KNOWLEDGE, ATTITUDE, AND BEHAVIOR OF PREGNANT WOMEN DURING COVID-19 PANDEMIC

1Elka Halifah, 2Mariatul Kiftia, 3Darmawati, 4Aida Fitri, 5Dara Ardia, 5Mira Rizkia

1,2,3,4,5 Maternity Department Nursing Faculty of Nursing
Universitas Syiah Kuala, Banda Aceh

Corresponding email: elka@usk.ac.id

Abstract

Pregnancy is a physiological process of a woman to continue heredity. This study aimed to examine pregnant women’s characteristics in carrying out their pregnancy during a pandemic in Aceh Barat Daya, Aceh. Research Method: This type of research is descriptive with a Cross-Sectional Design approach. The sample in this study was 124 pregnant women as respondents using the Snowball Sampling selection method. Data analysis was carried out using statistical tests using SPSS. The results showed that 86.7% of pregnant women lived in Aceh Barat Daya, the age of pregnant women was 26-30 years of 44.3%, the level of tertiary education was 47.8%, the majority of gestational age in the second trimester was 41.6% with the majority of pregnancy visits twice at 40.7%. Furthermore, the high level of knowledge is 70.9%, positive attitude is 61.1%, and good behavior is 61.9%. It is recommended that health service personnel be able to facilitate special services for pregnant women by using electronic media to facilitate visits of pregnant women to health services.

Keywords: Pregnancy, Covid-19, Knowledge, Attitude, Behavior
INTRODUCTION

The World Health Organization (WHO) first mentioned it as a novel coronavirus 2019 (2019- CoV) caused by the Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2). This case or disease was first discovered in Wuhan, China. In Indonesia, on 05 August 2022, it was reported that the number of cases was decreasing, namely confirmed 6.240.699 cases, recovered 6.032.722, and suspected 6.219 (Kominfo, Task Force, 19). Aceh, one of Indonesia’s provinces with a significant increase in cases until June 2021, has recorded 14.536 cases (Aceh Government, 2020).

Patients infected with Covid-19 experience mild, moderate or severe symptoms. The main clinical signs that can appear are fever (temperature> 38°C), difficulty breathing, dry cough, severe shortness of breath, fatigue, myalgia, loss of sense of taste and smell and gastrointestinal symptoms such as diarrhea. In some patients, the signs can be classified as mild, not even accompanied by fever. Most patients have a good prognosis, with a small proportion in critical condition and even dying (POGI 2020).

The impact of this pandemic emphasizes the importance of efforts to break the transmission chain and protect the human population from various risks (Zhang et al., 2020). Different information related to the protocols that must be implemented at this time has been educated to the public, including campaigns always to wear masks, maintain distance, and wash hands with soap (3M). At the end of 2020, the government began implementing a national vaccination program with the issuance of Presidential Decree Number 99 of 2020 concerning the procurement and implementation of vaccines to tackle the Covid-19 pandemic. (Ministry of Health, 2020)

In addition to the importance of information on health protocols carried out by individuals, there are other essential things in dealing with threats from infectious diseases that must be considered carefully, caring for vulnerable populations. Vulnerable groups are social groups with a greater risk of experiencing changes in health conditions compared to the general public. (Pradana, Casman, and Nur’aini 2020). One of the vulnerable populations is pregnant women. World data states that at least a third of pregnant women infected with COVID-19 have died from this disease. (Dashraath et al. 2020). Around 461 thousand women aged 15-44 have tested positive for Covid-19. The United States Centers for Disease Control and Prevention states that pregnant women who are positive for Covid-19 have a high risk of experiencing more severe disease symptoms and even dying. The condition of pregnancy causes a decrease in the body’s immune system due to physiological changes during pregnancy, causing pregnant women to be classified as vulnerable to virus infections (Liang and Acharya 2020). As the body adapts to pregnancy, physiological changes can cause systemic effects that increase the risk of obstetric complications from this respiratory infection (Qiancheng et al., 2020). Referring to similar outbreaks that occurred sometime before (SARS and MERS), it is evident that pregnant women with this infection have a high risk of mortality, spontaneous miscarriage, premature birth, and intrauterine growth restriction of the fetus. However, until now, it is still unknown whether COVID-19 can increase the risk of miscarriage and...
stillbirth in the fetus (Pradana et al., 2020).

During this pandemic, pregnant women must also equip themselves with good knowledge, attitudes and behaviours to prevent infection with this disease considering the dangers it causes. During antenatal checks carried out at health service centers such as community health centers, medical practices, or hospitals, pregnant women are also at risk of being exposed to this virus, so mothers must increase their vigilance by continuing to be disciplined in using Personal Protective Equipment (PPE). A simulation study conducted on influenza infection found that small changes in behavior can significantly affect the pattern of virus transmission during an epidemic (Pawelek et al., 2015). It illustrates that pregnant women, as a vulnerable group, must have good knowledge and attitudes in caring for their pregnancy during this pandemic which is reflected in the excellent behavior shown by this group.

Until now, research on COVID-19 infection concerning pregnancy is still limited, and there are no specific recommendations for treating pregnant women with COVID-19. In addition, evidence and research related to the experiences of pregnant women undergoing pregnancy during the COVID-19 pandemic are also still limited. This research was conducted to explore the knowledge, attitudes, and behavior of pregnant women undergoing pregnancy during the COVID-19 pandemic. The research is expected to provide input, especially for researchers, health service centers, and policymakers, in developing effective strategies for pregnant women to undergo pregnancy during this pandemic. So that pregnant women can undergo pregnancy calmly and safely until the delivery process.

**METHOD**

The design of this study uses a quantitative descriptive survey which describe a phenomenon, event, symptom, and event that occurs factually, systematically and accurately.

The population in this study is pregnant women who live in West Aceh. Sampling was carried out using the Snowball Sampling technique with 124 pregnant women. The researcher contacted the respondent and asked for the respondent’s consent to participate by giving consent for their willingness to participate in the study. Then the researcher explained the research procedures that would be carried out through the Google Form questionnaire. Data processing using a computer program starts with editing, coding, data entry and cleaning (Notoadmodjo, 2010)

**RESULTS**

**Table 1. Distribution of Participants**

<table>
<thead>
<tr>
<th>Data Characteristics</th>
<th>No Participated</th>
<th>f %</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No</strong></td>
<td><strong>Domicile</strong></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Aceh Barat Daya</td>
<td>98</td>
</tr>
<tr>
<td></td>
<td>Meulaboh</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Nagan Raya</td>
<td>14</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td><strong>Age Groups</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>20 – 25</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>26 – 30</td>
<td>50</td>
</tr>
<tr>
<td></td>
<td>31 – 35</td>
<td>26</td>
</tr>
<tr>
<td><strong>3</strong></td>
<td><strong>Level of Education</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>Intermediet</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>10</td>
</tr>
<tr>
<td><strong>4</strong></td>
<td><strong>Gestational Age</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>The Second Trimester</td>
<td>33</td>
</tr>
</tbody>
</table>
Based on the research that has been done, the results show that the majority of respondents live in Southwest Aceh (86.7%), and the majority of respondents are aged in the range of 26-30 years (44.3%). The majority have the last education in the highest category of 47.8%. The gestational age being undertaken, the majority of pregnant women respondents with gestational age in the second trimester or 13-24 weeks of gestation were 53.4%, and the majority of pregnancy visits (K4) were at the second visit 40.7%.

Table 2 Distribution of Participants

<table>
<thead>
<tr>
<th>Data Variable</th>
<th>f</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Knowledge</td>
<td></td>
<td></td>
</tr>
<tr>
<td>High</td>
<td>80</td>
<td>70,9</td>
</tr>
<tr>
<td>Moderate</td>
<td>32</td>
<td>28,3</td>
</tr>
<tr>
<td>2 Attitude</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Positive</td>
<td>69</td>
<td>61,1</td>
</tr>
<tr>
<td>Negative</td>
<td>44</td>
<td>38,9</td>
</tr>
<tr>
<td>3 Behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Good</td>
<td>70</td>
<td>61,9</td>
</tr>
<tr>
<td>Bad</td>
<td>40</td>
<td>38,1</td>
</tr>
</tbody>
</table>

In the table, it can be seen that pregnant women with high knowledge are 70.9%, and moderate knowledge is 28.3%. Then, pregnant women with a positive attitude of as much as 61.1% and continues with negative attitude as much as 38.9%. Meanwhile, good behavior is 61.9%, and bad behavior is 38.1%.

DISCUSSION

A. Characteristics of respondents

Based on the research results, it can be concluded that the characteristics of pregnant women in Aceh Barat Daya have access to sufficient health information. While most pregnant women are 26-30, this age is productive and safe for reproductive health. However, mothers with at-risk pregnancies are aged less than 20 and more than 30 years. Pregnant women with an age range of 20-30 are the age with maturity to reproduce or get pregnant. It is in line with research by (Goemawati & Kristy, 2019), which explained that the characteristics of pregnant women aged 20-30 years were as much as 64.77 % in East Java Health Centers. In this study, most gestational ages were in the second trimester at 14–20 weeks, and antenatal care visits were on K2. Based on the 2014 Minister of Health regulation, visits or health services are at least four times during pregnancy, namely once in the first trimester, once in the second trimester and twice in the third trimester. Antenatal care aims to reduce maternal and infant mortality caused by pregnancy complications which are often the leading causes of maternal death, including bleeding, sepsis, hypertension, unsafe abortion and obstructed labor. In addition, the indirect causes of maternal death are anemia, chronic energy deficiency (CED) and being too young or old, too close to each other with pregnancies, and having too many children. It is caused by the
Low number of maternal visits during ANC, which delays the early detection of pregnancy complications. However, the characteristics of the age of pregnant women did not affect adherence to the ANC examination. It is in line with research conducted by (Murni & Nurjanah, 2020) in Bogor with a number of 290 pregnant women which explains that there is no relationship between the age of pregnant women and adherence to ANC examinations.

B. Knowledge Level Variable

Based on the level of knowledge, it was found that mothers' knowledge about pregnancy during a pandemic was high, with a percentage of 70.9%. It is due to the husband's support during pregnancy care at home. In addition, mothers know if they have to check their condition and fetal movements by visiting the nearest health service. Mothers can still read about pregnancy care with information sources in MCH books that mothers get from the first visit at the beginning of pregnancy. Sources of information are another factor related to the acquisition of knowledge and changes in behavior that are good for someone (Shing & Brod, 2016). According to Khoramabadi et al. (2015), providing more comprehensive information for pregnant women during pregnancy visits regarding maintaining their health during the Covid-19 pandemic is necessary. These are symptoms, prognosis, treatment methods, and access to fast and appropriate services, and health protocol procedures that must be practiced daily.

C. Respondents Attitude Variable

The attitude of pregnant women in pregnancy by having a positive attitude towards pregnancy during the pandemic was as much as 61.1%. It is because pregnant women can still maintain their pregnancy during a pandemic. The majority of pregnant women responded that even though they were worried about the news about the Covid-19 outbreak, they could still check their pregnancies at the health service while still following the health protocol so that they could still get iron tablets (blood boosters) at the nearest health center, midwife and health service center. In addition, pregnant women know they cannot go to health services if they are not essential and urgent during a pandemic. So health information can be obtained through electronic media, the Internet and others. It is following research (Jakubowski et al., 2021), which states that the use of Telehealth or hybrid applications, namely information for meetings between health service staff and pregnant women when they are going to make visits, reduces the risk of movement of direct contact. It was less efficient in the group of pregnant and giving birth women in Poland, who numbered 618 during the pandemic. It is due to a lack of socialization information on using Telehealth applications.

D. Respondent Behavior Variable

Based on the results of this study, the mother's behavior during pregnancy during the pandemic was good, with a percentage of 61.9%. It reinforces the behavior of mothers who have been very good at undergoing pregnancy
during the pandemic. Most mothers and husbands know how to prevent the spread and infection of the coronavirus by washing their hands more than five times using running water, following the Covid-19 prevention rules, maintaining a distance of one meter from other people, and not traveling out of town. Respondent’s knowledge of Covid-19 prevention greatly influenced their behavior. According to research conducted by (Mira Rizkia, 2020), there is a relationship between knowledge and the behavior of pregnant women undergoing pregnancy during a pandemic.

CONCLUSION

This research shows the results of knowledge, attitudes, and good behavior in undergoing pregnancy during the COVID-19 pandemic. It is hoped that during the COVID-19 pandemic, pregnant women can comply with health protocols and instructions or recommendations from health workers regarding good things. In addition, pregnant women know what to do during pregnancy amid the COVID-19 pandemic. It is recommended that further education be given that can be carried out or applied to pregnant women so they can obtain the latest information about Covid-19 and its prevention for pregnant women and their families.

REFERENCE


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Pradana, Anung Ahadi, Casman, and Nur’aini. 2020. “Pengaruh...

