation and 4 respondents (13.3%) had sufficient motivation.

Basically, humans have unique characteristics so that it doesn't have to be the same to motivate one another. This situation causes differences in the level of motivation between one person and another. Motivation is divided into two, namely intrinsic motivation, motivation that comes from the man himself. The second is extrinsic motivation, namely motivation that comes from outside such as the influence of other people or environmental factors<sup>8</sup>. According to Abraham Maslow, in general, motivation is based on five hierarchical human needs, namely physiological needs, security or protection needs, togetherness needs, respect and appreciation needs, and early actualization needs.

Based on the results of the study, the respondents had good motivation, namely motivation from within, such as the mother wanting to know the condition of the fetus, so that the mother and fetus were healthy until the time of delivery. Mothers are diligent in getting their pregnancy checked, even without being reminded by the midwife or husband, and the mother realizes that pregnancy check-ups are very important for pregnancy. External motivation is support from husband and satisfying pregnancy services.

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### **The relationship between satisfaction of pregnant women with antenatal care services and motivation of pregnant women to do antenatal care at the Gayaman Health Center, Mojokerto Regency**

Based on the results of the data analysis presented in table 4.6 and the results of calculating data analysis using the Spearman rank, it is obtained that count is 0.5468 and then compared with Spearman Rho's critical price table with a total sample (N) of 30 respondents and a 95% confidence interval. Then the value of table is obtained 0.364 so that the obtained count is greater than the table. So the conclusion is that there is a relationship between the satisfaction of pregnant women in antenatal care services with the motivation to do antenatal care. Overall the results of this study are in accordance with Parasuraman in Hamidiyah (2013) and in accordance with the results of research by Syamsudin and Hartiningsih (2012), Mursyida, et al (2012), Rahayu, et al (2015) that quality is related to patient satisfaction, where if the patient is satisfied then will make a repeat visit <sup>9</sup>.

According to Indarjati, As consumers compare expectation and reality, there are three types of satisfaction that can be experienced by them; if the expectation or need is identical to services provided, they will feel satisfied, if the goods and services provided to consumers do not satisfy consumer needs or expectations, they will be unsatisfactory. Consumers will be very happy when the service provided exceed expectations or needs of consumers <sup>10</sup>. Meeting customer expectations for satisfactory quality of care is one of the greatest challenges in the delivery of health services. Therefore service providers must provide accurate information about the services provided to their patients. Many experts argue that the law of quality first is to do it right so that customer satisfaction is achieved<sup>11</sup>

Based on the results of the study that satisfaction affects motivation. So that satisfaction has an important role in health services. Good midwife services, existing facilities, friendly attitude of midwives, skills of midwives in responding quickly to patient problems, appearance of midwives, when providing counseling midwives use good language and easy to understand by patients so that respondents are motivated to visit again. The motivation of pregnant women is not only external, there is also motivation from within the mother, such as the mother checking her pregnancy because she wants the baby to be healthy, the mother doing a pregnancy check of her own volition, not coercion from others because pregnant women think that being a mother is a matter of pride. for a woman so that the mother will give the best for the baby she is carrying.

### **CONCLUSIONS**

There is a relationship between the satisfaction of pregnant women in antenatal care services and motivation to do antenatal care. At the Gayaman Health Center, Mojoanyar District. Health workers can increase education about health problems of danger signs in pregnancy. Health

workers maintain or improve the quality of existing services.

## REFERENCES

1. Aminah S. Pengaruh supervisi bidan koordinator terhadap standar mutu pelayanan antenatal care dengan motivasi kerja sebagai variabel intervening pada bidan di wilayah Puskesmas Pagiyanten Kabupaten Tegal. *Magisma J Ilm Ekon dan Bisnis*. 2018;6(1):58-66.
2. Rahayu YP. Gambaran Tingkat Kepuasan Ibu Hamil Tentang Mutu Pelayanan ANC Di Puskesmas Jambu Burung Kabupaten Banjar. *Din Kesehat J KEBIDANAN DAN KEPERAWATAN*. 2013;4(1):1-13.
3. Adam M, Wati YR, Budiman. Hubungan Karakteristik Antenatal Care (ANC) dengan Kematian Ibu. *Proceeding Pendidik Dr UNISBA*. Published online 2015.
4. Saifudin AB. Buku Panduan Praktis Pelayanan Kesehatan Material Neonantal. Published online 2002.
5. Aisyah S. Hubungan Tingkat Kepuasan Ibu Dengan Frekuensi Antenatal Care (ANC). *J Heal Sci*. 2021;1(2):101-109.
6. Setiawan H, Minarsih MM, Fathoni A. Pengaruh kualitas produk, kualitas pelayanan dan kepercayaan terhadap kepuasan nasabah dan loyalitas nasabah dengan kepuasan sebagai variabel intervening (Studi kasus pada nasabah Koperasi Rejo Agung Sukses Cabang Ngaliyan). *J Manage*. 2016;2(2).
7. Indarjati A. Kepuasan Konsumen. Published online 2001.
8. Anik S. pengaruh pendidikan dalam keluarga dan motivasi intrinsik terhadap kecerdasan spiritual siswa kelas keagamaan MAN 2 Ponorogo tahun ajaran 2017/2018. Published online 2018.
9. Hamidiyah A, Hidayati N, Kebidanan PD, Kesehatan FI, Ibrahimy U, Dan K. Quality Of Antenatal Care With Pregnant Satisfaction. 2018;V(2 (penting)):125-119.
10. Handajani DO, Furi FE. Pengaruh Kualitas Pelayanan Kesehatan Terhadap Kepuasan Pasien Rawat Jalan Rumah Sakit Ibu Dan Anak Kirana Sepanjang Sidoarjo. *Bhakti Husada Mulia J Kesehat*. 2019;6(2).
11. FZ FL, Wulansar HC. Hubungan Kepuasan Ibu Hamil Dengan Kunjungan Antenatal Care. *J Asuhan Ibu dan Anak*. 2022;7(2):77-78.