



Cultural Factors and Knowledge of Pregnant Women ANC Visiting Behavior of Indigenous Papuans in the Work Area Mopah Baru Health Center, Merauke Regency

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ABSTRACT

Fulfilling the ANC Visit Coverage Target is influenced by Knowledge and Cultural Factors. This study aims to determine the relationship between cultural factors and knowledge of pregnant women on ANC visit behavior of Indigenous Papuans in the working area of the Mopah Baru Merauke Community Health Center in 2023. This research design uses cross sectional observational analysis. Using the total sampling technique, a sample of 60 native Papuan pregnant women was obtained. The independent variable (Culture and Knowledge Factors), the dependent variable (ANC Visit Behavior) used a questionnaire. Using the Chi Square statistical test. The research results from 60 respondents mostly had a positive culture, namely 33 respondents (55%), most respondents had poor knowledge, 34 respondents (56.7%), and most respondents had negative ANC visit behavior, 32 respondents (53.3%). There is no relationship between cultural factors of pregnant women on ANC visit behavior with p value = $0.061 > 0.05$ and there is a relationship between knowledge of pregnant women on ANC visit behavior, namely p value = $0.011 < 0.05$. There is a need to increase the role of midwives to increase the coverage of ANC visits for pregnant women, especially Indigenous Papuan pregnant women.

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1. Introduction

WHO (World Health Organization) data regarding improving maternal health, which is one of the goals of the Millennium Development Goals (MDG's) according to the National target according to the MDGs, namely reducing the Maternal Mortality Rate by $\frac{3}{4}$ of the Maternal Mortality Rate in 2018 according to WHO is 211/100,000 live births. The United Nations (UN) set a sustainable development goal target of reducing MMR to 70/100,000 KH and no country exceeding 140/100,000 KH by 2030 (Alkema L. et al, 2021).

In Indonesia, the MMR is said to still be high, with the MMR figure in 1990 being 390/100,000 KH every 5 years. This number fell to 353/100,000 KH (in 1995), 320/100,000 KH in (2000), 268/100,000 KH in (2000), 228/100,000 KH in (2010) and 205/100,000 KH in 2020. However, to reduce the MMR to the lowest level of 102, all these figures have not achieved the MDGs target. Even now, efforts are still being made to reduce the MMR, starting with the new SDGs target, namely reducing the MMR to 131/100,000

KH in 2030. The results of the 2018 Demogravi Survey (SDKI), recorded 228 maternal deaths out of 100,000 live births (Kemenkes RI, 2020).

The indicator used to describe the success of the maternal health service program is pregnant women's access to health services as measured by the coverage of antenatal services (K1 and K4). Nationally, Antenatal Care (ANC) coverage is 84.6% with the lowest figure in Papua 27.5% and the highest in DKI Jakarta 98.9%, but the results of the 2019 Indonesian Profile say that national K4 coverage is 88.79% with the lowest coverage in Papua, namely 37.15% and the highest in DKI Jakarta, namely 103.63%, the conclusion is that there is a decrease in K4 visit coverage from 2019-2020, namely 3.94% (Depkes RI, 2021).

MMR in Indonesia is a major problem in the health sector. In Indonesia, there are many factors related to the high maternal mortality rate, including the attitude of mothers who need to use ANC for health services, and will experience unsafe pregnancies (Ministry of Health of the Republic of Indonesia, 2021). The Merauke Regency Health Profile Report (2023) shows that visits by pregnant women in Q1 2021 were 102.4%, K4 was 41.8%. In 2022, K1 will decrease to 101.6% while Q4 will increase to 45.9% (Dinas Kesehatan Merauke, 2022). This shows that people's behavior in checking their pregnancies is not in line with national expectations and targets, namely 95%. Considering the importance of the habit of routine pregnancy check-ups, at least according to national targets, it is therefore necessary to examine what factors influence the behavior of pregnant women regarding the accuracy of Antenatal Care. By knowing the factors that influence this, it will be easier to determine how to intervene so that people have more regular antenatal visits.

According to the theory put forward by Lawrence Green, there are three factors that influence behavior, namely predisposing factors or facilitating factors, Enabling Factors and Reinforcing Factors. Predisposing factors include age, gender, knowledge, attitudes, beliefs, education, occupation, traditions and values. Enabling factors include the availability of resources, affordability of health services, knowledge and skills of health workers, community and government commitment. Meanwhile, strengthening or encouraging factors include family, teachers, health workers and community leaders (Notoadmojo S, 2020).

Low levels of knowledge and irregular frequency of antenatal care (ANC) can cause maternal and fetal death. Regularity can be demonstrated by the frequency of visits by pregnant women to check their pregnancies (Hasnidar, 2020). One effort to reduce MMR is by carrying out pregnancy checks in accordance with Standard Operating Procedures (SOP), namely at a minimum standard of 7T (Weighing body weight, measuring blood pressure, measuring uterine fundal height, tetanus toxoid immunization, administering iron tablets, testing for infectious diseases sexual intercourse, interview) in antenatal program services for pregnant women. If service standards are implemented appropriately, it is hoped that high-risk pregnant women can be detected early and referrals can be made as soon as possible (Retnaningtyas, 2021)

A preliminary study conducted by researchers at the Mopah Baru Community Health Center in August 2023, with direct interviews, data was obtained from 7 pregnant women, only 3 people (43%) behaved positively in making K4 ANC visits and 4 people (57%) who behave negatively when carrying out ANC K4 visits (Puskesmas Mopah, 2023). This shows that K4 coverage at the Mopah Baru Community Health Center has not yet reached the target of the Indonesian Ministry of Health for 2023, namely 93%. Most pregnant women do not know about the benefits and importance of regular ANC visits, and the socio-cultural existence in society which also influences the mother's behavior during pregnancy. Some social cultures in pregnancy, especially in the Papuan tribe, still refer to traditional habits in caring for and maintaining health during pregnancy, so health workers, especially midwives, need an intensive approach so that they are willing to carry out pregnancy checks at health facilities. This is what causes low K4 coverage.

To date, several studies have been conducted, including research (Marhumi, 2023), showing that the knowledge of respondent mothers (97%) is in the low knowledge category, while 2 respondents (3%) are in the high knowledge category, regarding the attitudes of pregnant women towards antenatal care. shows that almost all respondents, namely 98.5% (67 people) are in the good category and only

1.5% (1 person) in the sufficient category and the level of compliance of pregnant women with antenatal care is almost all, namely 98.5% (67 people) in the good category and only 1.5% (1 person) in the sufficient category. From the results of the Spearman Rho Correlation statistical test (r), it shows that the magnitude of the correlation between knowledge and compliance with the implementation of antenatal care for primigravida mothers is (r) = 0.702 with significance (p) = 0.000. From the results above, it can be concluded that there is a relationship between the knowledge variable and compliance. Analysis of the relationship between knowledge and attitudes towards compliance using the Spearman Rho correlation test shows that there is a significant relationship with $p = 0.000 (< \alpha 0.05)$ at the Pammana Health Center, Pammana District, Wajo Regency in 2023 (Marhuni, 2023). Based on the above, researchers are encouraged to conduct further research with the title "The Relationship between Cultural Factors and Knowledge of Pregnant Women on ANC Visiting Behavior of Indigenous Papuans in the working area of the Mopah Baru Community Health Center 2023"

2. Research Method

This research uses an analytical observational research design with a cross sectional approach. Using a purposive sampling technique, a sample of 60 respondents was obtained with the criteria being native Papuans and not immigrants from other tribes. The independent variable (Culture and Knowledge Factors) and the dependent variable (ANC Visit Behavior) used a questionnaire. The Chi Square statistical test was used to determine the relationship between variables. Data analysis found that there was no relationship between pregnant women's cultural factors and ANC visit behavior, namely p value = 0.061 > 0.05, and there was a relationship between pregnant women's knowledge and ANC visit behavior, namely p value = 0.011 < 0.05.

3. Results And Discussions

Table 1.
Distribution of Respondent Characteristics

Characteristics	Frequency (f)	Percent (%)
Education		
Elementary School	40	66,7
Junior High School	15	25
Senior High School	4	6,7
College	1	1,7
Work		
Doesn't work	42	70
Work	18	30
Total	60	100%

Based on Table 1 above, it is known that of the 60 respondents, the majority of respondents had elementary school education, namely 40 respondents (66.7%) and it is known that of the 60 respondents, the majority of respondents did not work, namely 42 respondents (70%).

Table 2.
Distribution of Cultural Factors

Cultural Factors	Frequency (f)	Percent (%)
Negative Impact	27	45
Positive Impact	33	55
Total	60	100%

Based on table 2 above, it is known that of the 60 respondents, the majority of respondents have a positive culture, namely 33 respondents (55%). The results of this research are in line with research conducted by Ernias in 2020 which showed that out of 75 respondents (100%) there were 60 respondents (80%) who had a positive culture, and 15 respondents (20%) who had a negative culture.(Ernias, Maryam, A. and Haris, 2020)

Culture or culture is a way of life that develops and is shared and passed down from generation to generation. Culture is defined as things related to the mind or reason, from within culture people explore motives and stimuli to uphold the development of cultural society as behavior, patterns of beliefs, and all the products of certain human groups which are passed down from generation to generation. The product in this case is the result of interactions between human groups and their environment over a long period of time.(Laili, 2018)

According to the researcher's opinion, there were 9 respondents who had a negative culture but their ANC visit behavior was positive because pregnant women were not influenced by negative culture that could affect their pregnancy. Pregnant women already know that the purpose of having a pregnancy check-up in the first three months of pregnancy is to monitor the health of the mother and fetus and it is very important to have a pregnancy check-up with a health worker from the first time they find out about their pregnancy, especially in the first three months accompanied by their husband/family.

Apart from that, there were also 18 respondents who had a positive culture but their ANC visit behavior was negative because culture did not influence the respondents' behavior. The behavior of not wanting to have a pregnancy check means that health workers, especially midwives, need an intensive approach so that they are willing to carry out ANC visits at health facilities.

Table 3.
Knowledge Factor Distribution

Knowledge	Frequency (f)	Percent (%)
Good	34	56,7
Not enough	26	43,3
Total	60	100%

Based on table 3 above, it is known that of the 60 respondents, it was found that the majority of respondents had poor knowledge, namely 34 respondents (56.7%). The results of this research are different from research conducted by (Prasetyaningsih 2020) which showed that out of 75 respondents (100%) there were 51 respondents (68%) who had good knowledge, and 24 respondents (32%) who had poor knowledge. %).

Knowledge is the result of human sensing or the result of a person's knowledge of objects through the senses they have (eyes, nose, ears and so on). A person's knowledge of objects has different intensities or levels (Marhuni, 2023).

According to the researcher's opinion, there were 23 respondents who had poor knowledge and negative ANC visit behavior due to low maternal education and lack of information sources so that mothers did not fully know about ANC and the purpose of making regular ANC visits during pregnancy. Mothers also don't know about the government's program regarding the latest ANC visit schedule, namely a minimum of 6 times during pregnancy.

Apart from that, there were also 9 respondents who had good knowledge but their ANC visit behavior was negative because their knowledge was still limited to knowledge and had not been applied in their daily behavior. In fact, good knowledge coupled with proper application will create positive ANC visit behavior. This is in line with Indarti's research. There is a significant relationship between knowledge of pregnant women's behavior and ANC visits at BPM I and the need to improve the health of pregnant women and quality ANC (Indarti & Nancy, 2022).

Table 4.
Distribution of ANC Visit Behavioral Factors

Behavioral	Frequency (f)	Percent (%)
Good	32	53,3
Not enough	28	46,7
Total	60	100%

Based on table .4 above, it is known that of the 60 respondents, it was found that the majority of respondents had negative ANC visit behavior, namely 32 respondents (53.3%). The results of this research are different from research conducted by Wulandatika which showed that out of 75 respondents (100%), it was found that 58 respondents had positive ANC visit behavior (77.3%), and 17 respondents had negative ANC visit behavior. (22.7%) (Hasnidar, 2020).

Factors that influence ANC visit behavior include demographic, knowledge and socio-cultural factors. (Sibero, 2021) The majority of respondents who had negative ANC visit behavior in this study, in the researcher's opinion, was because most mothers had insufficient knowledge about ANC visits. Pregnant women are not yet aware of the latest government policy which requires pregnant women to make ANC visits at least 6 times during pregnancy. Pregnant women do not routinely make monthly ANC visits at health facilities (Public Health Center, Pustu, midwives or practicing doctors, or hospitals) (Mulyana, 2017). Apart from that, most pregnant women only have their pregnancy checked by a midwife because they feel that is enough. Even though ANC visits to a gynecologist for ultrasound in the first and third trimesters are important (Mahendra et al., 2019).

Apart from that, there were also respondents who had positive ANC visit behavior in this study. In the researcher's opinion, this was due to the mother's high education and the mother not being influenced by negative culture that could affect her pregnancy.

Table 5.
Relationship Between Cultural Factors and ANC Visiting Behavior

Cultural Factors	ANC Visiting Behavior				Total		P Value
	Negative		Positive		f	%	
	f	%	f	%			
Negative Impact	18	14,4	9	12,6	27	27	0,610
Positive Impact	14	17,6	19	15,4	33	33	
Total	32	32	28	28	60	100	

Based on table 5 above, it is known that respondents who have a positive culture have positive ANC visit behavior, namely 19 respondents (67.9%). The results of the research analysis regarding the relationship between cultural factors and ANC visit behavior based on statistical tests using the Chi-Square test showed that $p = 0.061 > 0.05$, so H_0 was accepted and H_1 was rejected, which means there is no relationship between cultural factors and ANC visit behavior in the Mopah Baru Community Health Center Work Area.

The results of this study are different from research conducted by Sibolon, 2021 which showed a p value of $0.023 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a cultural relationship with antenatal care visits for pregnant women at the Lurasik Community Health Center, North Biboki District (Simbolon, M. and Nahak, 2021). The same research conducted by Yelfita, 2020 showed the results $p = 0.006 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a cultural relationship with K1 access visits at the Hutaraja Community Health Center (Yelfita F.S, 2022).

The better the culture of pregnant women in the environment and daily life, the more regularly the mother makes antenatal care visits or the more routinely the mother has her pregnancy checked according to the trimester of pregnancy, while the less good the culture of pregnant women in the environment or daily life, the more it will hinder the mother in doing so. Regular antenatal care visits according to trimester (Prasetyaningsih, 2020).

The reality in the field is that there are still many mothers who consider pregnancy to be normal, natural and natural. They feel there is no need to check regularly with a midwife or doctor. There are still many mothers who are not aware of the importance of pregnancy checks, resulting in undetected high risk factors that may be experienced by them. This risk is only discovered during delivery because the case is too late, resulting in death (Rachmawati et al., 2017).

In the researcher's opinion, there is no relationship between cultural factors and ANC visit behavior in the Mopah Baru Community Health Center Work Area. In this study, this research proves that culture, especially in Papua, is not a factor that influences ANC visit behavior. This is not in line with

research conducted by Simbolon that there is a cultural relationship with Antenatal Care visits at the Lurasik Community Health Center, North Biboki District (Simbolon, M. and Nahak, 2021).

Table 6.
Relationship between Knowledge and ANC Visiting Behavior

Knowledge	ANC Visiting Behavior				Total		P Value
	Negative		Positive		f	%	
Not Enough	f	%	f	%	f	%	0,011
Good	23	18,1	11	15,9	34	34	
Total	9	13,9	17	12,1	26	26	
	32	32	28	28	60	100	

Based on table 6 above, it is known that respondents who had poor knowledge had negative ANC visit behavior, namely 23 respondents (71.9%). The results of the research analysis regarding the relationship between knowledge and ANC visit behavior based on statistical tests using the Chi-Square test showed that $p = 0.011 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a relationship between knowledge and ANC visit behavior in the Mopah Baru Community Health Center Working Area.

The results of this research are in line with research conducted by Prasetyaningsih in 2020 which showed a p value of $0.005 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a relationship between Knowledge and Pregnant Women's Antenatal Care (ANC) (K4) Visits at the Pariaman Community Health Center (Prasetyaningsih, 2020). The same research conducted by Sari in 2021 showed the results $p = 0.000 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a relationship between maternal knowledge and compliance in carrying out antenatal care examinations during the Covid-19 pandemic in the working area of the Sidomulyo Community Health Center, Bengkulu City (Sari, 2021).

Knowledge is an indicator in carrying out an action. The higher a pregnant woman's knowledge about antenatal care, the more influence it will have on her pregnancy check-up and the higher the level of compliance with antenatal care visits. Pregnant women who regularly make antenatal care visits will have the mindset that by making regular antenatal care visits, they will have an easy way of dealing with the pregnancy problems they face so that if the pregnant woman is experiencing pregnancy problems, she will immediately contact a professional health worker and solve the problem. This should be handled immediately by health workers (Setyarini A.D, 2019).

There is a relationship between a person's knowledge and pregnancy checks, knowledge about Antenatal Care is related to knowledge of pregnancy, fetal growth in the womb, self-care during pregnancy, as well as danger signs to watch out for. If the mother's knowledge about ANC is lacking, she will know what to do to maintain the health of her pregnancy. It can be concluded that maternal knowledge greatly influences compliance in carrying out antenatal care examinations, where the better a person's knowledge, the more compliant they will be with antenatal care examinations (Rachmawati et al., 2017).

In the researcher's opinion, there is a relationship between knowledge and ANC visit behavior at the Mopah Baru Community Health Center. In this study, this research proves that knowledge for pregnant women really has an impact on ANC visit behavior. Therefore, pregnant women need to have good knowledge about ANC visits. The role of midwives is needed in providing education to pregnant women about the purpose and benefits of making ANC visits so that pregnant women will have awareness of the importance of making regular ANC visits during pregnancy.

4. Conclusion

Based on the results of research on the relationship between cultural factors and knowledge on the behavior of ANC visits at the Mopah Baru Community Health Center among 60 pregnant women, it can be concluded that. Most of the respondents have a positive culture, namely 33 respondents (55%). Most of the respondents had poor knowledge, namely 34 respondents (56.7%). Most respondents had

negative ANC visit behavior, namely 32 respondents (53.3%). The results of the research analysis regarding the relationship between cultural factors and ANC visit behavior based on statistical tests showed that $p = 0.061 > 0.05$, so H_0 was accepted and H_1 was rejected, which means there is no relationship between cultural factors and ANC visit behavior in the Mopah Baru Community Health Center Working Area, while the research results show a relationship knowledge of ANC visit behavior based on statistical tests obtained $p = 0.011 < 0.05$, so H_0 was rejected and H_1 was accepted, which means there is a relationship between knowledge and ANC visit behavior in the Mopah Baru Community Health Center Working Area. The limitation of this research is that the research sample does not represent all Papuan ethnic groups because those studied were only native Papuan ethnic groups who live in the Mopah Community Health Center area, while there are still many other immigrant ethnic groups who have different cultures. It is hoped that pregnant women will increase their knowledge, especially information about their pregnancy, thereby helping to have a safe and quality pregnancy, and also preventing complications that can cause death.

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