

Development Of Learning Media For Cadres For Health Promotion Of Maternal Mothers In Health Centers Ratu Agung Bengkulu City In 2017

Sri Sumiati Jurusan Promosi Kesehatan Politeknik Kesehatan Kementerian Kesehatan Bengkulu Diah Eka Nugraheni Jurusan Kebidanan Politeknik Kesehatan Kementerian Kesehatan Bengkulu. Indonesia diah 1234@gmail.com

Abstract-The implementasi of healy program s in Indonesia is one of the six basic healt programs in in the Puskesmas. Based on some research results indicate that the activities have not been active and enthusiastic. from pregnant women to take classes for pregnant women is still low. Based on the explanation above, the researcher intends to create a new media to guide pregnant women assistance that can be used by cadres who can provide information to pregnant women to improve the quality of health of pregnant women, so it is expected to reduce maternal and infant mortality. This study uses the pre-research method, so the researcher divides this research into three stages: stage I captures information from health workers and the community about the desired media by discussing the focus group method. Stage II makes the press desired by the community in the form of a card called the Sri sriati score card abbreviated as KS3 and stage III tests the media in the community with the post-test only design.

The results of the study formed a scorecard for pregnant women consisting of five variable which can be used by cadres to inform pregnant women about their pregnancy.

Keywords: Learning media, Cadre, pregnant women

I. INTRODUCTION

The importance of promotive and preventive program activities in improving the health status of regional communities is the mandate of the law that should be implemented as well as possible. Law Number 17 of 2007, concerning RPJPN provides health development direction in 20 years as stated in the 2009 SKN, one of which is the Primary Health Care which organizes health promotion activities both through public health efforts and individual health efforts [1]. Achievement of the primary targets of health promotion needs to be carried out by some

Breakthroughs/ approaches, especially with community empowerment activities. For that, it requires support and community participation in the field of health promotion by providing health information.

through maternal and child health programs [2] MCH activities what has been done is through counseling for pregnant women, childbirth, postpartum and breastfeeding in the mother class with the use of maternal and child health books and mentoring programs for pregnant women[4],[5].

Based on Bascom's research results. 2011 with the title of a visit of pregnant women in the class of pregnant women, it was found that most of the respondentswere not present in the class of pregnant women while having good knowledge and having an excellent attitude [5]. The results of the research from Noviati Fuada, Budi Setyawati [6] stated that inadequate guidelines/flipchart classes for pregnant women and the determination of KIH implementation strategies. It based on a literature study and data verification (qualitative) at the community level needed changes both in terms of input, process/implementation of promotion and budget, and the successful implementation of Pregnant Women Classes are still many obstacles. Based on the results of a study of the implementation of a pregnant mother class organization that is weak but very likely the strategy recommendations are given change strategies. The point is that the application of KIH is advised to change the previous approach because the plan that has been running is feared to be challenging to capture the opportunities that exist while improving performance [7].

Based on a preliminary survey in several Bengkulu City Health Centers, officers said there was only one return sheet for the class of pregnant women and not taken out of the Puskesmas and only the midwives who used it, other officers had not used them. Pregnant women were given books for pregnant women that were difficult for mothers to understand. Above, the researcher intends to create a new media to guide the assistance of pregnant women that can be used by midwives, cadres, public health center promotion officers, and people who have the ability to provide information to pregnant women in order to improve the



health quality of pregnant women who aim to give birth to babies healthy. So that it is expected to reduce maternal and infant mortality and to improve the quality of the nation's generation. Research purposes: General purpose: The formation of new media that can

provide health promotion for pregnant women
Special use: Get information from health workers and
community media models desired. The existence of new
media that will be used by cadres to provide health
promotion to pregnant women

II. METHODS

Research Methods / METHODS This research is a pre-research study with a post-test only design, according to the research method, so the researcher divides this research into three stages of research, namely, Research phase I, Researchers collect various information through FGD to Ka. Health office, Head of Health Center, health promotion officer for a health center, KIA Puskesmas officer, cadre, and community to get input to develop promotion media that desires qualitative research design with a phenomenological approach. Research phase II, Creating promotional media that has been developed. The five variables of the question are:

Variable question (I) contains problems encountered by pregnant women with four questions

Variable questions (II) about checking visits with questions. Variable questions that should be avoided by pregnant women (III) 4 questions Variable information questions obtained by pregnant women (IV) with eight questions. Variable questions of risk factors for pregnant women (V) with 19 questions This health media will assist in conducting screening and providing health information that will be conveyed to pregnant women.

Establishment of a team of community officers (cadres) who are willing and able Research phase III, Quasi-experimental research with post test only design (at the end of the activity). Samples were selected as one group, namely a cadre group that received new media intervention. The intervention was carried out for three months and one month to obtain.

Information on the desired media form, two months for media trials with pre-test and post-test activities for cadres in filling out cards and to determine the development of the results of the intervention in the group. The variables in this study were cadres and media promotion for pregnant women with five groups of questions.

The population in this study were all cadres in the Ratu Agung Health Center, Muara Bangkahulu District, totaling 30 people. Cadres who have been selected as samples will be given intervention in the form of filling in the scorecard at the beginning and end of the activity to assist each pregnant woman.

III. RESULT

This univariate analysis was conducted to determine the average value at the time of the initial test (pretest) and the final test by cadres with the following results:

TABLE I.. AVERAGE PRETEST AND POSTTEST SCORE OF CADRES WHEN COMPLETING KS3 (SRI SUMIATI SCORE CARD) TO PREGNANT WOMEN AT RATU AGUNG HEALTH CENTER IN BENGKULU CITY IN 2017

N O.	Question variable on KS3 (Kartu Skor	SCORE							
	Sri Sumiati)	Posttest							
		N	%	Mean	N	%	Mean		
1.	Problem Variable (I)	30	%	95	3 0 3	%	100		
2.	Visit Check Variable (II) A variable that should be	30	%	85	0 3	%	100		
3.	avoided by	30	%	50	0	%	95,83		
4.	pregnant women (III) Information variable obtained by pregnant	30	%	95,23	3	%	100		
5.	women (IV) Variable risk factors for pregnant women	30	%	100	3	%	100		

The average score on the initial test (pretest) and post-test on the variable, The average value of the problem in pregnant women (I) pre-test 95, and at the end of the experiment (post-test), there was an average increase in the value to 100. The average score on the initial test

(pretest) on the visit examination variable (II) is 85, and at the end of the test (posttest), an average increase in value becomes 100. The average score on the initial test

(pretest) on the variable things that should be avoided by pregnant women (III) is 50 at the pretest, and at the end of the test (posttest), an average increase in value becomes 95.83. The average score on the initial test (pretest) on the information variable.



TABLE II DEVELOPMENT OF LEARNING MEDIA FOR CADRES FOR HEALTH PROMOTION FOR PREGNANT WOMEN AT RATU AGUNG HEALTH CENTER IN BENGKULU CITY IN 2017

variabel	N	Std. Deviatio n	T(df)	IK (95%)	P Valu e
Problem Variabel (I)	30	40,54	3.512(2 9)	-41,13 –	0,001
Visit Check Variabel (II)	30	19,96	9.085(2 9)	-40,57 - (-25,66)	0,000
A variable that should be avoid By pregnant women (III)	30	38,35	30.448 (29)	9,82-38,46	0,002
Information Variabel obtained by pregnan women (IV)	30	19,41	3.080(2 9)	-18,16 – (-3,66)	0,005
Variabel is factors wome	30	34,42	- 4.295(2 9)	-39,85 - (-14,14)	0,000

The results of statistical tests on the variable problem (I) are obtained by the development of learning media for cadres for health promotion of pregnant women at the Ratu Agung Health Center in Bengkulu City in 2017. Statistical test results on the visit examination variable (II) there is the development of learning media for cadres for health promotion of pregnant women at Ratu Agung Health Center in Bengkulu City in 2017. Statistical test results on variable things that should be avoided by pregnant women (III) there is the development of learning media for cadres for health promotion of pregnant women at the Ratu Agung Health Center in Bengkulu City in 2017.

Statistical test results on the information variable obtained by pregnant women (IV) is the development of learning media for cadres for health promotion of pregnant women at the Ratu Agung Health Center in Bengkulu City in 2017. Statistical test results on variable risk factors for pregnant women (IV) is the development of learning media for cadres for health promotion of pregnant women in the Ratu Agung Health Center in Bengkulu City in 2017.

IV. DISCUSSION

From the results of the research that has been done, it was found that this scorecard can be used by the community (cadres) in conducting screening of pregnant women who have not examined health workers.

Based on the results of the pretest of KS 3 card filling, there are several obstacles experienced by the community (cadres) in filling out the scorecards for

pregnant women such as uterine fundus height measurement, fetal presentation, DJJ measurement (fetal heart rate), laboratory examination, and several points regarding factors. risk of pregnant women, this motivates the community (cadres) to bring.

Pregnant women to the health center. From the results of the Forum Group Discussion (FGD) that has been carried out to cadres, cadres hope to get transport money to visit pregnant women who cannot come to the health center.

From the average results that have been obtained, there was an increase in the average value during the post-test in each category of questions from the scorecards of pregnant women that existed after the cadres were given socialization about how to fill in KS3 (Sri Sumiati Score Card) for pregnant women. It means that the cadres are good enough in conducting screening of pregnant women so that pregnant women want to do health checks to health services. The lowest average score of the five categories of questions on the scorecards of pregnant women was obtained in the third question variable which is the thing that should be avoided by pregnant women, with the average value obtained at the initial test (pretest) was 50%. The contents of the questions in the third category are:

After the socialization of how to fill the scorecard for pregnant women, all cadres were sufficiently aware in the socialization material that had been given. It was seen in the results of the average score at the end of the five questions, which of the five variables of the question get an average value above 50% so that they are grouped into good grades

The results of this study are by the theory that says (18) that in the framework of public health education as a consumer can also be involved in making teaching aids (educational aids). For this reason, health workers play a role in guiding and fostering, not only in terms of their health but also motivating them so that they pass on health information to other community members.

Based on the results and discussion in this study, the development of learning media for cadres for health promotion of pregnant women at Ratu Agung Health Center in Bengkulu City in 2017 can be summarized as follows:

invariable I problems in pregnant women, in variable (II) examination of visits in pregnant women, in variable III things that must be avoided by pregnant women, IV information obtained by pregnant women and risk factors for variable V pregnant women increased in average the score is 100 with good results.

In the variable development of media, on variable problems in pregnant women (I), on the variable visit examination (II), on the variable things that should be avoided by pregnant women (III) on the variable information obtained by pregnant women (IV), on



maternal risk factor variables pregnant (V) the development of health media for pregnant women.

V. CONCLUSION

It is expected that the use of this scorecard will be continued for all cadres of Puskesmas in the city of Bengkulu so that the coverage of pregnant women can increase and can reduce mortality rates in mothers and children during childbirth.

REFERENCES

- [1] Ai Nur Zannah. Pendekatan Resiko Kehamilan Kartu Skor Poedji Rochjati (KSPR) Dengan Pola Rujukan di RSUD dr. Soebandi Jember. Jounal.
- [2] Anonim. Media group Haluan Mencerdaskan Bangsa. HKN, sehat itu bukan biaya tapi investasi. www. harianhaluan.com. Diposkan tanggal 15 November 2011.
- [3] Ambarwati. E. R, Wulandari. D. 2010. *Asuhan kebidanan Nifas*. Yogyakarta: Nuha Medika
- [4] Antenatal Claas dalam optimalisasi kualitas ibu hamil di Bidan Praktek Mandiri Kasih Kelurahan suku Kecamatan sukun Kota Malang
- [5] Bascom. KTI. 2011. Hubungan Pengetahuan Ibu Hamil Terhadap Keikutsertaan dalam Kelas Ibu di Kelurahan Metro Wilayah Kerja Puskesmas Metro Kecamatan Metro Kota Metro Tahun 2011. Bidan Prad jurnal Ilmiah Kebidanan, Vol. 4 No.1 Edisi Desember 2013, hlm. 211-219
- [6] Budiyono, Jati S, Dan Musthofa S, 2010. Posisi Stakeholder Dan Strategi Advokasi Kibbla Kabupaten/Kota Di Jawa Tengah. Jurnal Manajemen Pelayanan Kesehatan. Volume 13, Nomor 03, September 2010 Halaman Semarang: Fakultas Kesehatan Masyarakat Universitas Diponegoro
- [7] DepartemenKesehatan.2003.KepmenkesRI Nomor1202/
- [8] Menkes/SK/VIII/2003, TentangIndikatorIndonesia sehat 2010 dan Pedoman Penetapan Indikator Provinsi dan Kabupaten/Kota Sehat. Jakarta.
- Brown RF, Buston PN Dunn Sm. Tatersal MH. Promoting Patien Participation and Shortening cancer concultation., a randomized trial. Brj Cancer. 2001., 85:1273/1279
- [10] Sugiarti,Oedoyo Soedirham,Imam S,Mochny.2012. Upaya PemberdayaanIbu Hamil Untuk Deteksi Dini Risiko Tinggi Kehamilan Trimerter Satu.
- [11] Departemen Kesehatan Republik Indonesia. 2009. Pedoman Umum manajemen Kelas Ibu: Kelas Ibu Hamil dan Kelas Ibu Balita. Jakarta: Depkes RI.
- [12] Departemen Kesehatan Republik Indonesia. 2009.
 Pegangan Fasilitator Kelas Ibu Hamil. Jakarta
- [13] Eka Yuni Indah Nurmala, Chatarina Galuh
- [14] Suryondari. 2012. Aplikasi Peer Eucation pada Kementerian Kesehatan. Jakarta
- [15] Gede Danu dkk, 2015. Deteksi Dini Risiko Ibu Hamil dengan Kartu Sko Poedji Rochjati dan Pencegahan Faktor Empat Terlambat, Majalah Obstetri Ginekologi Vol.23 No.1.Januari-April 2015
- [16] Pudjirahardjo, W.J.1995. Pengembangan model puskesmas perkotaan. Majalah Kesehatan Masyarakat Indone sia. Tahun XXIII, Nomor 11, 1995
- [17] Ristirini,Oktarina. 2013. Upaya Peningkatan Deteksi Dini Risiko
- [18] Tinggi Kehamilan Melalui Kelengkapan pengisian Buku KIA Oleh Bidan Di Kabupaten Bangkalan Jawa Timur Tahun 2013
- [19] Pusat Humaniora Kebijakan Kesehatan dan Pemberdayaan Masyarakat
- [20] Roter D, Hall J. Physician's interviewing.

- [21] Styles and medical information obtained from patients. J Gen int Med. 1987;2:325-329. Indonesian Journal of Public Health, Vol. 9. No. I, Juli 2012
- [22] Uswatun Chasanah, Ratifah. Hubungan PengetahuanIbu Hamil tentang kelas ibu hamil dengan Motivasi mengikuti kelas ibu hamil di Puskesmas 2 Mandiraja Kabupaten Banjarnegara