EMPOWERING PREGNANT MOTHER TO INCREASE SELF-CARE AS AN EFFORT TO PREVENT PREECLAMPSIA

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ABSTRACT

Maternal Mortality Rate (MMR) is one indicator to see the success of maternal health efforts. One of the causes of AKI is preeclampsia which is the main cause of maternal and perinatal morbidity and mortality worldwide, including in Indonesia. According to the World Health Organization (WHO), one of the causes of maternal and fetal morbidity and mortality is severe preeclampsia, the incidence ranges from 0.15%–38.4%. In developed countries the incidence of severe pre-eclampsia ranges from 6–7% and eclampsia 0.1–0.7%. The incidence of pre-eclampsia in Indonesia ranges from 3–10% of all pregnancies. The maternal mortality rate in Indonesia is mostly caused by bleeding as many as 1,330 cases, hypertension in pregnancy as many as 1,110 cases, and circulatory system disorders as many as 230 cases. Therefore, it is necessary for nurses to play a role in overcoming preeclampsia, one of which is being an educator to help pregnant women reduce the risk factors for preeclampsia. The purpose of this activity is to increase the knowledge and skills of pregnant women in carrying out care during pregnancy so that they can prevent the occurrence of preeclampsia during pregnancy. The method used in this community service activity is to conduct health education about efforts to prevent preeclampsia during pregnancy at BKIA Islamic Hospital Surabaya. This activity was carried out for three months. Knowledge and skills of pregnant women in performing self-care to prevent preeclampsia were evaluated by questionnaire. The results of community service show that pregnant women have better knowledge of self-care to prevent preeclampsia.
INTRODUCTION

Preeclampsia is a pregnancy-specific syndrome characterized by hypertension and proteinuria that occurs after 20 weeks of gestation in women who have had normal blood pressure and no protein in the urine in the past. Hypertension of pregnancy is one of the most common medical problems that occur during pregnancy, and is a major cause of maternal death in the world and in Indonesia, therefore it is very important for pregnant women to be trained about conditions during pregnancy and learn proper self-care for prevention and control, occurrence of preeclampsia. However, it is still found that pregnant women do not have the knowledge and ability about self-care, there is still a lack of comprehensive resources that can help pregnant women and health care providers take effective steps to control and prevent gestational hypertension (Rasauli et al, 2019).

Based on data from the World Health Organization (WHO) in 2008, the incidence of preeclampsia worldwide ranges from 0.51% to 38.4%. In developed countries, the incidence of preeclampsia ranges from 5%–6%, the frequency of preeclampsia for each country is different because of many influencing factors. In Indonesia, the incidence of preeclampsia is around 3-10%, while in the United States it is reported that the incidence of preeclampsia is 5%. In Indonesia, preeclampsia is a high cause of maternal death in addition to bleeding and infection, namely bleeding up to 28%, preeclampsia by 24%, infection by 11%, complications from the uterus by 8%, prolonged labor by 5%, and abortion by 5%. RI, 2012).

The Indonesian Health Demographic Survey (IDHS) in 2018 showed that the maternal mortality rate (MMR) increased from the previous year, reaching 306 per 100,000 live births. Data verified by the East Java Provincial Health Office team in 2017 the maternal mortality rate (MMR) increased significantly to 529 cases compared to 2013 which reached 474 cases. According to the Indonesian Demographic Health Survey (IDHS) in 2018, the direct causes of maternal death include: bleeding 42%, eclampsia or preeclampsia 13%, abortion 11%, infection 10%, prolonged labor or labor delays 9%, and other causes 15%. Meanwhile, according to a report from the East Java Provincial Health Office, MMR occurred after childbirth reaching 54 percent. About 25 percent of MMR occur during pregnancy and 21 percent occur during childbirth. Pregnancy hypertension (about 29 percent) and bleeding (about 26 percent) are the causes of MMR in East Java.

Knowledge or cognitive is an important factor in the formation of behavior, if pregnant women have knowledge about pregnancy complications, it is possible to behave to maintain, prevent, avoid or overcome the risk of complications. The gap in socioeconomic status and low levels of education causes limited awareness and understanding of
mothers to care for and maintain their pregnancy, most of them still use village shamans for health checks, even though health services are available in every village (Anggoro, 2009).

Efforts to prevent preeclampsia in pregnant women who are at risk of pregnancy are expected to be able to prevent the occurrence of preeclampsia so as to reduce maternal mortality. Through professional ANC services, increasing knowledge and behavior in pregnancy care is expected to be able to prevent the occurrence of preeclampsia.

OBJECTIVES

General Purpose

This activity is expected to be able to increase the knowledge and skills of pregnant women in carrying out self-care as an effort to prevent the occurrence of preeclampsia.

Special Purpose

After implementing this community service activity, it is hoped that pregnant women are able to improve knowledge and skills in carrying out care during pregnancy so that they can prevent the occurrence of preeclampsia through health education.

PLAN OF ACTION

Strategy Plan

The method used in this community service activity is a participatory education approach which is carried out from March to April 2022 at BKIA Ahmad Yani Islamic Hospital Surabaya. Participants were all pregnant women who did pregnancy control, Surabaya as many as 40 people.

Implementation

Before the activity was carried out, the first step was distributing pre-test questionnaires. Counseling/ exposure of material on efforts to prevent the occurrence of preeclampsia in pregnant women who are at risk of preeclampsia. Counseling/ presentation of material will be delivered by the chairman and members of implementing community service activities using the lecture method. Pre-test is an activity to test the respondent's level of knowledge about the material. This activity is carried out before the presentation by the presenter. Test the level of knowledge using a questionnaire sheet regarding the prevention of preeclampsia which is given to respondents to be filled in according to the ability of each respondent. Post-test is an activity to test the respondent's level of knowledge about the material that has been delivered by the presenter. This activity aims to determine the increase in respondents' knowledge from before and after listen to the presentation / counseling delivered by the presenter.

Setting

This community service was held from March to April 2022 at BKIA Ahmad Yani Islamic Hospital Surabaya, East Java, Indonesia. Health education was conducted in that place because there are facilities and infrastructure to support the activities, such as a large enough space, the availability of LCDs and laptops, and the location is easily accessible.

Target

The health education participants are all pregnant women who did pregnancy control, Surabaya as many as 40 people.

RESULTS AND DISCUSSION

The results of the knowledge of pregnant women about preeclampsia and its
prevention efforts before and after training are as follows:

<table>
<thead>
<tr>
<th>Score</th>
<th>Mean</th>
<th>Rank</th>
<th>Mean</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>63.94</td>
<td>-11.438</td>
<td>0.000</td>
<td></td>
</tr>
<tr>
<td>Post-test</td>
<td>75.38</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 1. Results of pre-test and post-test.

Based on Table 1 above, it showed that there is a significant difference in knowledge about preeclampsia and prevention efforts before and after health education (p = 0.000). This shows that the knowledge of pregnant women increases after being given health education. The results of the observation of the mother's skills in making efforts to prevent preeclampsia independently show that almost all pregnant women have good abilities in preventing the occurrence of preeclampsia, including doing ANC regularly, taking medication as recommended, able to manage stress, and good sleep rest activities.

Knowledge or cognitive is a very important domain for the formation of a person's action or activity. This is related to Suprapt's (2012) theory, the level of knowledge is a predisposing factor in positive behavior, because with knowledge a person will begin to recognize and try or take an action. According to the Indonesian Ministry of Health (2011), factors that cause poor patient behavior can come from education and knowledge. These factors include the lack of education and knowledge of the client so that it will affect the less than optimal ability to maintain his health status.

Health education is important in an effort to increase knowledge of pregnant women. Community service efforts to increase knowledge of pregnant women through health education have been carried out by Bardja, S. (2020) and produced a positive outcome in the form of increasing knowledge of pregnant women about preeclampsia and its prevention efforts. Community service through empowering pregnant women is beneficial for the sustainability and optimization of the health of pregnant women. This health education
is also a form of refresher understanding for pregnant women. Pregnant women are very enthusiastic about participating in this health education to completion as a form of contribution in improving the health of pregnant women.

Figure 3. Termination Section for the Implementation of Community Service Activities.

CONCLUSION

Empowerment of pregnant women through health education for mothers as an effort to improve maternal self-care is able to increase mother's knowledge and skills in self-care to prevent preeclampsia. The results of this community service are expected to be able to self-care mothers so that mothers are able to prevent preeclampsia.

REFERENCES

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