

Factors That Influence the Visits of The Fourth Trimester (K4) For Pregnancy at the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Timor-Leste, 2023

Eugenia Carvalho de Araújo, Ermelinda da Costa Monteiro, Etelvina Jose Soares Tilman, Natalia Pereira, Meriana Barreto, Lorena da Costa Soares

Department of Midwifery, National University of Timor Lorosa'e, Timor-Leste
aroujogina5@gmail.com, ermelindamonteiro30@gmail.com, etelsalsinha@gmail.com,
liapereirafraga@gmail.com, merianabarreto@gmail.com,
lorenadacostasoes@gmail.com

Article Information

Submitted: 01 March 2024

Accepted: 04 March 2024

Online Publish: 20 March 2024

Abstract

Introduction: The pregnancy is a natural process that occurs in women with reproductive age; for the pregnant to occur, it requires a process that meets the egg cell and spermatozoon when having sexual intercourse during ovulation. According to the Timor Leste Health Demographic Survey 2016, the maternal mortality rate is 218/100,000 live births. The Ministry of Health data showed that K1 and K4 visits reached 80 90%. The report from the Ministry of Health in 2022 revealed that the initial pregnant mother visits (K1) in the center reached 39,608 (79%), and K4 visits reached 26,567 (53%). The Soibada Health Center report in 2020 showed that the initial pregnant mother visits (K1) total of 1931 (71%) and K4 visits with a total of 1415 (52%). **Objective:** To determine the factors that influence the visits of the fourth trimester (K4) for pregnancy at the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Timor Leste in the year 2023. **Method:** This research used quantitative analytical methods with a cross sectional approach. The population for this research is the pregnancy who visit the Soibada Health Center, Soibada Administrative Post. **Result and Discussion:** The respondents for this research were 88, with the following results: 36 (40.9%) had a primary education level, 46 (52.3%) were aged <20 or >35, 54 (61.4%) did not work together, 48 (54.5%) were Mult pregnancy, 47 (53.4%) had less knowledge, and there were 52 (59.1%) irregular visits to the clinic. **Conclusion:** Based on this research, we conclude that factors such as education level, age, occupation, parity, and knowledge influence irregular visits to the clinic. Therefore, we urge health personnel to pay more attention to these factors, especially in terms of consulting standards for women's health.

Keywords: Irregular clinic visits (K4), Education level, Age, Occupation, Parity and Knowledge

How to Cite

DOI
e-ISSN/p-ISSN
Published by

Eugenia Carvalho de Araújo, Ermelinda da Costa Monteiro, Etelvina Jose Soares Tilman, Natalia Pereira, Meriana Barreto, Lorena da Costa Soares/Factors That Influence the Visits of The Fourth Trimester (K4) For Pregnancy at the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Timor-Leste, 2023, Vol. 3, No. 6, 2024
<https://doi.org/10.54543/kesans.v3i6.282>
2808-7178 / 2808-7380
Rifa'Isntitute

Introduction

The female reproductive system has a natural process that occurs for women of reproductive age; for two cells to meet, the ovum and sperm, during sexual intercourse at ovulation. Therefore, the reproductive system is essential and begins from conception to birth. Normal pregnancy lasts for around 280 days (40 weeks or 9 months). Pregnancy is divided into three trimesters: the first trimester is from 0 14 weeks, the second is from 14 28 weeks, and the third is from 28 42 weeks (Aspiani, 2017). Changes occur during pregnancy, such as physiological changes, which are not pathologies and require care to minimize interventions (Aspiani, 2017)

According to OMS, as quoted by Wahyuni (2020) at (Wirke, Afrika, & Anggraini, 2022), "Antenatal Care (ANC) is care that aims to detect risks for the mother during pregnancy to childbirth, in order to reduce maternal mortality rates and monitor the baby's condition. Ideally, pregnant women should have regular antenatal care consultations to detect abnormalities that may occur during pregnancy, in order to address them immediately, if needed, through antenatal care."

Based on Wahyuni's theory (2020) at (Suarayasa, 2020), pregnant women need to have the courage to seek medical care during pregnancy in health centers to detect risk factors that may arise, to avoid complications in both the mother and the child during childbirth. Therefore, this theory is crucial for reducing maternal and child mortality rates in Timor-Leste.

Based on global data from UNICEF (2016), it shows that pregnant women worldwide make at least one visit to ANC with a health personnel during their pregnancy with 86%. Pregnant women who receive minimum ANC checkups at least once during their pregnancy with 62%, of which five mothers, three make at least one visit for antenatal care. From this, UNICEF notes that the global estimate shows that only half of all pregnant women receive adequate antenatal care following the recommended program.

According to the World Health Organization (2019), the global maternal mortality rate is 303,000 and the maternal mortality rate in ASEAN is 235/100,000 live births. Maternal death due to complications during childbirth and after childbirth serves as an indicator of maternal health (ASEAN Secretariat, 2020). Antenatal care is care given to pregnant women before giving birth, which is very useful in facilitating healthy and positive outcomes for mothers and their babies. This care establishes a relationship of confidence with the mother, detects complications that pose a risk to health, prepares for childbirth, and provides health education (Gusmadewi, Dielsa, & Reflianto, 2022)

Pregnant women who undergo the fourth visit (K4) need to contact health personnel with a frequency of at least four times or follow the obstetrician's standard, starting from the first trimester with one visit (1) from months 0 3, the second trimester with one consultation (1) in months 4 6, and the third trimester with two consultations (2) or more from months 7 9 and complete the 7T (Tetanus Toxoid, Blood Pressure Test, Fundus Uterine Height Measurement, TT Immunization, Ferrous Sulphate, Laboratory Test, and Counseling) (Sari, 2018)

In the Demographic and Health Survey Timor Leste 2016, the maternal mortality rate is 218/100,000 live births. The Health Ministry's card for K1 and K4 shows achievement of 80 90%. A report from the Ministry of Health's Statistics in 2022 shows that 39,608 (79.0%) made their first visit (K1) for antenatal care and 26,567 (53.0%) underwent the fourth visit (K4).

Based on the Ministry of Health's targets for the first and fourth antenatal care visits, with a target of 80% and 70%, respectively, the reality at the Soibada Health Center showed that the first visit (K1) was at 71% and the fourth visit (K4) was at 52%. This means that the number of achieved visits did not reach the Ministry of Health's target. Data from the Soibada Health Center from January to December 2020 showed a total of 2,735 pregnant women, with 1,931 (71%) completing the first visit and 1,415 (52%) completing the fourth visit. Looking at the geography of the Soibada Health Center, communities with less knowledge and priority for antenatal care visits during pregnancy contribute to the shortfall.

It is believed that through further research, it can be recalled that during pregnancy, antenatal care visits are necessary to detect complications and reduce maternal and neonatal mortality rates in Timor Leste. The Antenatal Care standards, which include a minimum of 7 tests such as physical exams, blood pressure, height measurement of the uterus, tetanus immunization, iron sulphate supplementation, laboratory tests, and counseling, were implemented in the health service.

Method

This research methodology used a quantitative analytical method with a cross sectional approach. The population for the research is pregnant women who completed the fourth antenatal visit at the Soibada Health Center in the Soibada Administrative Post of Manatuto municipality, Timor-Leste in 2023. The sampling technique used was non probability accidental sampling with 88 respondents as a representative sample

Result and Discussion

Result

Table 1

Distribution of characteristics of two female bodies who visited the Soibada Health Center Soibada Administrative Post, Municipality of Manatuto, Timor-Leste in the year 2023.

Characteristics	Frequency	Percentage (%)
Education level		
Illiterate	11	12,5%
Primary education	39	40.9
Pre-Secondary and secondary	32	36.4
Bachelor's degree	9	10.2
Age group		
Age <20 and >35	42	47.7
Age 20-35	46	52.3
Occupation		
Unemployed	54	61.4
Employed	34	38.6
Parity		
Mult pregnancy	48	54.5
Prim pregnancy	40	45.5
(K4) visits		
Irregular	52	59.1
Regular	36	40.9
Knowledge level		
Less	47	53.4
Good	41	46.6

Table 2

Factors that influence non-attendance visits (K4) during pregnancy at the Soibada Health Centre, Soibada Administrative Post, Manatuto Municipality, Timor-Leste in 2023

Variable	Attendance Visit (K4)						P-Value
	Regular attendance visits		irregular non-attendance visits		Total		
	F	%	F	%	F	%	
Education level							0.001
• Iliterate	2	2,3	9	10,2	11	12,5	
• Primáry	8	9,1	28	31,8	36	40,9	
• Pre-Secondáry and							
• Secundáry	20	22,7	12	13,6	32	36,4	
• bachelor's degree	6	6,8	3	3,4	9	10.2	
Age group							
• <20 and >35	8	9,1	34	38,6	42	47,7	0.000
• 20-35	28	31,8	18	20,5	46	52,3	
Occupation							
• Unemployed	33	37,5	21	23,9	54	61,4	0.000
• Employed	3	3,4	31	35,2	34	38,6	
Pregnancy							
• Multiparous	9	10,2	39	44,3	48	54,5	0.000
• Primiparous	27	30,7	13	14,8	40	45,5	
Knowledge level							
• Less	2	2,3	45	51,1	47	53,4	0.000
• Good	34	38,6	7	8,0	41	46,6	

Based on the table above, it shows that the proportion of pregnancy with primary education level, who had irregular nonattendance visits (31.8%) was larger when compared to those with presecondary and secondary education levels (13.6%), those who were illiterate (10.2%), and those with a bachelor's degree (3.4%). The proportion of pregnancy with pre secondary and secondary education levels, who had regular nonattendance visits (22.7%), was larger than those with primary education level (9.1%), those with a bachelor's degree (6.8%), and those who were illiterate (2.3%).

The result of the Chi Square test shows that there is an influence between the education level of the female body and nonattendance visits for pregnancy checkups (P-Value: 0.001).

The proportion of mother with higher age who had irregular nonattendance visits (38.6%) was greater. Comparing with pregnancy who are not old, those who do not regularly visit antenatal care have a higher risk (20.5%). The proportion of mothers who are not old and do not regularly visit antenatal care (31.8%) have a higher risk compared to those who do. The Chi Square test result indicates an influence between the age of the pregnancy and regular antenatal care visits (P_Value: 0.000).

Mothers who have occupation have a higher percentage (35.2%) of not regularly visiting antenatal care compared to those who do not have jobs (23.9%).

The proportion of mothers with occupation who regularly visit antenatal care (37.5%) has a higher percentage than those who do not have jobs (3.4%). The Chi Square test result indicates an influence between the occupation of the mother and regular antenatal care visits (P_Value: 0.000). Mothers who are multiparous have a higher percentage (44.3%) of not regularly visiting antenatal care compared to those who are primiparous (14.8%). The proportion of primiparous mothers who regularly visit antenatal care (30.7%) is higher than those who are multiparous (10.2%). The Chi Square test result indicates an influence between the parity of the mother and regular antenatal care visits (P_Value: 0.000).

Mothers who have less knowledge have a higher percentage (51.1%) of not regularly visiting antenatal care compared to those who have good knowledge (8.0%). The proportion of mothers with good knowledge who regularly visit antenatal care (38.6%) is higher than those who have less knowledge (2.3%). The Chi Square test result indicates an influence between the knowledge of the mother and regular antenatal care visits (P-Value: 0.000)

Discussion

The research results from the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Timor-Leste in 2023 on factors that influence irregular visits (K4) during pregnancy.

Based on Table 2, it shows that the proportion of women with primary education and irregular visits (31.8%) is significantly higher compared to those with pre secondary and secondary education (13.6%), illiteracy (10.2%), and bachelor's degree (3.4%).

Among women with regular visits, the proportion of those with pre secondary and secondary education (22.7%) is higher than those with primary education and regular visits (9.1%), those with a bachelor's degree (6.8%), and illiteracy (2.3%). According to Notoadmodjo (2015), if the P Value is smaller than 0.05, it means there is a significant influence between the independent and dependent variables.

Thus, the research results show a significant influence of the mother's education level on irregular visits. Based on this, it also follows the theory by Notoadmodjo (2018) that lower education levels make it easier to find solutions to health problems and complete regular visits compared to women with at least a minimum education level.

The proportion of women with age (<20 to >35) or at higher risk of irregular visits (38.6%) is significantly higher compared to women with age (20 35) or not at risk (20.5%). Among women with regular visits, the proportion of those with age (20 35) or

not at risk (31.8%) is higher than those with age (<20 to >35) or at risk (9.1%). According to Notoadmodjo (2015), if the P Value is smaller than 0.05, it means there is a significant influence between the independent and dependent variables. Thus, the research results.

This demonstrates that there is significant influence from the Occupation of the mother for antenatal visits. This is based on the theory of Sari & Efendy (2017), which states that Occupation is something very important and must be a priority for ourselves because it has a relation to the income that can be used for daily necessities. Mothers who work will not have enough time to control their pregnancy and will spend too much time at work. However, mothers who do not work will have more time to control their pregnancy.

Conclusion

Based on the research results conducted on "Factors that influence antenatal visits for pregnant mothers at the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Year 2023", it shows that the factors that influence antenatal visits during pregnancy at the Soibada Health Center, Soibada Administrative Post, Manatuto Municipality, Year 2023 are: mother's education level (P_Value = 0.001), age (P_Value = 0.000), occupation (P_Value = 0.000), parity (P_Value = 0.000), and knowledge (P_Value = 0.000).

Reference

- Aspiani, R. Y. (2017). Buku Ajar Asuhan Keperawatan Maternitas. *Jakarta: Trans Info Media*.
- Gusmadewi, G., Dielsa, M. F., & Reflianto, R. (2022). Pengaruh Antenatal Care, Tingkat Kecemasan, Kehamilan Beresiko Dan Jenis Persalinan Terhadap Kesiapan Fisiologis Persalinan. *Jurnal Kesehatan Masyarakat*, 8(1), 34.
- Kurniasih, N. I. D., Marwati, T. A., & Makiyah, S. N. (2020). Evaluasi Penerapan Standar Layanan 10t Antenatal Care (Anc). *Jurnal Riset Kesehatan Poltekkes Depkes Bandung*, 12(2), 429-444.
- Liana. (2019, Desember 11). *Kunjungan Pemeriksaan Antenatal Care (ANC) Dan Faktor Yang Mempengaruhinya*. Retrieved from [www.google chrome.com: https://id.scribd.com/document/599754843/Kunjungan-Pemeriksaan-Antenatal-Care-ANC-Faktor-yang-Mempengaruhinya-1](https://id.scribd.com/document/599754843/Kunjungan-Pemeriksaan-Antenatal-Care-ANC-Faktor-yang-Mempengaruhinya-1)
- Aspiani, R. Y. (2017). Buku Ajar Asuhan Keperawatan Maternitas. *Jakarta: Trans Info Media*.
- Gusmadewi, G., Dielsa, M. F., & Reflianto, R. (2022). Pengaruh Antenatal Care, Tingkat Kecemasan, Kehamilan Beresiko Dan Jenis Persalinan Terhadap Kesiapan Fisiologis Persalinan. *Jurnal Kesehatan Masyarakat*, 8(1), 34.
- Sari, E. (2018). HUBUNGAN PENGETAHUAN IBU HAMIL TENTANG KUNJUNGAN ANTENATAL CARE (ANC) DENGAN KEPATUHAN IBU MEMERIKSAKAN KEHAMILAN DI KLINIK HJ. MERA MEDAN TAHUN 2018. Institut Kesehatan Helvetia Medan.
- Suarayasa, K. (2020). *Strategi menurunkan angka kematian ibu (AKI) di Indonesia*. Deepublish.
- Wirke, N., Afrika, E., & Anggraini, H. (2022). Hubungan Kunjungan ANC, Kepatuhan Konsumsi Tablet FE dan Status Gizi dengan Kejadian Anemia pada Ibu Hamil Trimester III di Puskesmas Kutaraya Kecamatan Kota Kayuagung Kabupaten Ogan Komering Ilir. *Jurnal Ilmiah Universitas Batanghari Jambi*, 22(2), 798–802.
- Mursalim, L. (2018). *Faktor-faktor yang Mempengaruhi Kunjungan K4 Ibu Hamil di Puskesmas Malimongan Baru Kota Makassar Tahun 2018* (Doctoral dissertation, Universitas Islam Negeri Alauddin Makassar).
- Notoamodjo, S. (2014). *Metodologi Penelitian Kesehatan*. Jakarta: Rineka Cipta.
- Oktalia, S. N. (2018). Faktor-Faktor Yang Mempengaruhi K4 Pada Ibu Hamil *Trimester 3* Di Wilayah Kerja Puskesmas Tamansari Kecamatan Bandung Wetan Tahun 2018.
- Prabawani, A. (2021). *Karakteristik Ibu Hamil Dan Kepatuhan Anc Selama Pandemi Covid-19 Di Puskesmas Minggir Sleman Tahun 2021* (Doctoral dissertation, Poltekkes Kemenkes Yogyakarta).
- Rartri, M. V. Y. (2022). *Gambaran Penerapan 10t Berdasarkan Kelengkapan Buku KIA Di Puskesmas Tejakula I Kabupaten Buleleng* (Doctoral dissertation, Poltekkes Kemenkes Denpasar Jurusan Kebidanan 2022).

- Riberu, F. D., & Lebuan, A. (2020). *Faktor-Faktor Yang Berhubungan Dengan Kelengkapan Pemeriksaan Ibu Hamil (Antenatal Care) Di Puskesmas Kota Ende* (Analisis Rekam Medis Tahun 2017). *Jurnal Kesehatan Saelmakers Perdana*, 3(1), 42-48.
- Sari, S. P. (2021). Faktor yang Mempengaruhi K4 Antenatalcare Pada Ibu Hamil di BPM Warsida Pada Tahun 2020. *Journal of Excellent Health*, 1(1), 9-17.
- Septianingtyas, M., Sanjaya, R., Sagita, Y. D., & Utami, I. T. (2021). Faktor-Faktor Yang Mempengaruhi Kunjungan K4 Di Wilayah Puskesmas Pugung Tampak Krui Kabupaten Pesisir Barat Tahun 2020. *Jurnal Maternitas Aisyah (JAMAN AISYAH)*, 2(3), 181-188.
- Soleha, M., & Sinta, D. (2018). Faktor-Faktor Yang Mempengaruhi Kunjungan K4 Di Bpm Mitra Ananda Palembang Tahun 2018. *Jurnal Kesehatan Abdurahman*, 7(2), 17-24.
- Timor Leste, Períodu Janeiru-Dezembro (2016). *Relatóriu Estatística Saúde*, Retrieved Desember 07, 2022, from <https://patform.who.int/docs/default-source/mca-documents/policy-documents/report/tls-cc-62-02-report-2016-tet-rel-anual-jan-dezembro-2016>.
- Unicef, (2021). *Maternal mortality declined by 38 per cent between 2000 and 2017*, (Internet) <https://data.unicef.org/topic/maternal-health/maternal-mortality/>. Asesuiha 21/09/2022
- Yuliani, D. R., Saragih, E., Astuti, A., Ani, W. M., & Muyassaroh, Y. (2021). *Asuhan Kehamilan*. Indonézia: Yayasan Kita Menulis.
- Zuchro, F., Zaman, C., Suryanti, D., Sartika, T., & Astuti, P. (2022). Analisis Antenatal Care (Anc) Pada Ibu Hamil. *Jurnal'Aisyyah Medika*, 7(1).

Copyright holder:

Eugenia Carvalho de Araújo, Ermelinda da Costa Monteiro, Etelvina Jose Soares Tilman, Natalia Pereira, Meriana Barreto, Lorena da Costa Soares (2024)

First publication right:

KESANS: International Journal Health and Science

This work is licensed under a [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/)

