

Factors Influencing Antenatal Care Examinations for Pregnant Women in The Working Area of The Puskesmas

Sarah Yosephine Pardede¹, Sarma Lumban Raja², Jitasari Tarigan Sibero³ Razia Begum Suroyo⁴, Aida Fitria⁵

^{1,2,3}Public Health Science Master's Study Program FKM Helvetia Health Institute

*Correspondence author: sarahpardede22@gmail.com

INFO

Submitted: 12-05-2023,

Revised: 28-05-2023,

Accepted: 20-06-2023

ABSTRACT

Antenatal care examinations based on integrated antenatal care services are 6 visits during pregnancy. Early detection in pregnancy determines the presence of anemia in pregnancy which can cause bleeding during delivery, signs of complications from early delivery such as pelvic deformities, multiple pregnancies and complications during pregnancy such as pre-eclampsia, chronic diseases such as heart and lung disease and genetic diseases such as diabetes, hypertension, or congenital defects and also infectious diseases such as HIV and hepatitis. This study used a cross-sectional approach in a mixed method design. 288 pregnant women and 74 pregnant women from the Patumbak Health Center's operating region in Deli Serdang Regency made up the study's population. Multiple logistic regression is utilized in univariate, bivariate, and multivariate analysis. The study's findings show that a number of factors, including knowledge ($p=0.042$), attitude ($p=0.017$), occupation ($p=0.725$), age ($p=0.0257$), parity ($p=0.196$), source of information ($p=0.278$), support from the husband ($p=0.031$), and service accessibility ($p=0.001$), affect maternal antenatal care examinations. This study concludes that prenatal care assessments are influenced by mom knowledge, attitudes, husband support, and service accessibility. Meanwhile, occupation, age, parity and source of information had no influence on antenatal care examinations.

Keywords: *Antenatal Care Services, Knowledge, Husband's Support, and Service Accessibility.*

INTRODUCTION

Pregnancy is a normal and natural process. The pregnancy process starts from the fertilization of the egg until the birth of the fetus. The duration of pregnancy during labor is around 37 weeks to 40 weeks. It is generally accepted that pregnancy can carry risks for the mother, during pregnancy it is possible for pregnant women to experience several changes and complaints in the body. Common complaints will usually go away on their own, but there are certain conditions that pregnant women should be aware of as danger signs during pregnancy that pregnant women should be aware of (1).

Antenatal care examinations based on integrated antenatal services are six visits during pregnancy (2). Antenatal Care is care for the mother and fetus during pregnancy which aims to improve and maintain the health of the mother and baby, prepare for the birthing process so that the baby can be delivered safely and reduce the number of deaths and morbidity in pregnant women. Pregnant women who undergo antenatal care checks can more quickly identify signs and dangers during pregnancy. At each antenatal care visit, health workers need to teach pregnant women to recognize danger signs during pregnancy and childbirth (3).

According to the World Health Organization, the maternal mortality rate is 303,000. Causes of maternal death during pregnancy, childbirth or within 42 days after delivery (4). Indonesia's Health Profile in 2021 shows data on the maternal mortality rate at 7,389 maternal deaths from various causes including 2,982 deaths due to Covid-19, 1,320 deaths due to bleeding, 335 maternal deaths due to heart disease, 207 maternal deaths due to infection, 80 deaths due to disorders. metabolically, as many as 65 people were due to circulatory system disorders, 14 of them were due to abortion, and 1,309 were due to other reasons (5).

According to the Ministry of Health of the Republic of Indonesia, the Maternal Mortality Rate (MMR) in Indonesia is still high, with the number of maternal deaths at 305 per 100,000 population. The Sustainable Development Goals (SDGs) agenda has a global target by 2030, namely reducing the risk of maternal mortality to less than 70/100,000 (live births) (6).

Coverage of health services for K4 pregnant women in Indonesia tends to increase, in 2013 it was 70%, in 2018 it was 74.1%, in 2020 it was 79.36% and in 2021 it was 88.13%. Health services for K4 pregnant women in 2020 experienced a decline due to the Covid-19 pandemic but have increased in 2021, but in 2021 there are 17 provinces that have not reached the target.

The number of maternal deaths reported in North Sumatra Province in 2019 was 202 people with a distribution of 53 maternal deaths, 87 maternal deaths and 62 postpartum maternal deaths. The highest number of maternal deaths was in Asahan district with 15 people, Deli Serdang district with 13 people and Batu Bara and Langkat districts with 13 people (7).

The role of a pregnant mother in the antenatal care examination program is very important. Therefore, an understanding of this program is very necessary for these groups. Maternal understanding or knowledge of antenatal care is greatly influenced by the mother's level of education (8).

In their 2020 study, "Factors that influence antenatal care visits on antenatal care behavior," Puji Atuti Wiratmo et al. found that age had a correlation value of $p = 0.000$, education had a correlation value of $p = 0.000$, occupation had a p value of 0.002, income had a correlation value of $p = 0.407$, knowledge had a correlation value of $p = 0.000$, husband's support had a correlation value of 0.000, and attitude had a correlation value of $r = 0.597$. Pregnant women may have adverse effects from irregular ANC because it may be unable to determine the risk factors for the mother and fetus and because illnesses that affect pregnant women cannot be identified in their early stages (Wiratmo et al., 2020).

Based on data for the last 3 months obtained from PWS KIA at the Patumbak Community Health Center, it shows that there is a decrease in Antenatal Care (K6) and researchers conducted an initial survey on 12 June 2023 of 10 pregnant women stating that they did not carry out pregnancy visits because of the mother's lack of knowledge about the importance of examinations. pregnancy on the health of the mother and the baby she is carrying. The lack of facilities and infrastructure, such as limited pregnancy testing tools and laboratories at the center as well as the affordability of health facilities, also causes a lack of ANC in the working area of the Patumbak Community Health Center, Deli Serdang Regency. The working area of the Patumbak Health Center consists of 8 villages, with only 4 pustu units, 3 polindes and 1 village health post. This proves the lack of health service facilities in the working area of the Patumbak Community Health Center which are used to provide services to pregnant women.

Based on the background description explained above, researchers are interested in conducting research on the factors that influence antenatal care examinations for pregnant women in the working area of the Patumbak health center, Deli Serdang Regency in 2023.

METHODS

A mixed research design, or mixed technique, is employed in this study. A mixed method research strategy associates or mixes both quantitative and qualitative techniques of data collection. The comparative analytical method with a cross-sectional approach is the quantitative research specification used in this study. It is a study to investigate the dynamics of the correlation between risk factors and effects by approaching, observing, or gathering data all at once (point time approach). This mixed research is research with the assumption that collecting various types of data is considered best and can provide a comprehensive understanding of the problem being studied. This mixed method strategy is an explanatory and sequential strategy. This strategy was applied in the first stage using quantitative methods with data collection and in the second stage using qualitative with data analysis starting based on quantitative results (10).

A quantitative approach was carried out using questionnaires to respondents with the aim of analyzing behavior that influences ANC examinations for pregnant women. A qualitative approach was carried out with interviews aimed at exploring more deeply how behavior influences ANC examinations in pregnant women. This study aims to determine the factors associated with pregnant women's compliance with ANC examinations at the Patumbak Health Center, Deli Serdang Regency in 2023.

Research Population

Population is a group of people or the entire object to be studied. The population in this study were all pregnant women who had carried out K6 in the working area of the Patumbak Health Center, Deli Serdang Regency, namely 288 pregnant women.

Research Sample

Samples for Quantitative Approaches

The sample from this research is part of the population to be studied or part of the number of characteristics possessed by the researcher. This research sample is non-probability sampling with an accidental sampling technique, namely a technique for determining samples based on chance. So, this research technique applies to anyone who coincidentally meets researchers in the Patumbak Health Center area, Deli Serdang Regency.

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{288}{1 + 288(10\%)^2}$$

$$n = \frac{288}{1 + 288(0.01)}$$

$$n = \frac{288}{1 + 2,88}$$

$$n = \frac{288}{3,88} \quad n = 74$$

So in this study the sample size (n) was 74 pregnant women respondents.

Information :

n = sample size

N = population size

E = error rate (10%)

Method of collecting data

Data Type

The data collected consists of primary, secondary and tertiary data, namely:

Primary data is obtained directly from respondents (research objects) such as interviews, observations and questionnaires.

Secondary data was obtained from data from the Health Service, Community Health Center and medical records.

Tertiary data is obtained from valid references such as books, magazines and journals related to this research.

Data collection technique

Quantitative Data Collection Techniques

The collection technique in research begins by collecting data from the field which relies on instruments that have been prepared by researchers in the form of questionnaires.

Qualitative Data Collection Techniques

The data collection method was carried out by in-depth interviews with informants representing patients using interview guidelines. The interview activities were recorded using a recording device.

Data Processing Methods

The data processing method in this research is computerized. The collected data is processed by computerization with the following steps:

Collecting

Collect data from questionnaires, questionnaires and observations.

Checking

This is done by checking the completeness of the answers to the questionnaire or observation sheet with the aim that the data is processed correctly so that data processing provides valid and reliable results, and avoids bias.

Coding

code the variables studied.

Entering

Data entry, namely the answers from each respondent which are still in the form of "codes" (numbers or letters) are entered into a computer program, namely the SPSS program.

Data Processing

All data that has been input into the computer application will be processed according to the needs of the research.

Data analysis

The data analysis that will be processed in the research is univariate, bivariate and multivariate analysis

This work is licensed under a

[Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).

Jurnal Perilaku Kesehatan Terpadu Vol 2 No 1 2023

Quantitative Data Analysis

Univariate Analysis

The goal of univariate analysis is to characterize and elucidate each study variable. The kind of data determines the format of the univariate analysis.

Bivariate Analysis

Two variables—the independent variable and the dependent variable—that were assumed to be connected were subjected to bivariate analysis. The chi-square test, with a statistical significance limit of p value (0.05), is a statistical test analysis used to demonstrate a significant link between the independent and dependent variables. It is claimed that (Ho) is rejected and (Ha) is accepted if the computation results indicate a p value < p value (0.05), indicating that there is a statistically significant association between the two variables.

Multivariate Analysis

Multivariate analysis aims to see two variables that influence each other, testing the independent variable which is very influential on the dependent variable. Testing Hypothesis testing used the Multiple Logistic Regression Test to see the relative risk using the odds ratio (OR) and confidence interval (CI 95%).

RESULTS & DISCUSSION

Respondent Characteristics

The following may be observed in the frequency distribution table, which is based on information gathered from study findings with 74 respondents:

Table 4.1 The frequency distribution of respondent characteristics in the Patumbak Health Center's working area in the Deli Serdang Regency in 2023 is shown.

Respondent Characteristics	f	%
Respondent Age		
a. 20-35 years	58	78,3
b. <20 - >35 Years	16	21,7
Total	74	100

Based on table 4.1. above, it was found that of the 74 respondents based on the age characteristics of pregnant women in the work area of the Patumbak Deli Serdang Community Health Center, the majority aged 20 - 35 years were 58 people (77.3%), and the minority aged <20 years - > 35 years were 16 people (21, 3%).

Univariate Analysis

Univariate analysis in this research is all information data obtained from filling out questionnaires by respondents consisting of knowledge, attitudes, work, parity, sources of information, husband's support, service accessibility and ANC. The results of this research are presented in a frequency distribution table which can be seen in the following table.

Respondents' Knowledge Factors in the Working Area of the Patumbak Health Center, Deli Serdang Regency.

Table 4.2. Frequency Distribution of Respondents' Knowledge in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

No	Knowledge	Frequency (f)	%
1	Good	35	47,2
2	Less Good	39	52,8
Total		74	100

Based on table 4.2. above, it was found that of the 74 respondents based on the knowledge of pregnant women in the working area of the Patumbak Deli Serdang Community Health Center, the majority had poor knowledge, 39 people (52.8%), and the minority had good knowledge, 35 people (47.2%).

Respondents' Attitude Factors in the Patumbak Health Center Working Area, Deli Serdang Regency.

Table 4.3. Frequency Distribution of Respondents' Attitudes in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

No	Attitude	Frequency (f)	%
1	Positive	47	63,5
2	Negative	27	36,5
Total		74	100

Based on table 4.3. above, it was found that of the 74 respondents based on the attitudes of pregnant women in the working area of the Patumbak Deli Serdang Community Health Center, the majority had corrected attitudes, 47 people (63.5%), and the minority had negative attitudes, 27 people (36.5%).

Respondents' Occupations in the Patumbak Health Center Working Area, Deli Serdang Regency.

Table 4.4. Frequency Distribution of Respondents' Work in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

No	Work	Frequency (f)	%
1	Working	12	16,2
2	Not Working	62	83,8
Total		74	100

Based on table 4.4. above, it was found that of the 74 respondents based on the work of pregnant women in the working area of the Patumbak Deli Serdang Community Health Center, the majority of pregnant women did not work, 62 people (83.8%), and the minority of pregnant women worked, 12 people (16.2%).

Respondent Parity Factors in the Working Area of the Patumbak Health Center, Deli Serdang Regency.

Table 4.5. Parity Frequency Distribution of Respondents in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

No	Parity	Frequency (f)	%
1	Primigravida	44	58,7
2	Multigravida	30	41,3
Total		74	100

Based on table 4.5. above, it was found that of the 74 respondents based on the parity of pregnant women in the working area of the Patumbak Deli Serdang Community Health Center, the majority were primigravida mothers, 44 people (58.7%), and the minority were multigravida pregnant women, 30 people (41.3%).

Factors of Respondents' Information Sources in the Working Area of the Patumbak Health Center, Deli Serdang Regency.

Table 4.6. Frequency Distribution of Respondents' Information Sources in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

No	Resource Information	Frekuensi (f)	%
1	Get information	48	64,9
2	Not Getting Information	26	35,1
Total		74	100

Based on table 4.6. above, it was found that of the 74 respondents based on sources of information about pregnancy in the working area of the Patumbak Deli Serdang Community Health Center, the majority of mothers received information as many as 48 people (64.9%), and the minority of pregnant women did not receive information as many as 26 people (35.1%).

Support Factors of Respondents' Husbands in the Patumbak Health Center Working Area, Deli Serdang Regency.

Table 4.7. Frequency Distribution of Support from Respondents' Husbands in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

No	Husband Support	Frequency (f)	%
1	Supported	33	44,6
2	Not Supported	41	55,4
Total		74	100

Based on table 4.7. above, it was found that of the 74 respondents based on husband's support in the working area of the Patumbak Deli Serdang Community Health Center, the majority did not support pregnant women, 41 people (55.4%), and the minority supported pregnant women, 33 people (44.6%).

Respondent Service Accessibility Factors in the Patumbak Health Center Working Area, Deli Serdang Regency.

Table 4.8. Frequency Distribution of Respondent Service Accessibility in the Working Area of Patumbak Health Center, Deli Serdang Regency in 2023.

No	Service Accessibility	Frequency (f)	%
1	Easy	31	41,9
2	Hard	43	58,1
Total		74	100

Based on table 4.8. above, it was found that of the 74 respondents based on service accessibility in the working area of the Patumbak Deli Serdang Community Health Center, the majority had difficulty, 43 people (41.9%), and the minority had it easy, 31 people (41.9%).

Antenatal Care Factors for Respondent Services in the Working Area of the Patumbak Health Center, Deli Serdang Regency.

Table 4.9. Frequency Distribution of Antenatal Care Respondents in the Working Area of Patumbak Health Center, Deli Serdang Regency in 2023.

No	Antenatal Care	Frequency (f)	%
1	Completed	28	37,8
2	Not Completed	46	62,2
Total		74	100

Based on table 4.9. above, it was found that of the 74 respondents based on antenatal care in the working area of the Patumbak Deli Serdang Community Health Center, the majority were incomplete, 46 people (62.2%), and the minority were complete, 28 people (37.8%).

Bivariate Analysis

Pregnant Women's Knowledge Factors Regarding Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Table 4.10. Cross Tabulation of Knowledge Factors on Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Health Center in 2023.

Knowledge of Pregnant Women	Antenatal Care				Total	<i>p-value</i>
	Completed		Not Completed			
	f	%	f	%		
Good	9	12,2	6	35,2	43	0,042
Less Good	1	25,6	0	27,0	26	
Total	2	37,8	6	62,2	64	

Based on table 4.10. above, it was found that of the 74 respondents, 9 people had good maternal knowledge in the complete category (12.2%) with 26 people in the incomplete category

(35.1%) and 19 people in the incomplete category (25.6%) and less than complete maternal knowledge. incomplete category as many as 20 people (27.0%).

The findings of Chi-square statistical tests yielded a p-value of 0.042 <0.05, indicating a strong correlation between maternal education and prenatal care exams for expectant mothers in the Patumbak Deli Serdang health center's operating region in 2023.

Factors of Pregnant Women's Attitudes towards Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Table 4.11. Cross Tabulation of Attitude Factors towards Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Community Health Center in 2023.

Attitude of Pregnant Women	Antenatal Care				Total		p-value
	Completed		Not Completed		f	%	
	f	%	f	%			
Positive	1	16,1	4	5,9	4	6	0,017
Negative	3	21,8	2	6,2	3	8,0	
Total	2	37,9	6	2,1	4	1	

Based on table 4.11. above, it was found that of the 74 respondents, positive maternal attitudes were in the complete category as many as 13 people (16.1%) with 34 people in the incomplete category (45.9%) and negative maternal attitudes in the complete category as many as 15 people (21.8%) and incomplete category as many as 11 people (16.2%).

The results of statistical tests using Chi-square obtained a p-value of 0.017<0.05, meaning that there is a significant relationship between maternal attitudes and antenatal care examinations for pregnant women in the working area of the Patumbak Deli Serdang health center in 2023.

Factors of Pregnant Women's Work on Antenatal Care Visits in the Working Area of Patumbak Health Center, Deli Serdang Regency in 2023.

Table 4.12. Cross Tabulation of Employment Factors on Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Health Center in 2023.

Pregnant Women's Work	Antenatal Care				Total		p-value
	Completed		Not Completed		f	%	
	f	%	f	%			
Working	4	5,2	10	13,8	2	6,0	0,725
Not Working	2	32,7	8	51,3	6	4,0	
Total	2	37,9	6	62,1	7	1	

Based on table 4.12. above, it was found that of the 74 respondents, 4 people worked in the

complete category (5.2%) with 8 people in the incomplete category (10.8%) and 24 people (32.7%) in the incomplete category and non-working mothers in the complete category. incomplete as many as 38 people (51.3%).

The results of statistical tests using Chi-square obtained a p-value of $0.725 > 0.05$, meaning there is no significant relationship between maternal employment and antenatal care examinations for pregnant women in the working area of the Patumbak Deli Serdang health center in 2023.

Factors of the Age of Pregnant Women on Antenatal Care Visits in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

Table 4.13. Cross Tabulation of Age Factors on Antenatal Care Visits in the Patumbak Deli Serdang Health Center Work Area in 2023.

Age of Pregnant Women	Antenatal Care				Total		p-value
	Completed		Not Completed		F	%	
	f	%	f	%			
20-35 Years	2	38,0	8	40,0	5	7	0,257
<20 - >35 Years	8	11,0	6	11,0	14	22	
Total	10	49,0	14	51,0	24	31	

Based on table 4.13. above, it was found that of the 74 respondents, 20 people aged 20-35 years were in the complete category (38.0%) with 38 people in the incomplete category (40.0%) and mothers aged <20 years - >35 years in the complete category were 8 people (11.0%) and 8 people (11.0%) in the incomplete category.

In 2023, the Patumbak Deli Serdang health center's operational region did not exhibit a significant link between maternal age and prenatal care exams for pregnant women, as indicated by the p-value of $0.257 > 0.05$ derived from statistical testing using Chi-square.

Parity Factors for Pregnant Women on Antenatal Care Visits in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

Table 4.14. Cross Tabulation of Parity Factors on Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Community Health Center in 2023.

Parity of Pregnant Women	Antenatal Care				Total		p-value
	Completed		Not Completed		f	%	
	f	%	f	%			
Primigravida	1	19,0	0	40,0	4	5	0,196
Multigravida	4	19,0	6	22,0	10	14	
Total	5	38,0	6	62,0	15	20	

Based on table 4.14. above, it was found that of the 74 respondents, there were 14 primigravida mothers in the complete category (19.0%) with 30 people in the incomplete category (40.0%) and 14 people in the complete category of multigravida mothers (19.0%) and the incomplete category. complete as many as 16 people (41.0%).

Chi-square statistical tests produced a p-value of $0.196 > 0.05$, indicating that there is no significant correlation between parity and prenatal care checks for expectant mothers at the Patumbak Deli Serdang health center's service area in 2023.

Factors in Information Sources for Pregnant Women Regarding Antenatal Care Visits in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

Table 4.15. Cross Tabulation of Information Source Factors on Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Health Center in 2023.

Source Information	Antenatal Care				Total		p-value
	Completed		Not Completed				
	F	%		%	f	%	
Get Information	1	21,6	2	43	4	6	0,278
Not Getting Information	6		2	,3	8	4,9	
	1	16,2	4	18	2	3	
	2		4	,9	6	5,1	
Total	2	37,8	6	62	7	1	
	8		6	,2	4	00	

Based on table 4.15. above, it was found that of the 74 respondents, 16 mothers received complete category information (21.6%) with 32 people (43.3%) in the incomplete category and 12 mothers (16.2%) who did not receive complete category information. and the incomplete category was 14 people (18.9%).

Chi-square statistical tests produced a p-value of $0.278 > 0.05$, indicating that in the Patumbak Deli Serdang health center's operating region in 2023, there is no significant correlation between the source of information and prenatal care exams for expectant mothers.

Factors of Husband's Support for Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Table 4.16. Cross Tabulation of the Relationship between Husband's Support and Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Community Health Center in 2023.

Husband Support	Antenatal Care				Total		p-value
	Completed		Not Completed				
	f	%		%	f	%	
Supported	8	10,8	5	33	3	4	0,031
Not Supported	2	27,0	1	28	4	5	
	0		1	,4	1	5,4	

This work is licensed under a [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).
Jurnal Perilaku Kesehatan Terpadu Vol 2 No 1 2023

Total	8	2	37,8	6	,2	62	4	7	1	00
--------------	----------	----------	-------------	----------	-----------	-----------	----------	----------	----------	-----------

Based on table 4.16. above, it was found that of the 74 respondents, husbands supported the complete category as many as 8 people (10.8%) with incomplete categories as many as 25 people (33.8%) and husbands did not support the complete category as many as 20 people (27.0%) and the 21 people (28.4%) were incomplete.

Chi-square statistical tests produced a p-value of $0.031 < 0.05$, indicating a strong correlation between a husband's support and the prenatal care checks that expectant mothers in the Patumbak Deli Serdang health center's operating area get in 2023.

Service Accessibility Factors for Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Table 4.17. Cross Tabulation of Service Accessibility Factors on Antenatal Care Visits in the Working Area of the Patumbak Deli Serdang Health Center in 2023.

Service Accessibility	Antenatal Care						p-value			
	Completed		Not Completed		Total					
	f	%	f	%	f	%				
Easy	5	6,7	6	35,1	11	1,8	0,00			
Hard	23	31,1	20	27,1	43	8,2				
Total	8	2	37,8	6	,2	62	4	7	1	00

According to table 4.17 above, of the 74 respondents, 5 people (6.7%) were able to access easy services in the complete category, while 26 people (35.1%) were in the incomplete category. Of the respondents, 23 people (31.1%) were able to access difficult services in the complete category, and as many as 20 people (27.1%) were in the incomplete category. Chi-square statistical tests produced a p-value of $0.001 < 0.05$, indicating a significant correlation between prenatal care exams and service accessibility for expectant mothers at the Patumbak Deli Serdang health center's working region in 2023.

Multivariate Analysis

In order to determine which variables most strongly influence antenatal care visits in the working area of the Patumbak Health Center, Deli Serdang Regency in 2023, multivariate analysis selects variables with a p-value < 0.05 in the bivariate test (chi-square).

Table 4.18. Selection of Variables to Become Candidate Models in Logistic Regression Testing

Variable	p value	Selection
Knowledge	0,042	Candidate
Attitude	0,017	Candidate
Work	0,725	Not Candidate
Age	0,257	Not Candidate

Parity	0,196	Not Candidate
Source Information	0,278	Not Candidate
Husband Support	0,031	Candidate
Service Accessibility	0,001	Candidate

It is evident from the above table that four (four) variables are potential models for the logistic regression test. The following table shows the outcomes of the logistic regression analysis:

Table 4.19. First Multiple Logistic Regression Analysis Results

Variable	B	P (sig)	Exp(B)	95% C. I	
				Lower	Upper
Attitude	- 1,395	0,01 5	0,248	0,080	0,765
Husband Support	0,0 55	0,93 8	1,056	0,265	4,212
Accesibility	- 1,984	0,01 1	0,138	0,030	0,633

Table 4.19 indicates that three factors with a p-value of less than 0.05 are produced by logistic regression analysis and have an impact on prenatal care visits. When it comes to prenatal care visits for expectant mothers, the variables of knowledge, attitude, and service accessibility have the most impact.

Table 4.20. Results of the Second Multiple Logistic Regression Analysis

Variable	B	P (sig)	Exp(B)	95% C. I	
				Lower	Upper
Attitude	- 1,391	0,01 5	0,249	0,081	0,764
Service Accesibility	- 1,947	0,00 2	0,143	0,043	0,478

Based on table 4.20, it can be seen that logistic regression analysis produces two variables that have an influence on antenatal care visits with a p value <0.05. The most influencing factors are the attitude variable with a significant 0.015 (p value <0.05), OR 0.249 (95% CI = 0.081-0.764 and service accessibility with a significant 0.002 (p value <0.05), OR 0.143 (95% CI = 0.043-0.478) meaning that a good attitude has a 0.249 times chance and good service accessibility has a 0.143 times chance of influencing antenatal care visits for pregnant women

Qualitative Research Results

Table 4.21. Matrix of Interview Results with Informants (Pregnant Women) Regarding Pregnancy Knowledge

No	Informant	Interview Results
1	Informant 1	<i>“Providing education about pregnancy, what is it just for pregnancy?”</i>
2	Informant 2	<i>“ So that you know the baby is healthy”</i>
3	Informant 3	<i>“To check pregnancy”</i>

Based on the table above, it is known that informant 1 stated that the antenatal care visit provided counseling about pregnancy, for pregnancy only, informant 2 stated that it was to find out if the baby was healthy, while informant 3 stated that it was to check the pregnancy.

Table 4.22. Matrix of Interview Results with Informants (Pregnant Women) Regarding Antenatal Care Visits

No	Informant	Interview Results
1	Informant 1	<i>“This is just the first time”</i>
2	Informant 2	<i>“ No, not very often. seldom. If there are complaints, just check”</i>
3	Informant 3	<i>“ Maybe it's only been the last 2 months or 3 months that I've had a pregnancy check”</i>

Based on the table above, it is known that informant 1 stated that this was his first antenatal care visit. Informant 2 said no, not very often, rarely, only if there are complaints, while informant 3 stated that maybe it's only been the last 2 months or 3 months that I've had a pregnancy check.

Table 4.23. Matrix of Interview Results with Informants (Pregnant Women) Regarding the Existence of Village Midwives as an Antenatal Care Service

No	Informant	Interview Results
1	Informant 1	<i>“ There are no village midwives, but there are regular midwives at market 2”</i>
2	Informant 2	<i>“ There are village midwives, but they rarely check them”</i>
3	Informant 3	<i>“ There is a village midwife, but I rarely check it”</i>

Based on the table above, it is known that informant 1 stated that there were no village midwives, but regular midwives were available in market 2, informant 2 and informant 3 stated that there were village midwives, but rarely checked with village midwives.

Table 4.24. Matrix of Interview Results with Informants (Pregnant Women) Regarding Rarely Living Places with Antenatal Care Services

No	Informant	Interview Results
1	Informant 1	<i>“ I don't know the distance, but it is 20 minutes”</i>
2	Informant 2	<i>“ It's a long way... from here to market 2, so I'm too lazy to check ma'am”</i>
3	Informant 3	<i>“ Just close, ma'am, I don't know about the distance. But I</i>

rarely check.”

Based on the table above, it is known that informant 1 stated that the distance between the mother's residence and health services is 20 minutes. Informant 2 said it was far, from here to market 2, so I was too lazy to check while informant 3 said it was close, I don't know about the distance, but I rarely check for pregnancy.

Table 4.25. Matrix of Interview Results with Informants (Pregnant Women) Regarding Mother's Obstacles During Antenatal Care Visits

No	Informant	Hasil Wawancara
1	Informant 1	<i>“ because the distance is too far, I'm too lazy to go there to check”</i>
2	Informant 2	<i>“ There's a problem... there's no one to accompany you, ma'am, especially if your stomach hurts, it's a long way, ma'am”</i>
3	Informant 3	<i>“ So far the problem is because there is no one to accompany me, so I'm too lazy to go, if I go I'm afraid the midwife won't be there.”</i>

Based on the table above, it is known that informant 1 stated that the mother's problem was because the distance was too far, so she was too lazy to go for a check-up, informant 2 stated that there were problems, there were no problems, especially if her stomach hurts, the place was too far, while informant 3 stated that there were no problems. delivery and was afraid the bida wouldn't be there.

Table 4.26. Matrix of Interview Results with Informants (Pregnant Women) Regarding Husband's Support

No	Informant	Interview Results
1	Informant 1	<i>“It's all up to me”</i>
2	Informant 2	<i>“ Who supports it, but my husband works for it, so he can't deliver it”</i>
3	Informant 3	<i>“Very supportive b”</i>

Based on the table above, it is known that informant 1 stated that it was all up to the pregnant mother, informant 2 stated that she was supportive, but the mother's husband worked and could not accompany the pregnant mother, while informant 3 stated that he was very supportive.

Table 4.27. Matrix of Interview Results with Informants (Pregnant Women) Regarding Information on Antenatal Care Visits

No	Informant	Interview Results
1	Informant 1	<i>“ Never before, I only heard about it last night, because the cadres told me to come to a class for pregnant women”</i>
2	Informant 2	<i>“ I don't have any information yet ma'am”</i>
3	Informant 3	<i>“ I only get information from cadres, ma'am.”</i>

Based on the table above, it is known that informant 1 stated that he had never heard of it at all, informant 2 stated that he had not received any information while informant 3 stated that he had received information only from cadres.

Table 4.28. Matrix of Interview Results with Informants (Husbands) Regarding the Definition of Antenatal Care Visits

No	Informant	Interview Results
1	Informant 1	<i>“ All I know is to see that the mother and baby are healthy ”</i>
2	Informant 2	<i>“ So that the mother knows that the child is healthy, the midwife continues to give him vitamins ”</i>
3	Informant 3	<i>“ To see a healthy mother and a healthy baby, right ma'am? ”</i>

Based on the table above, it is known that informant 1 stated to see that the mother and baby were healthy, informant 2 saw that the mother and baby were healthy and were given vitamins by the midwife. Informant 3 stated that the pregnancy visit was to see that the mother and baby were healthy.

Table 4.29. Matrix of Interview Results with Informants (Husbands) Regarding Antenatal Care Visits

No	Informant	Interview Results
1	Informant 1	<i>“ So far, all I know is that you are diligent, ma'am ”</i>
2	Informant 2	<i>“ No ma'am, just checked a few times, not often ”</i>
3	Informant 3	<i>“ I don't know either ma'am, sometimes I'll tell you to check ”</i>

Based on the table above, it is known that informant 1 stated that all this time, those who knew were diligent in carrying out pregnancy visits, informant 2 stated that he was not diligent and only a few times, while informant 3 stated that the informant did not know, sometimes he was told that he had been checked.

Table 4.30 Matrix of Interview Results with Informants (Husbands) Regarding the Existence of Village Midwives as an Antenatal Care Service

No	Informant	Interview Results
1	Informan 1	<i>“ I don't know about village midwives, ma'am, but the midwives at the clinic are ma'am ”</i>
2	Informan 2	<i>“ I don't know ma'am, I don't understand ”</i>
3	Informan 3	<i>“ There seems to be a village midwife, ma'am ”</i>

Based on the table above, it is known that informant 1 stated that he did not know that there were village midwives, but there were midwives at PMB, informant 2 and informant 3 stated that there were village midwives, and did not understand.

Table 4.31. Matrix of Interview Results with Informants (Husbands) Regarding Rarely Living with Antenatal Care Services

No	Informant	Result Interview
1	Informant 1	<i>“ If it's far from where we live, ma'am, it's far from the health center, but the midwifery I mentioned earlier, ma'am, is quite close ”</i>
2	Informant 2	<i>“ It's close ma'am, just walk ”</i>
3	Informant 3	<i>“ How much, ma'am, I don't know, if the midwife's house is not too far away, ma'am ”</i>

Based on the table above, it is known that informant 1 stated that the distance between the mother's residence and health services is far, but the private midwife's service is close, informant 2 stated that it is close, just walking distance, while informant 3 stated that it is just close, ma'am, I don't know the distance, but the midwife's house private sector is not too far away.

Table 4.32. Matrix of Interview Results with Informants (Husbands) Regarding Mother's Obstacles During Antenatal Care Visits

No	Informant	Interview result
1	Informant 1	<i>“The problem is with the vehicle ma'am, the place is far away so it's difficult for us ma'am, sometimes only my wife goes ma'am”</i>
2	Informant 2	<i>“ If there's a problem, ma'am, maybe it's because my wife works, ma'am, so I don't have time to go check it out”</i>
3	Informant 3	<i>“ The problem is that there is no one between you, ma'am. I'm working ma'am, recently I was able to deliver ma'am”</i>

Based on the table above, it is known that informant 1 stated that the mother's problems were because the distance was too far, sometimes pregnant women went alone, informant 2 stated that there were problems, the pregnant mother was working, while informant 3 stated that the problem was that no one was there to accompany her and the husband was the first time his wife had checked the pregnancy.

Table 4.33. Matrix of Interview Results with Informants (Husbands) Regarding Husband's Support

No	Informant	Interview Results
1	Informant 1	<i>“ Yes, I support you, ma'am, even though I can't accompany you, ma'am, because of work”</i>
2	Informant 2	<i>“ Yes, ma'am, I support it”</i>
3	Informant 3	<i>“Yes, ma'am, I support it”</i>

Based on the table above, it is known that informant 1 stated that he supports but cannot always take pregnant women for examinations, informant 2 and informant 3 stated that they support.

Table 4.34. Matrix of Interview Results with Informants (Husbands) Regarding Information on Antenatal Care Visits

No	Informant	Interview Results
1	Informant 1	<i>“ I got it from the midwife who examined my wife”</i>
2	Informant 2	<i>“ Yes ma'am, from my wife”</i>
3	Informant 3	<i>“ Yes, ma'am, from my wife and the midwife”</i>

Based on the table above, it is known that informant 1 stated that he heard information from the midwife who checked his wife's pregnancy, informant 2 stated that he only received information from the wife, while informant 3 stated that he received information from the midwife's wife and mother.

Table 4.35. Matrix of Interview Results with Informants (Husbands) Regarding Responses If Pregnant Women Don't Visit Antenatal Care

No	Informant	Interview Results
1	Informant 1	<i>“ I’ll just go with you, ma’am, if you don’t want to check it out yet ”</i>
2	Informant 2	<i>“ If that’s the case, ma’am, I’ll just remind you, now it depends on whether my wife wants to go or not ”</i>
3	Informant 3	<i>“ I just reminded him, ma’am, he asked not to go for a check-up ”</i>

Based on the table above, it is known that informant 1 stated that he would follow his wife's wishes if he wanted to have an examination, informant 2 stated that he would remind his wife and continue to follow her wishes, while informant 3 stated that he would remind her and ask her not to go for an examination.

Table 4.36. Matrix of Interview Results with Informants (Husbands) Regarding Mothers' Expectations Regarding Pregnancy

No	Informant	Interview Results
1	Informant 1	<i>“ I hope my mother and child are healthy until birth ”</i>
2	Informant 2	<i>“ May you always be healthy, ma’am, be born safely ”</i>
3	Informant 3	<i>“ The hope is that you will be healthy until you give birth ”</i>

Based on the table above, it is known that informant 1, informant 2 and informant 3 expressed the hope that the mother and baby would be healthy and born safely.

Table 4.37. Matrix of Interview Results with Informants (Midwives) Regarding the Definition of Antenatal Care Visits

No	Informant	Interview Result
1	Informant	<i>“ ANC of course carries out examinations of pregnant women, so every pregnant mother who comes to visit the health center we carry out a 10T examination. ANC examinations are carried out 6 times in 9 months of pregnancy routinely, 2 examinations are carried out by a doctor, namely in the 1st trimester and 3rd trimester at the 5th visit, and 4 times the song may be examined by a midwife and this is routinely carried out at the health center. And every pregnant woman must have a blood test for HIV, syphilis, hepatitis, the HB test is done twice at TM 1 and TM 3, urine protein must be done at TM 2, the mother's blood sugar level is checked at TM 3 ”</i>

Based on the table above, it is known that midwives state that examinations carried out by pregnant women must achieve the targets that have been implemented during pregnancy visits. The midwife's statement regarding ANC visits aims to ensure that pregnant women and their unborn babies are always healthy and avoid complications.

Table 4.38. Matrix of Interview Results with Informants (Midwives) Regarding Antenatal Care Visits

No	Informant	Interview Result
1	Informant	<i>“ What I have seen so far is that some of the different villages routinely carry out checks at the health service ”</i>

Based on the table above, it is known that midwives stated that some pregnant women from

different villages routinely undergo pregnancy checks at health services.

Table 4.39. Matrix of Interview Results with Informants (Midwives) Regarding the Existence of Village Midwives as an Antenatal Care Service

No	Informan	Results Interview
1	Informant 1	<i>“ Very willing, waiting for the arrival of pregnant women. So that pregnant women in this village are always healthy and their babies are also healthy”</i>

Based on the table above, it is known that midwives stated that they were very willing to wait for the arrival of pregnant women, so that pregnant women could get maximum service from health services. Pregnancy examinations are carried out by pregnant women to prevent complications from occurring, and early detection of complications that occur in pregnant women.

Table 4.40. Matrix of Interview Results with Informants (Midwives) Regarding Rarely Living Places with Antenatal Care Services

No	Informant	Interview Results
1	Informant 1	<i>“ The distance between a pregnant woman's place and the health center health facility varies according to each village. There are near and far because we have 8 villages, the most distant villages are Lantasan Baru and Patumbak 1”</i>

Based on the table above, it is known that the midwife stated that the distance between the mother's residence and health services varies, some are close and some are far because the working area of the Patumbak Health Center, Deli Serdang Regency, has 8 villages with different distances. The villages that are far away in this area are Lantasan Baru village and Patumbak 1 village, so it is difficult to reach these areas. However, there are village midwives stationed in these eight villages.

Table 4.41. Matrix of Interview Results with Informants (Midwives) Regarding Maternal Obstacles During Antenatal Care Visits

No	Informant	Intgerview Results
1	Informant	<i>“Obstacles for pregnant women when visiting ANC, such as in Lantasan Baru, are because the distance is very far and some of our pregnant women don't have motorbikes and their economy is low, so to come to the puskesmas you have to think about costs, but in every village we have a village midwife, so they can carry out examinations at their respective village midwives”</i>

Based on the table above, it is known that the midwife stated that the distance between the place of residence of the pregnant woman and the health service is far, Lantasan Baru and Patumbak 1 villages are the areas furthest from the health service. The midwife also stated that the reason why pregnant women do not come to health services is because they do not have a vehicle to come to health services. Due to their difficult economic status, pregnant women incur costs and think twice so that pregnant women are reluctant to come to health services.

Table 4.42. Matrix of Interview Results with Informants (Midwives) Regarding Husband's Support

No	Informant	Interview Results
	Informant	<i>“What I have noticed so far is that 85% of ANC mothers go to the community health center and are always accompanied, which means they support”</i>

Based on the table above, it is known that midwives stated that every time they go to health services, pregnant women are always accompanied by their husbands because of the long distance between where they live and health services, so that husbands who have time to take their wives and with the short distance, some husbands cannot take them to health services. check pregnancy.

Table 4.43. Matrix of Interview Results with Informants (Midwives) Regarding Information on Antenatal Care Visits

No	Informant	Interview Results
1	Informant	<i>“I always tell every pregnant woman”</i>

Based on the table above, it is known that midwives stated that examinations carried out by midwives are always given to pregnant women, so that pregnant women can know the condition of the mother and baby. And in the future, if the pregnant woman carries out a pregnancy check-up, she can assess and see the progress that occurs in the pregnant woman.

Table 4.44. Matrix of Interview Results with Informants (Midwives) Regarding Responses If Pregnant Women are Lazy about Visiting Antenatal Care

No	Informant	Interview Results
1	Informant	<i>“If the mother is not diligent in carrying out ANC, unwanted problems will occur later, because the mother is not diligent so we don't know what happens during her pregnancy. Our plan is to create a program to visit pregnant women if they don't make visits, so we go door to door. For pregnant women who need it”</i>

Based on the table above, it is known that the midwife stated that if the mother does not have antenatal care, undesirable problems will occur, because if the mother does not have a pregnancy check-up, she does not know what is happening during pregnancy. The midwife's plans and desires create a program to visit pregnant women who do not come for examinations at health services, midwives visit pregnant women who need health services.

Table 4.45. Matrix of Interview Results with Informants (Midwives) Regarding Mothers' Expectations Regarding Pregnancy

No	Informant	Interview Results
1	Informant	<i>“My hope is that pregnant women understand the importance of prenatal visits, pregnant women who carry out pregnancy checks can prevent complications that occur during childbirth later, and I also hope that mothers and babies are always healthy until birth.”</i>

Based on the table above, it is known that midwives expressed the hope that pregnant women would always understand the importance of carrying out pregnancy checks. Pregnancy checks can avoid complications and detect complications that occur early. So that pregnant women and babies are always healthy during pregnancy and until birth.

The Influence of Pregnant Women's Knowledge on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, it shows that of the 74 respondents, 9 people (12.2%) had good maternal knowledge in the complete category, with 26 people in the incomplete category (35.1%) and 19 people in the incomplete category (25.6%).) and the incomplete category was 20 people (27.0%).

The findings of Chi-square statistical tests yielded a p-value of $0.042 < 0.05$, indicating a strong correlation between maternal education and prenatal care exams for expectant mothers in the Patumbak Deli Serdang health center's operating region in 2023. Well-informed expectant mothers will comply with prenatal care tests because they wish to preserve both the mother's and the fetus's health and ensure prompt treatment in the event of difficulties. Notoatmodjo says that knowledge is one of the elements that affects behavior modification. A person with strong knowledge will be driven to put it to use in their daily lives. Knowledge about pregnancy obtained through counseling includes fetal growth and development, self-care during pregnancy and danger signs that pregnant women should know (Asmin et al., 2022).

The Influence of Visiting Pregnant Women's Attitudes on Antenatal Care in the Working Area of the Patumbak Health Center, Deli Serdang Regency in 2023.

Based on the research results, it shows that of the 74 respondents, 13 people had positive maternal attitudes in the complete category (16.1%) with 34 people in the incomplete category (45.9%) and 15 people in the complete category of negative maternal attitudes (21.8%).) and the incomplete category was 11 people (16.2%).

Chi-square statistical tests produced a p-value of $0.017 < 0.05$, indicating a strong correlation between maternal attitudes and prenatal care exams for expectant mothers in the Patumbak Deli Serdang health center's operating region in 2023.

Moreover, attitudes can affect behavior by guiding deliberate and well-reasoned decision-making. This idea essentially states that an individual will behave if he perceives the action as beneficial and if he feels that others want him to act in that way. An individual's reaction, or response, that remains closed to a stimuli or object is their attitude. Three basic components make up an attitude: the inclination to act (tend to behave) and beliefs, ideas, and conceptions about an item, as well as an emotional life or judgment of an object. The results of this research are in line with research by Megawati Sinambela and Eva Solina in 2021 entitled "Analysis of Factors that Influence Pregnant Women on Antenatal Care (ANC) Examinations During the Covid-19 Pandemic" showing the results that the knowledge factor value (p-value = 0.000) , age with value (p-value=0.002), occupation with value (p-value=0.002) and attitude with value (p-value=0.001) influence antenatal care visits. So it is recommended that mothers not be afraid and continue to visit antenatal care (ANC) during the Covid-19 pandemic to obtain health services and information and continue to comply with health protocols (12).

The Influence of Pregnant Women's Work on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, it shows that of the 74 respondents, 4 people worked in the complete category (5.2%) with 8 people in the incomplete category (10.8%) and 24 people in the incomplete category (32.7%) who did not work in the complete category. and the incomplete category was 38 people (51.3%).

The results of statistical tests using Chi-square obtained a p-value of $0.725 > 0.05$, meaning there is no significant relationship between maternal employment and antenatal care examinations for pregnant women in the working area of the Patumbak Deli Serdang health center in 2023.

Work supports the ability of pregnant women to be able to have their pregnancy checked both in terms of cost and time, however, mothers who do not work should also have a greater opportunity to have a check-up. Thus it can be said that working or not working have the same opportunity to carry out pregnancy checks which of course can be influenced by other factors such as family support, costs and time (13).

The results of this study are in line with research by Ana Setiyorini, et al. in 2021 entitled "Factors that Influence Pregnant Women's Compliance with Antenatal Care (ANC) Visits in Health Services." From the results of the analysis it was found that there was no significant relationship between employment status and pregnant women's compliance in carry out ANC examination (p-value: 0.224).

The Influence of Pregnant Women's Age on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, of the 74 respondents, 20 people aged 20-35 years were in the complete category (38.0%) with 38 people in the incomplete category (40.0%) and mothers aged <20 years - >35 years in the complete category. as many as 8 people (11.0%) and the incomplete category as many as 8 people (11.0%).

In 2023, the Patumbak Deli Serdang health center's operational region did not exhibit a significant link between maternal age and prenatal care exams for pregnant women, as indicated by the p-value of $0.257 > 0.05$ derived from statistical testing using Chi-square.

Younger mothers who have recently given birth will often give their kids more attention. Their desire to give their kids access to quality healthcare will decline as they age, get busier, and have more kids.

This research is in line with research by Sulastri, et al. in 2021 entitled "Factors that Influence Antenatal Care (ANC) Visits for Pregnant Women in the Third Trimester." The statistical test results were obtained with a p value = 0.671, this shows that there is no influence between age and ANC visits for pregnant women in the third trimester.

The Influence of Pregnant Women's Parity on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, of the 74 respondents, 14 people were in the complete category of primigravida (19.0%) with 30 people in the incomplete category (40.0%) and 14 people in the complete category of multigravida mothers (19.0%) and the incomplete as many as 16 people (41.0%).

A p-value of $0.196 > 0.05$ was obtained from statistical testing using Chi-square, indicating that there is no significant association between parity and prenatal care checks for expectant mothers at the Patumbak Deli Serdang health center's working area in 2023.

A woman's state about the number of children she gives birth to is called parity. A woman is considered high parity if she has more than two children, and low parity if she has less than two. Maternal mortality suggests that parity 2 to 3 is a safe parity. Maternal death rates range from 1 to 14 for parity 1 and high parity (greater than 3).

This research is in line with research by Ana Setiyorini, et al in 2021 entitled "Factors that Influence Pregnant Women's Compliance in Carrying out Antenatal Care (ANC) Visits in Health Services" from the results of the analysis it was found that there was no significant relationship between parity and the compliance of pregnant women in carrying out examinations. ANC (p-value: 0.868).

The Influence of Information Sources for Pregnant Women on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, of the 74 respondents, 16 people (21.6%) received complete category information, with 32 people (43.3%) in the incomplete category and 12 mothers (16.2%) who did not receive complete category information.) and the incomplete category was 14 people (18.9%).

Chi-square statistical tests produced a p-value of $0.278 > 0.05$, indicating that in the Patumbak Deli Serdang health center's operating region in 2023, there is no significant correlation between the source of information and prenatal care exams for expectant mothers.

One instrument used by health professionals to disseminate information about health is the information media. This informational medium is produced on the basis of the idea that every person possesses knowledge that may be perceived or sensed.

This research is in line with previous research that there is no influence of media sources of information on ANC visits. However, this research is not in line with research by Wehelmina Daril Tassi, et al in 2021 entitled "Analysis of Factors Associated with the Behavior of Pregnant Women in Utilizing ANC Services" showing the results that there is an influence of exposure to information media on the utilization of ANC services with a p value = (0.000).

The Influence of Support from Pregnant Women's Husbands on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, of the 74 respondents, husbands supported the complete category as many as 8 people (10.8%) with incomplete categories as many as 25 people (33.8%) and husbands did not support the complete category as many as 20 people (27.0%) and incomplete category as many as 21 people (28.4%).

Chi-square statistical tests produced a p-value of $0.031 < 0.05$, indicating a strong correlation between a husband's support and the prenatal care checks that expectant mothers in the Patumbak Deli Serdang health center's operating area get in 2023.

The husband's support provided is not only limited to taking the mother to health services for pregnancy check-ups. According to Friedman (2013), there are four criteria for support that a husband needs to provide, namely informational support, assessment/appreciation support, instrumental support and emotional support. Examples of informational support include the husband providing information about danger signs in pregnancy or the husband encouraging the wife to read MCH books. Assessment/appreciation support such as the husband always asking the midwife for an explanation of the examination results. Instrumental support such as a husband buying milk for pregnant women. And emotional support such as a husband calms the mother's worries before giving birth (15).

The Influence of Accessibility of Pregnant Women's Services on Antenatal Care Visits in the Patumbak Health Center Working Area, Deli Serdang Regency in 2023.

Based on the research results, of the 74 respondents, the accessibility of easy services in the complete category was 5 people (6.7%) with the incomplete category being 26 people (35.1%) and the accessibility of difficult services in the complete category being 23 people (31.1%) and the incomplete category was 20 people (27.1%).

Chi-square statistical tests produced a p-value of $0.001 < 0.05$, indicating a significant correlation between prenatal care exams and service accessibility for expectant mothers at the Patumbak Deli Serdang health center's working region in 2023.

Where a mother receives health care to monitor her pregnancy until she is able to give birth

safely is connected to service accessibility. Pregnant women will find it simpler to get regular pregnancy checkups and emergency care if there are sufficient medical facilities conveniently located.

This research is in line with research by Hana Anindya Sahasika and Nunik Puspitasari in 2023 entitled "Factors Associated with Antenatal Care Service Visits for Pregnant Women" showing the results that the value ($p\text{-value}=0.025$) which means there is a relationship between the distance of the mother's residence and the visit Antenatal care.

Discussion of Multivariate Research Results

The results of the multivariate analysis from this research can be seen that the logistic regression analysis produces one variable that has an influence on antenatal care visits for pregnant women in the Patumbak Health Center area, Deli Serdang Regency in 2023 with a p value <0.05 . The factors that have the most influence on antenatal care visits for pregnant women in the Patumbak Health Center area, Deli Serdang Regency in 2023 are the attitude variable with a significant 0.015 (p value <0.05), OR 0.249 (95% CI = 0.081-0.764 and service accessibility with a significant 0.002 (p value <0.05), OR 0.143 (95% CI = 0.043-0.478) meaning that a good attitude has a 0.249 times chance and good service accessibility has a 0.143 times chance of influencing antenatal care visits for pregnant women.

Discussion of Qualitative Results Analysis

Informant 1 (pregnant mother)

Informant 1 is named N, 44 years old, has a junior high school education, works as a housewife and is pregnant with her second child. Based on the results of interviews conducted, the mother stated that the antenatal care visit was counseling about pregnancy, the mother had never had a pregnancy check-up, during this pregnancy. This is the first time I've had a pregnancy checkup even though I'm already 8 months pregnant. The husband supports the mother but cannot take the pregnant woman to have a pregnancy check-up. According to pregnant women, the village midwife is not available in the village, this causes mothers to be reluctant to come to check the pregnancy. The house is too far from the midwife's place, so pregnant women are lazy about having a pregnancy check-up. The distance between home and antenatal care service facilities takes 20 minutes.

Informant 2 (Pregnant Mother)

Informant 2 named P, 20 years old, high school graduate, works as a housewife and is pregnant with her 1st child. Based on the results of interviews conducted, the mother stated that the antenatal care visit was a check to find out that the baby and mother were healthy, the mother found out that 6 times examination in 9 months, but during pregnancy the mother only carries out examinations when there are complaints, the gestational age is already 7 months. The husband supports the mother but cannot take the pregnant woman to have a pregnancy check-up. According to pregnant women, there are village midwives, but pregnant women are never checked. The house is too far from the midwife's office, so pregnant women are lazy about having a pregnancy check-up. The distance between home and antenatal care service facilities takes 20 minutes.

Informant 3 (Pregnant Mother)

Informant 3 is named DNP, 20 years old, has a high school education, works as a housewife and is pregnant with her 1st child. Based on the results of interviews conducted, the mother stated that the antenatal care visit was just a pregnancy check, the informant rarely carried out a pregnancy check, even though the gestational age was already 7 months. The husband supports the mother but cannot take the pregnant woman to have a pregnancy check-up. According to pregnant women, there are village midwives, but pregnant women are never checked. The house

This work is licensed under a

[Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).

Jurnal Perilaku Kesehatan Terpadu Vol 2 No 1 2023

is close to the midwife's place, but pregnant women are lazy about having a pregnancy check-up. The distance between the house and the antenatal care service facility takes 15 minutes.

Informant 4 (Head of family)

Based on the results of the interview, the informant did not really know the meaning of antenatal care visits for pregnant women. Not far from the informant's residence there is an antenatal care service facility. The distance between residence and health service facilities is not too far, approximately 4 km. According to the informant, the obstacle for pregnant women in attending antenatal care visits is because they do not have a vehicle. However, informants supported the implementation of antenatal care visits for pregnant women.

Informant 5 (Head of Family)

Based on the results of the interview, the informant did not really know the meaning of antenatal care visits for pregnant women. Not far from the informant's residence there is an antenatal care service facility. The distance between residence and health service facilities is not too far, approximately 2 km. According to the informant, the obstacle for pregnant women in attending antenatal care visits is because pregnant women work. However, informants supported the implementation of antenatal care visits for pregnant women.

Informant 6 (Head of Family)

Based on the results of the interview, the informant did not really know the meaning of antenatal care visits for pregnant women. The informant's place of residence and antenatal care service facilities are far away. The distance between residence and health service facilities is not far, approximately more than 2 km. According to the informant, the problem for pregnant women in attending antenatal care visits is because there is no one to accompany them. However, informants supported the implementation of antenatal care visits for pregnant women.

Informant 7 (Midwife)

Based on the results of interviews, informants stated that the definition of antenatal care is a service provided by health workers to pregnant women to prevent abnormal things from occurring during pregnancy so that the mother and baby in her womb remain healthy. In villages where midwives work, pregnant women do not always make antenatal care visits during their pregnancy, because pregnant women feel that antenatal care visits are not that important during pregnancy. The informant also stated that he was willing to wait for the arrival of the pregnant woman and check her pregnancy. The habit was that when the informant was waiting, no pregnant woman came to visit to check the pregnancy.

CONCLUSION

Drawing on the findings of the conducted research, the following conclusions may be made: Mothers' awareness of ANC exams at the Patumbak Health Center in Deli Serdang Regency in 2023 is significantly correlated with this information. Attitudes toward ANC exams for moms at the Patumbak Health Center in the Deli Serdang Regency in 2023 are significantly correlated. No In 2023, there is a strong correlation between ANC exams for mothers at the Patumbak Health Center in Deli Serdang Regency and employment. In 2023, there is no discernible correlation between a mother's age and her ANC examination at the Patumbak Health Center in the Deli Serdang Regency. The support of spouses for ANC exams for mothers at the Patumbak Health Center in the Deli Serdang Regency in 2023 is significantly correlated. Service accessibility and ANC exams for moms at the Patumbak Health Center in the Deli Serdang Regency in 2023 are significantly correlated. Attitude factor (p-value 0.017) and service accessibility (p-value 0.001) are the variables that have the most effects on ANC tests for mothers at the Patumbak Health Center in Deli Serdang Regency in 2023.

This work is licensed under a [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).
Jurnal Perilaku Kesehatan Terpadu Vol 2 No 1 2023

Recommendations

B For pregnant women, insufficient knowledge will influence attitudes. Therefore, pregnant women are expected to increase their knowledge and understanding about pregnancy so that they can carry out routine pregnancy checks so that the mother and fetus are healthy. Finding information is not difficult if mothers are not lazy to get information, information can be obtained through social media, pregnant women can also consult with village midwives via telephone or social media such as WA (whats app) pregnant women ask for the mother's number. Pregnant women are added to the group so that mothers are always updated about pregnancy. For Puskesmas to be more active in the ANC program so that mothers want to carry out their pregnancy checks at health services to reduce risk factors that occur during pregnancy, childbirth and postpartum. Conducting classes for pregnant women in each village brings pregnant women closer to health workers, thereby making health services run well. It is hoped that village midwives will visit pregnant women or go door to door for pregnant women who need things such as where the mother lives far away and does not have a vehicle so that pregnant women get proper service and pregnant women and their babies are always healthy. For educational institutions, the diharphan can be used as library material and reference for students regarding the use of ANC health services. For researchers, it is hoped that it will be a source of knowledge and experience for researchers during research, especially in carrying out ANC examinations. For future researchers, it can be used as a basis for further research on other variables that influence the use of ANC health services.

REFERENCES

1. Lilis N, Harismayanti, Ani R. Hubungan Ibu hamil tentang Tanda Bahaya Kehamilan dengan Jumlah Kunjungan Pemeriksaan Antenatal Care di Puskesmas Limboto Kabupaten Gorontalo. *J Educ Innov Public Heal*. 2023;1(2):38–42.
2. Buku Ajar Kesehatan Ibu dan Anka. Jakarta Selatan: Pusat Pendidikan dan Pelatihan Tenaga Kesehatan; 2015.
3. Yusri Dwi Lestari, Sulis Winarsih. Pengetahuan Ibu Hamil Tentang Tanda Kegawatdaruratan Kehamilan Dengan Kepatuhan Dalam Pemeriksaan Antenatal Care di Wilayah Kerja Puskesmas Glagah. *SEHATMAS J Ilm Kesehat Masy*. 2022;1(3):279–86.
4. WHO, UNICEF, UNFPA WBG and UNPD. Trends in Maternal Mortality : 1990 to 2015: Estimates Developed by WHO,UNICEF,UNFPA, The World Bank and the United Nations Population Divisions. *Who /Rhr/1523*. 2015;32(5):1–55.
5. Kemenkes RI. Profil Kesehatan Indonesia 2021. Pusdatin.Kemenkes.Go.Id. 2022. Kementrian Kesehat. Republik Indones.
6. Annur. Annur. 2022. kemenkes 2022 tentang ISR.
7. Sumut D. Provinsi Sumatera Utara. *Pendidik* 2019;99.
8. Yanti H saputri. Faktor-Faktor Yang Mempengaruhi Kepatuhan Ibu Hamil Dalam Melakukan Pemeriksaan Kehamilan. *Kaos GL Derg*. 2020;8(75):147–54.
9. Wiratmo PA, Lisnadiyanti, Sopianah N. Faktor-Faktor Yang Mempengaruhi Kunjungan Antenatal Care Terhadap Perilaku Antenatal Care. *CoMPHI J Community Med Public Heal Indones J*. 2020;1(2):67–76.
10. Notoatmodjo S. *Metodologi Penelitian*. Jakarta: Rineka Cipta; 2017.
11. Asmin E, Mangosa AB, Kailola N, Tahitu R. Hubungan Tingkat Pengetahuan Dan Sikap Ibu Hamil Dengan Kepatuhan Kunjungan Antenatal Care Di Puskesmas Rijali Tahun 2021.

- J Epidemiol Kesehat Komunitas. 2022;7(1):458–64.
12. Sinambela M, Solina E. Analisis Faktor - Faktor Yang Mempengaruhi Ibu Hamil Terhadap Pemeriksaan Antenatal Care (Anc) Selama Pandemi Covid-19 Di Puskesmas Talun Kenas Tahun 2020. *J Kebidanan Kestra*. 2021;3(2):128–35.
 13. Setiyorini A, Yuliana Sijabat F, Anita Sari M. Faktor yang Mempengaruhi Kepatuhan Ibu Hamil dalam Melakukan Kunjungan Antenatal Care (ANC) di Layanan Kesehatan.pdf. *I Care J Keperawatan STIKes Panti Rapih*. 2021;2(1):1–12.
 14. Juniarty E. Hubungan usia dan paritas terhadap keteraturan pemeriksaan antenatal care pada ibu hamil. *J Heal Sci*. 2021;1:22–8.
 15. Inayah N, Fitriahadi E. Hubungan pendidikan, pekerjaan dan dukungan suami terhadap keteraturan kunjungan ANC pada ibu hamil trimester III. *JHeS (Journal Heal Stud)*. 2019;3(1):64–70