

KNOWLEDGE DESCRIPTION OF THIRD TRIMESTER PREGNANT WOMEN ON BONDING ATTACHMENT IN SEHAT MATERNITY CLINIC OF PANTAI CERMIN SUB DISTRICT 2012

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ABSTRACT

Bonding attachment prevents 22 % of infant deaths per year. The estimated number of deaths of newborns is 89/ 770 per year, or 246 newborns per day.

This study aims to know the overview of pregnant women knowledge about bonding attachment, maternal characteristics by age, education , resources, and parity in the Sehat maternity clinic of Pantai cermin in 2012 .

This type of research is descriptive. Population of 37 respondents pregnant women with total sampling technique. Collected data is primary data with questionnaires as measuring instrument.

The results obtained knowledge about maternal bonding attachment with 70.27 % , a majority of age 20-35 years of 72.41 % and less of age < 20 years with 80 % , the majority of secondary education of 63.63 % and less of primary education of 91.67 % , 72.41 % majority of resources from health care workers and less of the mass media category of 62.5 % , and the majority of multiparous 77.78 % and less of scundipara with 68.75 % .

Pregnant women knowledge about bonding attachment was still lacking. For this, it is expected that health workers through the efforts of counseling and providing information will help mothers increase their knowledge.

Keywords : Knowledge Pregnancy Third Trimester, Bonding Attachment

References : 21 sources (20006-2012)

BACKGROUND

World Health Organization (WHO) and United Nations Children's Emergency Fund (UNICEF) along with the other Scientific Community highly recommend early initiation breastfeeding and implementation of skin contact within one hour after birth (Lennart , 2007) .

In Indonesia based on data from the Ministry of Health in 2007 the infant mortality rate (IMR) reached 26.9 / 1,000 live births . In 2004, the infant mortality rate was about 30.8 / 1,000 live births (Health Department, 2009), the mortality rate of newborns (neonates) 20 per 1,000 live births. Meanwhile, the target is a reduction in IMR of 35 babies per 1000 to 26 babies per 1,000 live births (Maryunani A , 2010) .

According to Indonesian Household Health Survey in 2009, IMR (aged 0-28 days) was 20 per 1,000 live births, indicating that the

number of newborn deaths is 89/770 per year, or 246 newborns per day or 10 newborns per hour. Meanwhile , the infant mortality rate by 0-12 months. Based on Survey held in 2009 was 35 per 1,000 live births (Maryunani A , 2010) .

According to the Indonesian Demographic and Health Survey in 2007, it was estimated that IMR is 34 per 1,000 live births (Indonesian Health Department , 2011) .

The government has established Indonesian Health Vision to decrease mother mortality rate (MMR) as one indicator of the final outcome in assessing health status in Indonesia. As expected in 2015 , the infant mortality rate (< 1 year) was reduced to 17 per 1,000 live births (Department of Health, 2007) .

The Central Bureau of Statistics of North Sumatra Province, estimated that IMR in 2010

in North Sumatra was 24.5 per 1,000 live births. This figure was better when compared to the previous year amounting to 26.90 per 1,000 live births (Syafei C, 2010).

Delayed breast feeding initiation, even only after the first day, is shown to contribute to 2-4 times higher risk of mortality. In the other hand, skin to skin contact must be done properly as well. A proper skin to skin contact should not be done in hurry, should not be disturbed, should be without any cover or clothes, and must be done as early as possible after birth and last for an hour (Elizabeth, 2012).

Skin to skin contact or attachment and early breastfeeding initiation in the first 1 hour after birth may prevent 22% risk of mortality in newborns under 1 month. Thus the first hour in newborns life is very important and both early breastfeeding and attachment are life saving action. Prevention of 22% risk of mortality is equal to saving 21 thousand babies per year. Hence these actions are for the survival of thousand babies hours afterwards (Lennart, 2007).

Formulation Of The Problem

"How is the knowledge description of third trimester pregnant on bonding attachment in Sehat Maternity Clinic of Pantai Cermin sub district 2012 ?"

Research Aim

To find out knowledge description of third trimester pregnant on bonding attachment in sehat Maternity clinic of pantai cermin sub district 2012.

Benefits Of Research

1. To add insight and knowledge of the author in applying knowledge acquired during the lectures, especially research methodology courses.
2. The results of this study can be used as reading material in the library of Medan midwifery study program.

II.LITERATURE REVIEW

1. Bonding Attachment

Bonding attachment has become increasingly popular. The implementation of early initiation of breastfeeding which coincides with the establishment of a bond attachment can help to

reduce the IMR. Normal infant development depends on the response of affection between mothers and babies who are meant to be united in both psychological and physiological relationships (Suherni, 2009).

The aim of bonding attachment (Mitayani, 2010) are :

- a. To get warmth in infants
- b. To prevent infants lose body heat
- c. To increase fabric of affection between mother and baby. Bounding (bonds of affection) between mother and baby will be better if being done the first 1-2 hours for the baby has been ready.
- d. To reduce infant mortality due to hypothermia
- e. Mother and babies feel calmer
- f. Mother and fathers feel more happier for they finally meet the baby for the first time.

2. Benefits of Skin Contact from Baby to Mother

Mother's chest will be appropriately warm during baby crawling looking to breast. This will reduce the number of deaths due to cold (hypothermia) (Mitayani, 2010).

- a. Mother and baby will feel calmer. Baby's breathing and heart rate become more stable. Baby will cry less frequently, thereby reducing energy consumption.
- b. Exclusive breastfeeding will become easier that would improve intelligence of the baby. Babies who are given early opportunities will become more successfully breastfeed exclusively and will take longer breastfed.
- c. Baby can get colostrums. Colostrum is the first content of milk with optimum quality and quantity which are in accordance with the baby's need.
- d. First colostrum contains some antibodies that can prevent infection in infants, thus ensuring the survival of the baby.
- e. The touch of the baby at around its mother's nipple and surrounding areas, as well as baby's reflex of sucking and licking are useful to increase the release of oxytocin which is important for :
 - a. Helping the removal of placenta and avoiding maternal hemorrhage.
 - b. Stimulating another hormone that makes mother becomes more, relaxed and loves her baby, thus putting the mother to more stable emotion, increasing endurance to pain and

much more happiness.

c. Stimulating the release of breast milk.

Elements And Methods of Performing Bounding Attachment

(Mitayani, 2010)

- 1.Touching
- 2.Eye Contact
- 3.Voice
- 4.Body odor
- 5.Entrainment
- 6.Rhythm of life
- 7.Early contact
- 8.Body Warmth
- 9.Rooming in

III.RESEARCH METHODS

This research is a descriptive study to determine knowledge description of third trimester pregnant on bonding attachment in Sehat Maternity clinic of pantai cermin sub district 2012 using a questionnaire measuring instrument.

The location was chosen for this study is in Sehat Maternity clinic of Pantai Cermin 2012. The research, has been done to complete the study, which was conducted from March until July 2014 .

The population in this study were all pregnant women who came to visit Sehat Maternity clinic of Pantai Cermin 2014 for antenatal care from June to July of 2014 which accounts for 37 people .

IV.RESULTS AND DISCUSSION RESULTS

1. Knowledge Based on Age

**Table 1
Knowledge Distribution Of Respondents About Bonding Attachment Based on Mother Age In Sehat Maternity Clinic Of Pantai Cermin 2014**

No Mother Age	Knowledge						Total	
	Good		Enough		Less			
	F	%	F	%	F	%		
1 < 20	-	-	1	20	4	80	5	13,51
2 20 -35	4	13,8	4	13,79	21	72,41	29	78,38
3 > 35	-	-	2	66,67	1	33,33	3	8,11
Total	4	13,8	7	18,92	26	70,27	37	100

From Table 1, it can be seen that out of the 26 respondents aged 20-35 years the majority are less knowledgeable as many as 21 respondents (72.41 %) .

2.Knowledge Based Education Level

**Table 2
Knowledge Distribution of Respondents About Bonding Attachment Based On Education Level In Sehat Maternity Clinic o Pantai Cermin 2012**

No Mother Education	Knowledge						Total	
	Good		Enough		Less			
	F	%	F	%	F	%		
1 Basic Education (SD/SMP)	-	-	1	8,33	11	91,67	12	32,43
2 Middle /secondary(SMA/same level)	4	18,19	4	18,18	14	63,63	22	59,47
3 University	-	-	2	66,67	1	33,33	3	8,10
Total	4	18,19	7	18,92	26	70,27	37	100

From Table 2. It is seen that out of 26 respondents who are less knowledgeable the majority elementary education graduates were which accounts for 11 respondents (91.67 %), and the remaining 14 respondents were secondary education graduates (63.63 %) .

3. Information Sources

**Table 3
Knowledge Distribution of Respondents About Bonding Attachment Based on Information Sources in Sehat Maternity Clinic of Pantai Cermin in 2014**

No Information Sources	Knowledge						Total	
	Good		Enough		Less			
	F	%	F	%	F	%		
1 Mass Media	1	12,5	2	25	5	62,5	8	21,62
2 Health Workers	3	10,34	5	17,25	21	72,41	29	78,38
Total	4	10,81	7	18,92	26	70,27	37	100

From table 3 it can be seen that 21 knowledgeable respondents gained information from health workers (72,41%) while the remaining 5 (62,5%) less knowledgeable respondents gained information from mass media..

4. Knowledge Based on Parity

Table 4
Knowledge Distribution of Respondents
About Bonding Attachment Based on Parity
in Sehat Maternity Clinic of Pantai Cermin
in 2014

No	Parity	Knowledge						Total	
		Good		Enough		Less		F	%
		F	%	F	%	F	%	F	%
1	Primipara	-	-	1	50	1	50	2	5,40
2	Scundipara	2	12,5	3	18,75	11	68,75	16	43,24
3	Multipara	2	11,11	2	11,11	14	77,78	18	48,65
4	Grandemultipara-	-	-	1	100	-	-	1	2,71
Total		4	10,81	7	18,92	26	70,27	37	100

From Table 4 it can be seen that out of 26 less knowledgeable respondents, 14 were multiparous (77,78%) and 11 were scundipara (68,75%).

DISCUSSION

1. Respondents Knowledge About Bonding Attachment Respondents in Sehat Maternity Clinic in 2014.

Based on the results of the analysis, it is indicated that the majority of respondents are less knowledgeable about bonding attachment which accounts for 26 respondents (70.28 %).

Knowledge less than 70% is shown to prevent both breastfeeding initiation and attachment to be done properly. According to Notoadmojo, knowledge plays a critical role in interpreting the results to be obtained.

Thus we believe that the implementation of breastfeeding initiation and attachment is positively correlated with information. Thus information delivery needs to be improved to increase the maternal knowledge of breastfeeding initiation and attachment.

2.Respondents Knowledge About Bonding Attachment Respondents based on age in Sehat Maternity Clinic in 2014.

The results showed that out of 26 respondents by 20-35 years, the majority knowledgeable about as many as 21 respondents (72.41%).

Results of this study differs from study by Ika (2011) which suggests less knowledgeable respondents were at the age of 20-35 years 16.7%.

According to Arini (2012), maternal age is crucial in determining maternal health, pregnancy condition, child birth and post delivery condition. Mothers under 20 years of age are still not ready to face pregnancy, childbirth & to gsdirt yhr nsny in yrtdm og noyh physiologic and psycological matters.

The results are consistent with the theory that there Siti (2012), which in theory may increase a person's age, will be more mature in thinking so more easily understand information to increase knowledge.

And the authors assume that the lack of information from health workers affects the interest of mothers to seek information about bonding attachment.

3.Respondents Knowledge About Bonding Attachment Respondents based on education level in Sehat Maternity Clinic in 2014.

From the result of 26 respondents, the less knowledgeable respondents were secondary education graduates which accounts for 14 respondents (63.63).

It is contrary to Ika's opinion (2011) which suggests that the majority of respondents have less knowledge about the intermediate bonding attachment were 3.33 % .

According to Arini (2012) a low level of maternal education results in a lack of knowledge of mothers in dealing with problems. When mothers have higher education level, they are generally open to changes or new things to the maintenance of health. Education will also make a person seek experience so that the information received will be a knowledge .

However, the authors assume that the mother's lack of interest in knowing about the importance of the bond is very influential on the mother's knowledge. From the research we unfortunately obtained that there were still less knowledgeable mother who actually have completed secondary education. From several questionnaire given to several respondents, it was found that majority of mothers thought that bonding or attachment to newborn may naturally occur, thus it become a matter of concern to mothers doesn't. Hence, we suggest that information access enhancement from

health workers is the corner stone to improve mothers' point of view regarding this issue. The knowledge of the respondents based on information sources showed on table 3 shows that out of 26 respondents, 21 were less knowledgeable and gained information from health workers.

Based on the opinion of Em Zul Fajri and Queen April Twilight, information is lighting, notifications, news about something that supports the overall meaning of the mandate. Knowledge may be gained from several other sources, such as newspaper, radio, movies, televisions, but we argue that the fact of less provision of attachment/bonding may come from the lack of information gained from health workers. Thus, eventhough there have been numerous technological advance from the media when the information isn't coreect, then the reepient will be wrong in taking sense and attitude.

4.Respondents Knowledge about Bonding Attachment Respondents based on parity in Sehat Maternity Clinic in 2014

Based on the result, it was shown that out of 26 respondents, the majority of the less knowledgeable mothers were multiparous as many as 14 respondents (77.78 %).

The result is consistent with the theory mentioned by Notoatmodjo (2007), which in this study the authors get a good knowledge of what the mother had given birth wherein said higher parity theory, the more knowledge about bonding attachment for pregnant women.

But the authors argue that majority of mothers thought that bonding to newborns is a natural thing, in addition to the lack of information from health workers contribute to the lack of provisions of newborns attachment.

CONCLUSIONS AND SUGGESTIONS

1. Conclusion

From the research, entitled "Knowledge Description Of third trimester Pregnant Women On Bonding Attachment In Sehat Maternity Clinic Of Pantai Cermin Sub District 2014" it can be summarized that :

1. From 37 respondents majority have less knowledgeable , as many as 26 respondents (70.28 %).
2. Based on age, majority less knowledgeable

respondents aged 20-35 years of the 21 respondents (72.41 %).

3.Based on education, the majority of respondents are less knowledgeable on secondary education as much as 14 respondents (63.63 %).

4.Based on sources, the majority of respondents were less knowledgeable who got information from health officials as many as 16 respondents (84.20%).

5.Based on parity, the majority of respondents with less knowledge were multiparous mothers as much as 14 respondents (77.78%).

2.Suggestions

As for suggestions it can convey to the authors of this study as follows:

a.For Educational Institutions

The results of this study are useful to broaden and reading materials for students of midwifery in library.

b.For Maternal Clinic

For Sehat maternity clinic to be able to work together with the patient in establishing the health of mothers and babies to be able to providing complete information about health through counseling related to bonding attachment, early initiation of breastfeeding, which aims to attract the mother.

c.For Next Researchers

For further research can be performed descriptive and analytical methode so that the results obtained are more meaningful as a source of information related to the bonding attachment.

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