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THE ROLE OF PUBLIC HEALTH WORKERS AS A FACILITATOR IN PREVENTING OF MATERNAL DEATH IN GOWA DISTRICT

Yusriani^{1a}, Muhammad Khidri Alwi², Yuni Romalita³, Serawati Dewi⁴

¹Faculty of Public Health, Universitas Muslim Indonesia, and Post-Graduate Students, Master of Health Study Program Universitas Muslim Indonesia, Makassar, Indonesia

² Faculty of Public Health, Universitas Muslim Indonesia, Makassar, Indonesia

^a Corresponding author: yusriani.yusriani@umi.ac.id

ABSTRACT

Efforts to reduce maternal mortality have been carried out, but the results achieved have not been satisfactory, so that a more in-depth study of problems is needed in the implementation of work programs. This study aims to explore in depth the role of public health officers (Bachelor of Public Health and Midwives), as a facilitator in preventing maternal deaths in Gowa Regency. The type of research was qualitative with descriptive explanatory approach. The number of informants was 33 people, consisting of ordinary informants namely 9 public health officers, key informants namely the head of the health center (1 person), and supporting informants namely cadres (5 people), village officials (3 people), community social organizations (2 people), mother (15 people) and husband as many as 3 people. The selection of informants with Purposive sampling technique is willing to be interviewed, not suffering from disease, knowing the research content. Methods of gathering information by means of Focus Group Discussion (FGD) with pregnant women, in-depth interviews, observations, and documentation of all informants. Data analysis is domain analysis, and taxonomy through three paths, namely data reduction, data display and conclusion drawing / verification. The results showed that the role of community health workers as facilitators was adequate, health workers were able to carry out their role in facilitating pregnant women to get health services such as facilitating pregnant women to obtain antenatal care, clarifying good food during pregnancy, preparation for childbirth and health of child development.

Keywords: Health workers, Community, Maternal Death, Facilitator, Role.

INTRODUCTION

Sustainable Development Goals (SDGs) is a sustainable development effort that becomes a reference in the framework of development and negotiation in countries in the world as a substitute for the global development of the Millennium Development Goals (MDGs) which ended in 2015. SDGs have several objectives, including ensuring a healthy life and encourage prosperity for all people of all ages, with one of its outputs reducing the Maternal Mortality Rate (MMR) to 70 per 100,000 live births (KH) in 2030. Outputini is certainly intriguing compared to the 2015 MDGs target of reducing MMR to 102 per 100,000 KH in the period 1990-2015. Therefore various efforts must continue and be implemented (BKKBN, 2012; Riskesdas, 2013). Four too and three late which are the causes of the high maternal mortality rate in Indonesia is a shared responsibility, so the need for the role of public health personnel in improving community empowerment has faded in the community, optimization Posyandu activities in increasing knowledge, being responsive in making decisions, and facilitating access to health services (Yusriani, 2018). Maternal and Child Health (KIA) continues to be in the spotlight in the world. The maternal and child mortality rate as an indicator of the success of KIA achievement has been reported to have decreased each year. But the fact is that in Indonesia alone it has not been able

to reach the MDGs target in 2015. Therefore, various efforts have been made by the government by utilizing the role of the community either through family or health cadres. Through the General Guidelines for a Healthy Indonesia Program with a Family Approach and also a Guide to Health Promotion for Officers at the Puskesmas issued by the Indonesian Ministry of Health, it is expected that KIA-related targets can be achieved.

Maternal and Child Health (KIA) continues to be in the spotlight in the world. The maternal and child mortality rate as an indicator of the success of KIA achievement has been reported to have decreased each year. But the fact is that in Indonesia alone it has not been able to reach the MDGs target in 2015. Therefore, various efforts have been made by the government by utilizing the role of the community either through family or health cadres. Through the General Guidelines for a Healthy Indonesia Program with a Family Approach and also Guidelines for Health Promotion for Officers in Puskesmas issued by the Indonesian Ministry of Health, it is expected that MCH related targets can be achieved. Information on maternal mortality will be very useful for the development of maternal health improvement programs, especially safe pregnancy and delivery services, programs to increase the number of deliveries assisted by health workers, management of referral

systems in handling pregnancy complications, family preparation until the husband is ready to meet birth, which in turn is an effort to reduce maternal mortality and improve reproductive health (Aryoso, 2013; Aulia, 2014).

The maternal mortality rate is the result of so many factors. Education problems, limited access, economic status, socio-cultural community are factors that have an indirect influence so that there are still millions of Indonesian women at risk of complications of pregnancy and childbirth due to ignorance of the public about the danger signs of pregnancy/childbirth

Professionally community health workers in carrying out their duties in the field have a role to reduce maternal mortality. The Bachelor of Public Health is the frontline in helping facilitate the detection of possible risks, encouraging family planning programs, facilitating pregnant women to carry out focused antenatal care, prevention of unsafe abortion, delivery assistance by skilled personnel, early referral in timely obstetric emergency cases and adequate immediate relief. obstetric emergency case at the referral hospital. As a public health worker who prioritizes preventive aspects in carrying out his duties, he is required to play a skilled Bachelor of Public Health role before, during and after labor, so as to reduce maternal mortality.

Conflict of Interest

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Ethical clearance

The study was approved by the institutional ethical board of the Universitas Muslim Indonesia.

MATERIAL AND METHOD

The type of research used was qualitative with an explanatory descriptive approach to obtain broad clarity about the development of the role of public health officers in preventing maternal deaths.⁹ The number of informants was 33 people, consisting of ordinary informants namely 9 health staff, key informants namely head of the puskesmas (1 person), and supporting informants namely cadres (5 people), village officials (3 people), community social organizations (2 people),

mothers (15 people) and husbands as many as 3 people. The selection of informants with Purposive sampling technique is willing to be interviewed, not suffering from disease, knowing the research content.

Methods of gathering information by means of Focus Group Discussion (FGD) with pregnant women, in-depth interviews, observations, and documentation of all informants. Data analysis begins with domain analysis namely before entering the field, analysis is carried out on data from preliminary studies or secondary data, which will be used to determine the focus of research, and taxonomic analysis is carried out after field activities that begin by collecting data to be classified or classified and analyzed through three lines, namely data reduction, data display and conclusion drawing/verification (Notoatmodjo, 2010).

RESULT AND DISCUSSION

Interviews conducted in Gowa District with different responses regarding how health workers facilitated the community and what facilities were provided as facilitators, some informants said that many health workers are ready to serve, the service is good, midwives and doctors are always there, and an ambulance is available that is ready to refer to if an emergency occurs.

According to informants the facilities in health services are very good and adequate, but there are still shortages of facilities such as inadequate seats in the waiting room and if there are no facilities, they are immediately referred to the hospital.

The following are the results of in-depth interviews with pregnant women and midwives informants for the advice and prohibitions of midwives as follows that.

The advice given by midwives is not to sleep too much, eat lots of vegetables, medicine that midwives routinely drink. So that when we give birth fresh and the mother carries out the advice because the mother is convinced by the advice of the midwife. In addition, midwives also recommend that mothers should not buy drugs other than those recommended by midwives, because it will cause problems in the womb, pregnant women may not lift a heavy weight, and should not be tired.

The results of the Focus Group Discussion (FGD) conducted in Gowa Regency with different responses regarding community attitudes in dealing with this with health workers as facilitators, like that the

service is good and the facilities are complete.

Public health workers routinely encourages pregnant women to return to the Puskesmas as soon as possible if there are complications of pregnancy. This is an effort to prevent pregnant women from complications, health workers have also been able to convince pregnant women to consume Fe tablets regularly so that their pregnancies remain healthy.

As a health worker facilitator is a place to ask patients who have health problems and help solve these problems, so that health workers are expected to provide the right solution to overcome the problems at hand.

Midwives are health workers who are very influential in improving maternal and child health. Midwives as health workers are expected to be able to carry out their roles, functions, and competencies in conducting health services related to their roles, functions and competencies, midwives have many tasks and roles such as facilitators of advocates, counselors, motivators, communicators which include antenatal education such as the importance of maternal nutrition can be seen from the increase in body weight during pregnancy, good food during pregnancy, preparation for childbirth to the health of child development. Midwives must provide facilities, supervision, care and provide needed advice and counseling to women during pregnancy, childbirth and postpartum.

From the results of interviews with health workers in Gowa Regency that they facilitate all forms of complaints regarding pregnant women, they routinely encourage pregnant women to return to the Puskesmas as soon as possible if there are complications of pregnancy. This is an effort to prevent pregnant women from complications, health workers have also been able to convince pregnant women to consume Fe tablets regularly so that their pregnancies remain healthy and as a health worker facilitator is a place to ask patients who have health problems and help solve problems so, it is expected that health workers can provide the right solution to overcome the problem at hand.

In line with the research on the role as a facilitator in giving Fe tablets to pregnant women, every health worker must also have them on every visit to the health center. The facilitator must be skilled in integrating three important things, namely optimization of

facilitation, time provided, and optimization of participation, so that when the deadline has been set for pregnant women should be given the opportunity to be ready to continue the Fe tablet consumption program independently (Rahmawati, et al., 2006).

The facilitator is a person or body that provides convenience in providing facilities for other people in need. Health workers are equipped with guidelines for providing maternal and child health services with the aim of being able to carry out the delivery of health services right on target in an effort to reduce maternal mortality. Health workers must also help clients to achieve optimal health degrees to suit their intended goals.

The role as a facilitator in providing health services to pregnant women must also be owned by every health worker on every visit to the health center. Health workers must be able to be a companion in a forum and provide opportunities for patients to ask questions about explanations that are not understood. Become a facilitator not only during meetings or counseling processes, but also a health worker must be able to become a facilitator specifically, such as providing time and place when patients want to ask questions more deeply and closed (Sulaeman, 2012).

As a health worker facilitator is a place to ask patients who have health problems and help solve these problems, so that health workers are expected to provide the right solution to overcome the problems at hand.

According to a study conducted by Handayani (2013) as a facilitator health workers were given debriefing on consumption of Fe tablets with the aim that health workers were able to carry out the administration of Fe tablets right on target in an effort to reduce the incidence of anemia in pregnant women. According to Mobarok (2012) health workers as a facilitator have a companion characteristic that has the responsibility to create, condition individuals to comply with health, and facilitate the learning process.

Health workers in Gowa Regency have been able to provide Fe tablets free of charge for every pregnant mother in need so that pregnant women with low socio-economic conditions feel unencumbered whenever it is recommended to consume Fe tablets. Health workers also routinely provide one packet of Fe tablets at each visit of pregnant women to the health centre so that

the mother's iron needs during pregnancy are still fulfilled.

The role of community health workers is very important in the continuous journey of Posyandu, to prevent unwanted conditions, such as the risk of childbirth and being able to partner with community leaders and to establish partnerships with various institutions and coordinate with the Health Office. Good collaboration between various parties, the Posyandu can actually be maximized to overcome the maternal mortality rate in Indonesia, with support from various local government leaders such as the subdistrict head and village heads who have a high level of care in overcoming maternal mortality, routine guidance from the Health Office, and assistance from the community (Yusriani, 2018).

CONCLUSION

The role of community health workers as facilitators is sufficient, health workers have been able to carry out their role in facilitating pregnant women to get health services such as facilitating pregnant women to obtain antenatal care, clarifying good food during pregnancy, preparation for childbirth and health of child development. Public health workers have provided facilities, supervision, care and provided the advice needed and counseling to women during pregnancy, childbirth, and postpartum. However, there are still public health officers who have not carried out their roles optimally due to limited facilities, skills and traditions of the community. It is hoped that the role of health personnel will be optimized in facilitating the availability of facilities and infrastructure for health services for pregnant women and facilitating health checks only for health workers, building partnerships with traditional birth attendants so that the number of inspection visits to pregnant women decreases.

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