

Overview of Midwives' Performance in Providing Antenatal Care (ANC) Services at Cipedes Public Health Center, Bandung Regency

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Abstract

Introduction: The performance of midwives in providing Antenatal Care (ANC) services plays a critical role in improving maternal and neonatal health. ANC services must be delivered according to established standards to ensure quality outcomes.

Objective: This study aimed to assess the performance of midwives in ANC services at Health Centres across Bandung Regency, focusing on five key components: service quality, communication, capability, speed, and initiative.

Method: This study employed a descriptive quantitative research design. The research was conducted in Health Centres across Bandung Regency, with a total sample of 30 midwives selected using total sampling. Data were analyzed descriptively to determine performance levels across the components.

Results and Discussion: The findings showed that most midwives demonstrated good performance. Specifically, 90% showed good performance in the service quality component, 66.7% in communication, 53.3% in capability, 63.3% in speed, and 53.3% in initiative. These results indicate that while the overall performance is satisfactory, improvements are still needed in several areas, particularly in capability and initiative.

Conclusion: The performance of midwives in ANC services across Bandung Regency is generally good. However, enhancing ANC classes for pregnant women and utilizing online platforms for maternal health monitoring are recommended to further improve service delivery and maternal outcomes.

Keyword: Performance of Midwives; Dimensions of Performance of Midwives; Service ANC;

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Introduction

The maternal mortality rate (MMR) is a crucial indicator of a country's healthcare quality, particularly maternal and child health services. According to the World Health Organization (Organization, 2018), an estimated 830 women die every day from complications related to pregnancy and childbirth. The reduction of maternal mortality is one of the key targets of the Sustainable Development Goals (SDGs) 2030, which aim to reduce MMR to 70 per 100,000 live births (Rufaridah, 2019). Globally, MMR has decreased from 380 per 100,000 live births in 1990 to 216 per 100,000 in 2015 across 183 countries (Organization, 2019).

In developing countries, the five leading causes of maternal death are hemorrhage, sepsis, pre-eclampsia/eclampsia, unsafe abortion, and prolonged labor. Maternal deaths often occur due to both direct causes, such as obstetric complications, and indirect causes, such as chronic diseases aggravated during pregnancy, including malaria and anemia (Annisa, 2011). According to the Demographic and Health Survey in Indonesia, the MMR is 195 per 100,000 live births, while the infant mortality rate is 30 per 1,000 live births. Approximately 33%–50% of maternal deaths are associated with low antenatal care (ANC) visit rates during pregnancy.

Maternal mortality is also associated with the "three delays" (3T): delayed recognition of danger signs, delayed referral, and delayed access to optimal healthcare services (Sumarni & Anasari, 2014). One of the key strategies to reduce maternal morbidity and mortality is ensuring access to high-quality maternal healthcare services, as outlined in the Standar Pelayanan Kebidanan (SPK) or Midwifery Service Standards (Kemenkes, 2022). ANC services, in particular, are essential for monitoring maternal health, identifying high-risk pregnancies, managing pregnancy-related complications, and preparing mothers for safe delivery and postpartum care (Pattipeilohy, 2017; Saifuddin, 2014).

The standard ANC protocol requires a minimum number of visits in each trimester to detect potential risks early. The Indonesian Ministry of Health recommends at least one visit in the first trimester, one in the second trimester, and two in the third trimester. ANC quality is measured using coverage indicators: K1 (the first ANC visit) and K4 (four or more visits). High-quality ANC services are expected to meet the government's "10 T" standards, which include weight and height measurement, blood pressure monitoring, uterine fundal height measurement, fetal heart rate monitoring, tetanus immunization, iron supplementation, basic laboratory tests, complication management, and health education.

Midwives play a crucial role in providing maternal healthcare services, including ANC. Their performance is directly related to improving maternal and infant health outcomes. Professional competence, supported by education and training, is fundamental for midwives to deliver high-quality ANC services (Batbuall, 2019; Sarasati, 2016). However, previous studies indicate a significant decrease in ANC visit rates, including K1 and K4, in several regions in Indonesia, which raises concerns about the quality of ANC services (Saputri, Dewi, & Yuliana, 2020).

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Preliminary observations conducted at Cipedes Public Health Center, Bandung Regency, revealed that ANC coverage was relatively high for K1 (106%) but low for K4 (60%). Interviews with eight midwives indicated that during the COVID-19 pandemic, home visits were rarely conducted for pregnant women who did not attend health facilities. Considering the crucial role of midwives in providing high-quality ANC services, it is important to evaluate their performance. Therefore, this study aims to describe the performance of midwives in providing ANC services at Cipedes Public Health Center, Bandung Regency.

Methods

This was a descriptive quantitative study conducted at Cipedes Public Health Center, Bandung Regency, in February 2024. The population consisted of all midwives working within the health center's service area, totaling 30 respondents, who were selected using a total sampling technique.

The study measured midwives' performance in antenatal care (ANC) based on five components: service quality, communication, capability, speed, and initiative. Data were collected using a structured questionnaire with closed-ended questions that had been tested for validity and reliability. The validity test showed 25 valid items ($r\text{-count} > r\text{-table} = 0.4438$), and reliability testing yielded a Cronbach's Alpha of 0.985, indicating high reliability.

Data were processed through editing, coding, scoring, and tabulation, followed by univariate analysis to describe the frequency and percentage of each variable. The results are presented in tables.

Results and Discussion

Result

Characteristics of Respondents

The study involved 30 midwives working at Cipedes Public Health Center, Bandung Regency.

Age

The majority of respondents were aged 31–40 years (36.7%), followed by those aged 21–30 years (33.3%), 41–50 years (23.3%), and only 6.7% were aged 51–60 years. This indicates that most midwives are in their productive working age, which is an important factor for optimal work performance.

Educational Background

Most respondents had a Diploma III in Midwifery (60%), followed by Diploma I (16.7%), Bachelor's degree (16.7%), and Diploma IV (6.7%). The high proportion of Diploma III graduates reflects the standard educational level required for midwives in Indonesia.

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Work Experience

The majority of midwives had 1–10 years of work experience (70%), while 16.7% had 11–20 years, and 13.3% had 20–30 years of experience. This suggests that most respondents are relatively young professionals who may still be developing their clinical experience.

Availability and Understanding of ANC Guidelines

All respondents (100%) reported that Standard Operating Procedures (SOPs) or guidelines for ANC services were available at the health center. Additionally, 93.3% of midwives had attended SOP socialization sessions, and the same proportion (93.3%) reported understanding the guidelines. However, 6.7% of midwives had not participated in SOP socialization and were less familiar with the guidelines.

Midwives' Performance in ANC Services

Overall performance assessment showed that 56.7% of midwives demonstrated good performance, while 43.3% had less optimal performance. Performance was further analyzed based on five components:

- 1) Service Quality: The majority (90%) achieved good performance, while 10% were categorized as poor.
- 2) Communication: 66.7% showed good communication performance, while 33.3% had less optimal communication.
- 3) Capability: 53.3% had good capability, while 46.7% were categorized as poor.
- 4) Promptness (Speed): 63.3% demonstrated good promptness in service delivery, while 36.7% did not meet expected timeliness.
- 5) Initiative: 53.3% demonstrated good initiative, while 46.7% showed less initiative.

These findings are summarized in Table 1.

Table 1

Midwives' Performance in ANC Services at Cipedes Public Health Center

Component	Good (%)	Poor (%)
Overall performance	56.7	43.3
Service Quality	90.0	10.0
Communication	66.7	33.3
Capability	53.3	46.7
Promptness	63.3	36.7

The highest performance was in service quality, whereas the lowest was in capability and initiative components.

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Discussion

The results of this study indicate that the overall performance of midwives in providing antenatal care (ANC) services at Cipedes Public Health Center, Bandung Regency, was generally good (56.7%), although a considerable proportion (43.3%) demonstrated less optimal performance. The findings highlight several important aspects of midwives' performance, which are discussed in detail below.

Overall Performance of Midwives in ANC Services

The proportion of midwives with good performance (56.7%) suggests that the majority are capable of adhering to ANC service standards as outlined in national midwifery guidelines. According to (Wibowo, 2016), work performance in healthcare is influenced by both internal factors such as motivation, competence, and individual commitment and external factors such as leadership, work environment, availability of facilities, and reward systems. In this study, the availability of ANC Standard Operating Procedures (SOPs), as reported by 100% of respondents, and the high level of SOP understanding (93.3%) likely contributed to the generally good performance. However, the 43.3% of midwives with less optimal performance may reflect challenges such as limited clinical experience or insufficient professional development opportunities, particularly since the majority (70%) had less than 10 years of work experience.

Service Quality

The highest-performing component was service quality, with 90% of respondents categorized as good. This finding demonstrates that midwives at Cipedes Public Health Center generally provide ANC services that meet professional standards. According to (Michel, 2014), service quality refers to the ability to provide services that satisfy patients' needs and expectations. The high performance in this component aligns with the findings of (Nisa, 2019), who reported that adherence to standard midwifery care protocols directly correlates with improved maternal health outcomes. The availability of ANC guidelines and regular SOP socialization sessions (93.3%) may have reinforced midwives' adherence to service quality standards.

Communication

Communication performance was categorized as good in 66.7% of midwives, indicating that most are able to establish effective interactions with pregnant women during ANC services. Effective communication is essential for building trust, encouraging compliance with health recommendations, and improving maternal satisfaction. According to (Wibowo, 2016), good interpersonal communication is a critical determinant of health workers' performance. However, the fact that 33.3% of respondents scored poorly suggests that some midwives may need further training in patient-centered communication strategies, particularly in delivering health education and counseling during ANC visits.

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Capability and Initiative

The lowest-performing components were capability (53.3%) and initiative (53.3%). Capability reflects midwives' ability to apply clinical knowledge and skills to provide appropriate ANC interventions, while initiative refers to proactive behavior in addressing potential complications and improving service delivery. The relatively low performance in these components may be associated with the high proportion of midwives with less than 10 years of work experience (70%), indicating limited exposure to complex obstetric cases. Nisa (2019) emphasizes that clinical capability and proactive initiative are strongly influenced by ongoing training, supervision, and organizational support. Therefore, continuous professional development programs and mentorship are necessary to enhance midwives' clinical decision-making skills and encourage innovative approaches to ANC services.

Promptness (Speed)

The promptness component was categorized as good in 63.3% of respondents, indicating that most midwives deliver ANC services in a timely manner, which is crucial for patient satisfaction and service efficiency. According to (Michel, 2014), promptness is an important indicator of service quality as it reflects responsiveness to patients' needs. However, the remaining 36.7% of midwives who were less prompt in service delivery may face workload-related challenges or resource limitations that hinder efficient ANC service provision.

Implications

The findings of this study suggest that while the overall performance of midwives in providing ANC services is generally satisfactory, targeted interventions are needed to improve clinical capability and proactive initiative. Regular training, supportive supervision, and performance-based incentives are recommended to enhance midwives' motivation and competence. Improving these aspects is expected to contribute significantly to reducing maternal morbidity and mortality, consistent with the goals of the Sustainable Development Goals (SDGs) 2030 to improve maternal health outcomes.

Conclusion

The study demonstrated that more than half of the midwives at Cipedes Public Health Center showed good performance in providing antenatal care (ANC) services, particularly in service quality (90%) and communication (66.7%). However, capability (53.3%) and initiative (53.3%) were the lowest-performing components, indicating the need for targeted interventions to enhance clinical competence and proactive behavior. Strengthening training, supervision, and the use of digital platforms to monitor pregnant women are recommended to improve maternal health outcomes.

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