HEALTH PROMOTION MEDIA FOR HIGH RISK PREGNANCY WOMEN IN THE DISTRICT OF BANYUMAS, INDONESIA

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INTRODUCTION
Indicators of public health level is measured on the life expectancy linked to maternal mortality ratio (MMR), Infant Mortality Rate (IMR) and the nutritional status of infants and toddlers. MMR according to the Demographic and Health Survey 2012 showed 259 per 100,000 live births. Target MMR nationally in 2015 was 102 per 100,000 live births as a commitment has been built as part of the Millennium Development Goals / MDGs [1].

Maternal Mortality Rate (MMR) in Central Java 2012 amounted to 116.34 per 100,000 live births. Amounting to 57.93% of maternal deaths occur in the postpartum period, during pregnancy amounted to 24.74%, and at the time of delivery by 17.33%. Maternal deaths by age group in the most productive age (20-34 years) amounted to 66.96%, and then group the age > 35 years 26.67% and the age group <20 years at 6.37% [2].

Cases of maternal mortality in Banyumas distributed evenly in every district. The number of maternal deaths in Banyumas ranks 6 out of 35 districts in Central Java in 2012 with the number of deaths 34. Genesis maternal deaths in 2013 in Banyumas number of 35 cases was ranked third out of 35 districts in Central Java. Maternal Mortality Data in Banyumas number of 19 deaths until August 2014 [3].

Maternal deaths occurred in the group of pregnant women who have a high risk pregnancy. Eclampsia and hemorrhage occurred of high-risk pregnancies that can be addressed at antenatal quality and community empowerment for the early detection of high-risk pregnancies. Lack of information about high-risk pregnancy in pregnant women related factors to prevent of high-risk pregnancies.

Results of research Oliveira showed that women with high-risk pregnancies have a typical experience both medical and non-medical. It can produce vulnerabilities that need to be considered maximum prenatal care. Pregnant women to access detailed information about their own health and their children is a very important component. In many contexts, due to lack of information, she was living in a state of dependency, and a lack of systematic otonomi. Action taken group health education with active participation from them, to adopt a strategy based on their needs, determined by social conditions, education. They are in order can change perceptions and to develop reproductive health [15]

Based on the above, the problem in this research is to know the information needs of high-risk pregnancy for pregnant women and strategic approach taken to provide prevention information of obstetric complication. Based on survei health promotion media that have been obtained information in the Maternal Child Health (MCH) book, but MCH book not yet contains more details about the prevention of obstetric complications.

METHODS
This study uses a qualitative approach, with the participation number of 14 pregnant women in the district of Banyumas. Informants or participants taken by using purposive sampling method. This study design using the phenomenological approach that focuses on subjective experiences of participants.

Data collection in this research obtained through in-depth interviews. In-depth interview is a interaction that takes place between two people in a situation of facing each other one, which is conducting the interview request information or expression to people who researched rotating around opinions and beliefs [5]. All participants get an explanation of the research conducted, the research procedure and it’s rights. Data was analyzed by thematic content analysis.
RESULT AND DISCUSSION

According Table 1 informants were observed at the age minimum of 36 years and the age maximum of 44 years. Informans have education level elementary, junior and senior high school.

The results showed that most informants never had information about high-risk pregnancy include preeclampsia, pregnancy infection, but most of the informant has not been informed about hemorrhage. The following statement from the informant informant of the high-risk pregnancy information:

In case of high blood pressure and infections pregnancy yes once, but if hemorrhage is not." (Informant 1)

If the hemorrhage does not, but if high blood pressure in pregnant women and pregnancy infection ever." (Informant 2)

There are informants who have not received information about high-risk pregnancies, this is expressed by the informant:

"Oh ya ... has never been informed about the prevention of complications of obstetric hemorrhage, pre-eclampsia and infections of pregnancy." (Informant 6)

"I never been able to ya .." (Informant 7)

The results of in-depth interviews indicate that information about high-risk pregnancies obtained from the clinic clerk, midwife and doctor with media images are shown, media leaflets, and without use an information media. This is answered by three informants, informants 4, and 5 states informant information obtained from doctors and midwives in the form of an image with a caption:

From the same doctor or midwife anyway, at least if the collection was midwife pregnant woman life examples of the pictures continue to exist caption what it is." (Informant 3)

Obtained information from a midwife, I think does not use media, delivery just so." (Informant 4)

Not yet anyway, so far only a midwife, the most well given disposable paper information leaflet there is a picture and a brief description so." (Informant 5)

The results of this study indicate that the information obtained largely informants include: malnutrition among pregnant women, the consumption patterns of pregnant women, how to maintain the health of pregnant women, infant care, the impact of the lack of blood, danger signs of pregnancy, the impact of high blood pressure during pregnancy and childbirth.

How well, Ha..ha..ha . Yes most about how to maintain the health of pregnant mothers about infant care , the danger that the blood shortage tablets , danger signs of pregnancy , due to high blood pressure during pregnancy and childbirth. Not a lot I can remember, ha..ha . (Informant 2)

" Ya like hemorrhage during childbirth , born prematurely . Continue if it's blood deficiency anemia so must diligently take iron tablet , continue to let no high blood pressure told to rest, not stress , do not continue to let pregnancy happen transmitted infections should also be faithful to the couple so , keep not exposed to cigarette smoke he .. he he ." (Informant 4)

The information needed for pregnant women associated with high-risk pregnancies based on in-depth interviews with informants is the prevention of complications of pregnancy, childbirth preparation for mothers who are high-risk, high-risk pregnancy care, pregnancy nutrition, safe motherhood and newborn care. This was disclosed by the informant

"..Ya What causes high-risk pregnancy, prenatal care yes most in terms of health, how to maintain the health of pregnant women, pregnant women with personal care, how to prevent complications of pregnancy, how to care and nursing babies right .." (Informant 3)

".. Yes I still classified as high-risk first, yes most need information on how to prevent further hemorrhage, pregnant mothers about hygiene, food is dangerous for pregnant women, continue again what is the cause complications, prevention, impact on the mother and fetus. For yes postnatal care most about health, the health of infants and mothers, how to care for the baby, then that milk breast smoothly .. " (Informant 4)

Information on high-risk pregnancies, according to most informants should be given by health care workers such as doctors, midwives, and health volunteer. Provision of information about high-risk pregnancy given at the association pregnant/class of pregnant women, or counseling. The method of delivering the information needed with media leaflets, media guidebooks pregnant women, media containing images. Informant 4,5,7 says:

"... Yes, like a doctor or midwife so . , fitting clubs or classes that pregnant women, counseling .... maybe ya , ya ... actually check if there is a leaflet to the clinic does so, but my right to check the health centers are rare and often to a midwife so there can not. So yes it took the media as it was for the added knowledge ... " ( informant 4 )

"... At least it was practically the same as that in the hospital as a doctor or midwife .. , he .. he .. he , pregnant women collected every month there ... ya , ya ... maybe counseling, yes with a midwife or maybe practiced though more clearly .. , need ed ya , ya that there are pictures at writing so . ." ( informant 7 )

"... Ya yah health services , such as the midwife or cadres so ... , ehmm , yes can do classroom activities fit pregnant women with counseling alone or can be possible .... , ya usual disposable or can be added to give the media as paper contains information and images , or media that can be seen and heard .. ." ( informant 5 )

Based on the results of in-depth interview about the information needs of high-risk pregnancies, the researchers designed the media information about
high-risk pregnancies with media leaflet that comes with writing and drawings. It is based on media information needed by pregnant women informants. Information on high-risk pregnancy are made for three designs leaflet is about obstetric complications, bleeding, and preeclampsia.

Based on the results of in-depth interview to the informant about the informant opinion after reading the leaflet high-risk pregnancy, bleeding, and preeclampsia showed most of the informants claimed to be more to know about high-risk pregnancy, bleeding, and preeclampsia. This was disclosed by the informant 8, 10:

"... Yes I become more informed about the danger signs of pregnancy, it helps add to my understanding of the complications that can occur during pregnancy, it's ... yes the hell wrote, Just simply add to knowledge so, so know how to keep the fetus healthy.. (Informants 8)

"Eemm ... Yes I got more out information about the importance of the safety of infants and fetuses, and greatly adds to my knowledge about pregnancy ya ... yes most the hell wrote, Just simply add to knowledge so..(Informant 10)

The results of in-depth interview on the informant's interest to leaflet high-risk pregnancy, hemorrhage and preeclampsia showed that most informants stated the leaflet comes with interesting information and pictures that support.

This was disclosed by the informant 10, 12 informants and informant 8 which states:

"... Hemm, interested once interesting because in addition to information about pregnancy is also complete. I think the information is more than the one in the MCH book well, he he."(Informant 10)

"Hemm, Yes interested because in addition to the information delivery also clearly well he he." (Informant 12)

"... Interested ya ya because I've never been and the information there is alss good, especially there are pictures so, he he. (Informant 8)

Leaflets material that can be understood by most informants are danger signs of pregnancy, the characteristics of high-risk pregnant women and their prevention, and hemorrhage. While information is the most difficult to understand by most informants are preeclampsia.

This was disclosed by the informant 14 and 11 of the leaflet material:

"... ehm, .. about the danger signs of pregnancy such as swelling of the limbs (legs and arms), traits of high risk pregnant women and prevention. It doang who understand, others do not understand ya ... Ha...ha... (Informant 14)

whereas the information that is difficult to understand:

Ehm, yes about the danger that was .... I came to know about the dangers that can occur during pregnancy, the risk factors in pregnant women and the characteristics of high-risk pregnant mothers ..(Informant 11)

and on information that has not been understood:

No, I have not understood well, the term pre-eclampsia, obstructed labor solusio placenta not same with prematurus that I do not understand ya ..?(Informant 11)

Most informants argued that the information contained in this leaflet can meet the needs of pregnant women information about high-risk pregnancy, hemorrhage and preeclampsia. It is delivered by the informant 8 and 11 of the leaflet can meet the information needs of pregnant women:

"... Hemm, so far anyway already meet the information needs me ya, ya I find the information in this leaflet is complete ... I think enough ya, but I am eventoconfused so I needs more information..ha..ha (Informant 8).

Eeen yes enough anyway, so far has been able to meet the information ..., he..hee ... I think it was complete enough..(Informant 11)

He he, .. i have been able need the information.. and the information on leaflet is also more complete than MCH handbook if you tell me ..?(Informant 14)

The perception of most informants on the most complete information leaflet is a high-risk pregnancy, while others say their small leaflet of the most complete hemorrhage. This was disclosed by the informant and the informant 13 9:

"The most complete yes about obstetric complications / high-risk pregnancies have ya, ha..haa, because the purpose of this leaflet is also more common than others and there are pictures not support ..."(Informant 13)

This is the most of obstetric complications or high-risk pregnancy. The information is complete keep pictures also complete .. (Informant 9)

While informants 10 and 11 state that the most complete leaflet hemorrhage compared with the other leaflet. Here is a statement of informants:

Oh that's most complete ya ya bleeding because there is about the types, how to prevent and the picture are also good ..(Informant10)

"... The most complete ya that is hemorrhageg, ha..haa ... because most scared but the information is also complete and nice ..(Informant 11)

The results showed that most informants never had information about high-risk pregnancy include preeclampsia, pregnancy infection, but most of the informant has not been informed about the hemorrhage. information about high-risk pregnancies obtained from the midwife and doctor with media images, media leaflets, and without media information. The information needed for pregnant women associated with high-risk
pregnancies based on in-depth interviews with informants to prevent of complications pregnancy, childbirth preparation for mothers who are high-risk, high-risk pregnancy care, pregnancy nutrition, safe motherhood and newborn care.

Results of research Lampinen showed that pregnant women aged over 35 years is associated with the risk associated with certain pregnancy. Being “at risk” causing anxiety and worry, this encourages pregnant women to try to alleviate by getting information about high-risk pregnancy [6].

There were no differences in health behavior and anxiety among high-risk pregnant women. Results of research Kemp pointed out the need of information support to pregnant women to support their health practices during pregnancy. Health promotion is the main focus of meeting the needs of information, but there are limitations this study about the effectiveness of these interventions [7].

Results of research Stark showed that there is a link revenue with health promotion behaviors in pregnant women at high risk. Pregnant women with high incomes have the resources to support healthy behavior towards high-risk pregnancies, such as access to quality food, quality of housing, as the individual network support, as well as members in the health club. While in low-income pregnant mothers have risky behavior towards high-risk pregnancies, one of which is the lack of information about high-risk pregnancy [8].

Malakauti research shows inverse relationship between perceived stress and the promotion of health behaviors in pregnant women with preeclampsia. Program support and counseling with an increased emphasis on the promotion of health behaviors seems necessary to reduce stress [9].

The results showed that the media leaflet is the most desired by pregnant women to increase their knowledge about high-risk pregnancy because it may be the information provided can include pictures. The results of this study indicate that the leaflets of the high-risk pregnancy is the most complete information leaflet. Hemorrhage is information for the next to complete leaflet, because information on leaflet about pre eclampsia. The results showed a leaflet created to meet the needs of pregnant women information about high-risk pregnancy, hemorrhage and preeclampsia

Notaotmodjo states that media health promotion leaflets are simple and very inexpensive, people can adjust and learn independently, and users can see the contents during leisure.

Leaflet used to give a brief description of health problems. Leaflet provides the advantage that it can be stored for a long, unique materials may be printed with a given image or color that is appealing [10].

The results same with research Fitriany which states that health education about high-risk pregnancies effective in increasing knowledge of pregnant women in Riau. The results showed no significant difference between mean knowledge of mothers before and after health education about high-risk pregnancy [11].

Research Wright shows the leaflet was not able to increase participants' knowledge about things associated with pregnancy, but the results showed that young adult women's knowledge about health in pregnancy remains low. A question can be asked about the evidence base to inform the development of this leaflet. The importance of reducing the maternal mortality rate has mandated the development of health education materials information [12].

Voorst study showed that preconception care include early risk assessment and risk management and follow-up consultations to assess compliance with the management plan in pregnant women are able to make changes in behavior regarding folic acid supplement, stop smoking, cessation of alcohol consumption and the use of illicit substances [13].

Jepseon study showed that the most effective interventions in different health behaviors is the advice of a doctor or individual counseling, and workplace and school-based activities. mass media campaigns and legislative interventions also showed little effect in changing health behavior to moderate [14].

However, in research - studies on the effectiveness of the media leaflet to increase knowledge about health shows that the leaflet may change knowledge, attitudes and behaviors of public health. Sulisnadewi revealed in his research, that family health education can improve the ability of the mother in caring for children with diarrhea. Health education is the recommended media poster, leaflet or audiovisual for more effective and efficient [15].

Results Aprida research (2013) shows the health education about immunization against tetanus toxoid (TT) to enhance the knowledge about TT immunization of pregnant women [16]. Khoiron research results which states that the leaflets can change knowledge, attitudes, behaviors to early detection of cervical cancer in the Puskesmas Kartosuro [17].

Gani research results indicates that the media leaflet is more effective in increasing knowledge of HIV/AIDS compared to the poster. Media leaflet can improve knowledge, attitude and practice of HIV/AIDS prevention in students at the University of Jember [18]. Results Notoasiswa study showed that the VCDs and leaflets can be used as a medium of information to improve knowledge, attitude and behavior of the traffic accident prevention motorcycle at high school students in the city of Bekasi [19]. Kawuriansari study showed that leaflet effectively to improve knowledge score of dysmenorrhea in adolescent girls junior Christian 01 Banyumas [20]. Research Supardi (2002) states that the leaflets media influence the behavior of self-medication in accordance with the rules [21].
CONCLUSIONS

The results showed that the informants need information on high-risk pregnancies, especially information about obstetric complications, hemorrhage and preeclampsia. Media campaigns especially leaflet needed for pregnant women to understand about high-risk pregnancies. The results of media research information leaflet is able to increase the knowledge of pregnant women about the high-risk pregnancy. Suggestions from the research that is necessary for the development health promotion media to increase the knowledge of high-risk pregnancy to prevent obstetric complications in the district of Banyumas.

References
1. SDKI.. Survei Demografi dan Kesehatan Indonesia, Kementerian Kesehatan, Jakarta : 2012
3. DINKES BANYUMAS. Data Kesehatan Kabupaten Banyumas Tahun 2013, Kabupaten Banyumas : 2013
11. FITRIANI E, UTAMI S DAN RAHMALIA S. Efektivitas Pendidikan Kesehatan Tentang Kehamilan Risiko Tinggi terhadap Pengetahuan Ibu Hamil, JOM PSIK Vol 1 No 2 Oktober 2014, Universitas Riau
12. WRIGHT SC, BIYA TT, and CHOKWE ME. The Effectiveness of a Pregnancy Leaflet To Promote Health in Tshwane South Africa, Health SA Gensondheid, Journal of Interdisciplinary Health Sciences Vol 19 No 1, 2014
13. VOORST SFV, VAS AA and DENKTAS S. Effectiveness of General Preconception Care Accompanielf by a Recruitment Approach : Protocol of a Community Based Cohort Study, BMJ Open 2015.5 (3).
15. SULISNADEWI, KOMYANG NL. Efektivitas Pendidikan Kesehatan Keluarga Terhadap Peningkatan Kemampuan Ibu Dalam Merawat Anak Diare, Jurnal Skala Husada Volume 10 Nomor 1 April 2013.
19. NOTOSISWOYO, M. Penggunaan VCD dan Leaflet Untuk Peningkatan Pengetahuan, Sikap dan Perilaku Siswa dalam Pencegahan Kecelakaan Sepeda Motor, Jurnal Kesehatan Masyarakat Nasional vol 8 no 8 Mei 2014