



MIDWIFE KNOWLEDGE ABOUT REPRODUCTIVE RIGHTS IN MIDWIFERY SERVICES IN THE COMMUNITY

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ABSTRACT

Background: Midwives are at the forefront of women's reproductive health services in the community. Its role is very important in reducing maternal and infant mortality rates. Reproductive rights are the rights of every individual, everyone has the right to determine their reproductive life and is free from discrimination and coercion from any party. The government is targeting the death rate to be 183 AKI / 100000 KH, while the infant mortality rate is targeted to be 16 AKB / 1000 KH. Meanwhile, based on 2015 SUPAS data, MMR was recorded as 305/100000 KH and AKB 24/1000 AKB (IDHS, 2017). Meanwhile, the total fertility rate according to SKAP in 2019 is 2.45 and the prevalence of infertility is still high, around 36% (Risksedas, 2018).

Research Objectives: To determine of knowledge of midwives about reproductive rights in midwifery services in the community. The research used was a descriptive study with the population of all midwives attending the international midwifery seminar. The sample used is 45 respondents by means of sample random sampling. The research instrument used a questionnaire. The variable studied was the level of knowledge of midwives about reproductive rights. The results showed that knowledge of midwives about reproductive rights in midwifery services in a community with sufficient knowledge of 23 people (51%), good knowledge of 17 people (38%) and less knowledge of 5 people (11%).

Keywords: *Knowledge, Midwives, Reproductive Rights*

1. PRELIMINARY

The International Conference on Population and Development (ICPD), in Cairo, Egypt, in 1994, stated that reproductive health received special attention globally. fertility reduction is an approach that focuses on reproductive health and efforts to fulfill reproductive rights (Eldawaty, 2017).

Many cases that occur are related to violations of reproductive rights, it can be seen by the many cases of rape, including in marriage, forced matchmaking, prohibition of abortion, sexual harassment, torture, coercion of the use of contraceptives. However, the problem that occurs is the lack of access to information on reproductive issues, and many forms of discrimination that occur regardless of the important position of a woman. Many studies have focused on the issue of women's rights. The facts show that the fate of women in more developed Western countries is not much different from that in other countries. This condition is also found in Indonesia. (Hadi, 2007).

Reproductive health problems in Indonesia still occur and should be a special concern for health workers. The government is targeting the death rate to be 183 AKI/100000 KH, while the infant mortality rate is targeted to be 16 IMR/1000 KH. Meanwhile, based on 2015 SUPAS data, MMR was recorded at 305/100000 KH and IMR 24/1000 IMR (IDHS, 2017). Meanwhile, the total fertility rate according to the 2019 SKAP is 2.45 and the prevalence of infertility is still high at around 36% (Risksedas, 2018). Problems in children are also still high, such as the stunting rate of 27.7 (SSGBI, 2019). The incidence of anemia in women is still high at 23.9% while in pregnant women it is 48.9% (Risksedas, 2018).

Midwives as providers of health services, educators, drivers of community participation, empowerment of women and community involvement for health and decision makers. The higher a person's level of knowledge, it will affect one's mindset and attitude so that it will grow a positive attitude as well (Notoatmodjo 2010, p.48). this becomes an important issue how



midwives as service providers know about reproductive rights.

2. RESEARCH METHODS

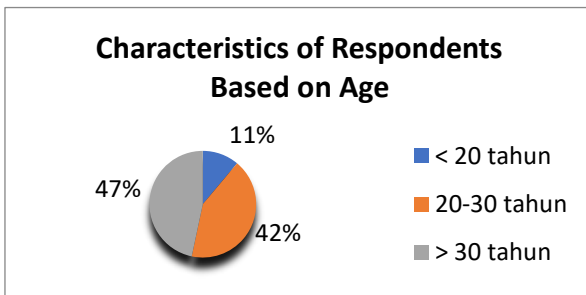
The research used is a descriptive study with the population being all midwives who attended an international seminar organized by the UNIMUS Midwifery Department. The sample used is 45 respondents by means of random sampling. The research instrument used a questionnaire. The variable studied was the level of knowledge of the midwife about reproductive rights.

3. RESULTS AND DISCUSSION

1. Characteristics of Respondents

Characteristics of Respondents Based on Age

Frequency distribution chart of respondents based on age at the UNIMUS International Seminar on Midwifery Department.

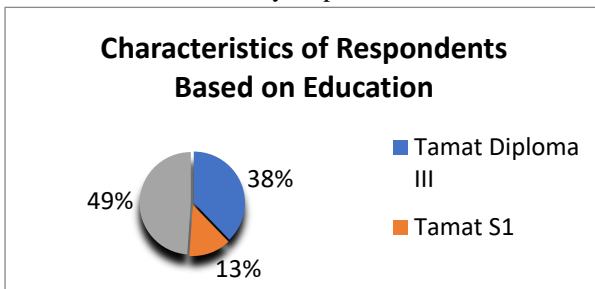


Source: Primary Data

The diagram above shows that the majority of respondents are aged >30 years, namely 21 people (47%) and those aged 20-30 years are 19 people (42%) and those aged <20 years are only 5 people (11%).

a. Characteristics of Respondents Based on Education

Frequency distribution chart of respondents based on education at the UNIMUS International Seminar on Midwifery Department

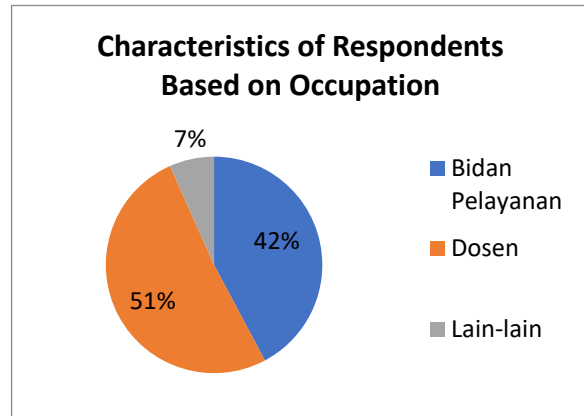


Source: Primary Data

The education level of the respondents in this study was the majority who graduated from S2, namely 22 people (49%), then 17 people graduated from Diploma III (38%) and 6 people graduated from S1 (13%)

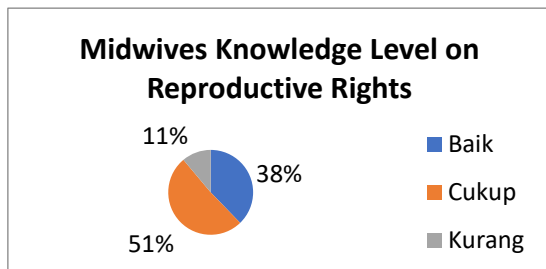
b. Characteristics of Respondents Based on Occupation

Table of frequency distribution of respondents by occupation at the UNIMUS International Seminar on Midwifery Department



The majority of respondents work as lecturers as many as 23 people (51%), work as midwives in services as many as 19 people (42%) and others as many as 3 people (7%).

1. Frequency Distribution Chart Midwives Knowledge Level on Reproductive Rights



Source: Primary Data

The diagram above shows that the level of knowledge of midwives about reproductive rights is mostly moderate, namely 23 people (51%), 17 people have good knowledge (38%) and 5 people have less knowledge (11%).

2. Midwife's Knowledge Level of Reproductive Rights Based on Characteristics of Age, Education, Occupation

a. Midwife's Knowledge Level of Reproductive Rights Based on Age Characteristics



| | | Midwife's Knowledge Level of Reproductive Rights | | | |
|-----------|-----------------------|--|-----------|------------|-----------|
| | | Well | Enough | Not enough | Total |
| Education | Graduated Diploma III | 3 | 0 | 2 | 5 |
| | Graduated Bachelor | 2 | 10 | 1 | 13 |
| | Graduated Master | 15 | 12 | 0 | 27 |
| | Total | 20 | 22 | 3 | 45 |

| | | Midwife's Knowledge Level of Reproductive Rights | | | |
|-----|--------------|--|-----------|------------|-----------|
| | | Well | Enough | Not enough | Total |
| Age | < 20 years | 1 | 0 | 1 | 2 |
| | 20-30 years | 19 | 11 | 1 | 31 |
| | >30 years | 3 | 9 | 0 | 12 |
| | Total | 23 | 20 | 2 | 45 |

The results of the cross tabulation of the level of knowledge of midwives about reproductive rights based on age characteristics showed that at the age level <20 respondents had less knowledge, namely 1 person, at the age of 20-30 years the majority had good knowledge, namely 19 people, and those aged >30 years the majority had good knowledge, namely 23 people

b. Midwife's Knowledge Level of Reproductive Rights Based on Educational Characteristics

The results of the cross tabulation of the level of knowledge of midwives on reproductive rights

based on educational characteristics showed that at the level of education graduated from Diploma III, the respondents had good knowledge, namely 3 people, at the education level, the majority of them graduated from S1 and had sufficient knowledge, namely 10 people, and the majority of those who graduated from S2 had good knowledge, namely 15 person.

a. Midwife's Knowledge Level of Reproductive Rights Based on Occupational Characteristics

| | | Midwife's Knowledge Level of Reproductive Rights | | | |
|------|-----------------|--|----------|------------|-----------|
| | | Well | Enough | Not enough | Total |
| Work | Service Midwife | 15 | 1 | 0 | 16 |
| | Lecturer | 15 | 9 | 1 | 25 |
| | Etc | 0 | 1 | 3 | 4 |
| | Total | 31 | 7 | 7 | 45 |

The cross tabulation table shows that the majority of respondents who have jobs as civil servants have good knowledge, namely 15 people, 1 person has sufficient knowledge, and none has less knowledge. The majority of respondents who

work privately have good knowledge of 15 people, 9 people are sufficient, and 1 person is less. Respondents who have a Labor job have a level of less knowledge as many as 4 people, only 3 people and none of them have less knowledge.



Respondents using condoms in this study were 4 people. And all of them have good knowledge, here the respondents have been exposed to condoms because they use the contraception themselves. So they understand what are the benefits of using condoms, how they work, their effectiveness, etc., so that the level of knowledge of the respondents has reached evaluation resistance, so that they can assess condom contraception. This condom user can also motivate other respondents who have not used condoms, which can be informed about the benefits of condoms that have multiple functions, namely in addition to preventing the meeting of sperm and ovum, condoms can also prevent STI-HIV/AIDS.

There is no MOP contraceptive user respondent here. For husbands who do not use contraception but wives who use good knowledge of 21 people, 12 people are enough, and less than 7 people, and whose husband and wife do not use any contraception only 1 person has enough knowledge. This is because the respondents have never used condom contraception themselves, so the respondents do not understand how condoms are. They only know from the information circulating.

4. CONCLUSION

Respondents who use condoms have a good level of knowledge, all of which are 4 people. None of the respondents used MOP contraception. For respondents whose husbands do not use contraception but wives who use them, the majority are knowledgeable, 21 people are good enough, 12 people are enough, and 7 people are less. Meanwhile, 1 respondent whose husband and wife do not use any contraception, and the respondent has sufficient knowledge.

5. AUTHORS' CONTRIBUTIONS

| | |
|-----------------------------|--|
| Concept & Research Question | Sherkia Prakasiwi |
| Conducting Research | Sherkia Prakasiwi, Nuke Indrawati, Ariyani Lutfitasari, Indri Purwanti |
| Statistical Analysis | Sherkia Prakasiwi, Ariyani Lutfitasari |

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| Concept & Research Question | Sherkia Prakasiwi |
| Report Writing | Sherkia Prakasiwi, Nuke Indrawati, Ariyani Lutfitasari, Indri Purwanti |

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