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THE INFLUENCE OF REPRODUCTIVE HEALTH COURSE ON KNOWLEDGE AND ATTITUDE TO PROSPECTIVE BRIDES IN KOTO TANGAH SUB-DISTRICT OF PADANG CITY

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ABSTRACT

Background: Pre-pregnancy preparation has a positive impact on the preparedness and health of mothers and children in pregnancy period. Premarital counseling on reproductive health has not become a routine agenda for Prospective brides. This study aims to determine the effect of the Prospective brides' course of reproductive health on the knowledge and attitudes of the couple in the

Koto Tangah District of Padang City.

Methods: The Writer used Pre experimental study with pre-posttest designed. The sample of this study was prospective brides' consisting of seventy of people taken by purposive sampling technique. The inclusion criterion is first marriage to a couple. The process of data collected and implemented of interventions held from May until June in 2016. The knowledge and attitude to Prospective brides were tested by a pre-post test using a questionnaire.

Results: Before getting the course respondent got a score of around 46.1% per cents of knowledge about reproductive health. After courses, the respondent got score 65.8 per cents knowledge about reproductive health. Before getting the course 51.3% of respondents had a positive attitude and became 65.8% after obtaining the course. Based on the results of the analysis there are significant differences in the knowledge and attitudes to respondents before and after obtaining reproductive health courses.

Conclusion: Reproductive health courses influence the knowledge and attitudes of prospective brides in Koto Tangah District, Padang City in 2016.

KEYWORDS: Reproductive Health Course, Knowledge, Attitudes of Prospective Brides

INTRODUCTION

The process of community empowerment especially in solving various maternal and child health problems can be done before marriage. Previous studies have shown that preparation before pregnancy has a positive impact on readiness and care about pregnancy period. Positive effects are given on the health of mothers and children (Danish Walsh,

Every year is estimated to do the wedding, 2.135.000 couples this moment is an opportunity to resuscitate the community will reproductive health which will contribute to increasing the public health which ultimately improves the quality of life of the nation. On the other side, the high number of divorce rate, especially at the age of marriage is less than five years and the number of cases of domestic violence is the cause of the issuance of the Ministry of Religious Affairs Decree and also Circular from the Director-General of Guidance of Islamic societies. The regulation mandates that knowledge of marriage must be given as early as possible, before marriage is carried out, namely through a bride-to-be course (Ministry of Religious Affairs, 2011).

Before entering the many marriage preparations by either by the family as well as a spouse, the couple who want to get married have to do a premarital test or premarital health tests. One that must be fulfilled and is a mandatory rule of the government is the tetanus toxoid vaccine (TT), which is given to prospective brides. This physical preparation is related to administration, namely, the certificate has tetanus toxoid which is useful to complete the file in the Office of Religious Affairs (KUA). The letter issued by the authorities on this media has been an official government regulation since 1986 and is a long-term program established by the government to eradicate tetanus. Before the wedding has been done, each of these brides must first be given insight into the meaning of a household through a bride-to-be course (suscatin). By following the prospective bride through a bride-to-be course it should be equipped with basic material knowledge and skills around married life including material about reproductive health (Ministry of Religious Affairs, 2011).

Some research results from several countries in Murray CE and Murray TL (2004) found that couples who get pre-marital counseling show better psychological health, do not have serious problems with marital relationships and premarital counseling can help brides get a possible solution happened in his marriage. Another study conducted by Yulizawati, et al (2016) in Agam District found that peer education methods of health education affected improving attitudes of women of childbearing age about premarital screening.

A similar study was carried out on the Prospective brides in Lubuk Begalung, in Padang City. The study was conducted by providing pre-

marital health education to brides. The results showed the effect of health education on the knowledge and attitudes of prospective brides. But in this study, pre-post test measurement was carried out with short time intervals. The difference between this study is the method of giving repeated courses and post-test measurements taken after marriage (Susanti, et al, 2018).

Based on the results of a previous study to the Office of Religious Affairs (KUA) District in Koto Tangah, Padang City, it is known that in the last five years the requirements that require tetanus toxoid vaccine (TT) immunization did not become an absolute requirement in obtaining a marriage license. Besides that, special material for reproductive health has not been scheduled in Suscatin because there is no coordination with health workers. The results of interviews for four pairs of prospective brides, on average, do not understand about reproductive health and from the trial questionnaire as many as fifteen questions, no couple of bride answered correctly more than three questions. From the marriage registration data, it is known that the average number of couples registering for marriage range from 50-100 couples per month with the number attending the hearing weekly, which is every Tuesday, from fifteen to thirty-five of people. Based on the description of, the research team wanted to develop a bride-to-be course by adding reproductive health material to the couple that will get to marry to Religious Affairs office in Koto Tangah.

METHODS Study Design

This was a pre-experimental study with one group pre-post test design.

Sample/Participants

The population of this study was the prospective brides that came to the office of Religious Affair (KUA) Koto Tangah District during the research. Based on the previous study, KUA officers and health workers in the region strongly support the implementation of research to improve the quality of community program services. This subdistrict is the sub-district with the largest area and most crowded population of the city of Padang. Based on previous information, in one month there are fifty until one hundred couples who apply for marriage and participate in a scheduled on Tuesday every week. The number of prospective brides is estimated to meet the needs of the sample of research. Besides, based on the health profile of Padang City in 2014, this sub-district is one of the sub-districts with the most maternal and children health problems. The sample size of this study was taken by accidental sampling. The inclusion criterion in this study was the willingness to be a respondent and take a bride-to-be course of reproductive health for one hundred and eighty minutes and was the first marriage.

Instrument

Measurement of the level of knowledge of respondents using a questionnaire that contains questions about the reproductive health of the prospective brides. These questions are arranged based on twelve of components that the couple must understand about reproductive health which consists of thirty multiple-choice questions. Meanwhile, to measure the attitude to respondents used statements that contain the attitudes of respondents about the reproductive health of prospective brides. This attitude statement consists of twenty statements consisting of positive and negative statements by a Likert scale. Questionnaires about knowledge and statements about previous attitudes were tested for validity and reliability. The media used for the prospective brides' course is using a slide powerpoint adapted from the reproductive health counseling material of the prospective brides from the Ministry of Health in 2014 which was modified according to the local culture.

Intervention

Respondents will take a pretest containing questions about reproductive health and statements about attitude. Furthermore, respondents will take courses of reproductive health for one meeting with a duration of one hundred and eighty minutes each with lecture, discussion, and case methods. The material for reproductive health courses of prospective brides was adopted from the reproductive health materials for prospective brides 2014 which were modified based on the local culture. After attending the course activities, the couple will take the posttest with a questionnaire about the same knowledge and attitude statement with the pretest instrument. The procedure for posttest for the level of knowledge is carried out immediately after the course is finished. As for the attitude carried out after one month of course implementation. The consideration for this is to the accuracy of the results of the study that is for the process of attitudes to be more educated required knowledge and experience in the individual concerned. With the experience of marriage to one month is expected to provide a change in the attitude to respondents. Respondents were informed to replenish their attitude questionnaire and return it to the office of religious affairs (KUA) after one month of marriage. The researcher also asked for the respondent's telephone number and home address if after one month of researching the respondent had not returned the attitude questionnaire, the researcher would search to the respondent's home address.

Data Collection

The research was conducted from April until October in 2016. Data were collected by researchers with the help of assistants that had equated their perceptions of the aims and objectives of the researcher.

Data Analysis

Data analysis was performed to see the effect of reproductive health courses on the knowledge and attitudes to prospective brides. In this study data analysis was performed by Mc Nemar

Ethical Clearance

This study has been getting ethical clearance from the ethics committee of the Faculty of Medicine of Andalas University (No.168 / KEP / FK / 2016). Respondents in this study have given informed consent to this study and are willing to participate by signing a letter of informed consent.

RESULTS

Characteristics of the Respondents

Characteristics of the respondents in this study consist of age, sex, ethnicity, and education level. The distribution of the respondents' characteristics is shown in the table below.

Table 1 Distribution of general characteristics

No	Variables	F	%
1	Age		
	Under-aged	25	32.9
	• Ideal	51	67.1
2	Gender		
	• man	38	50
	• woman	38	50
3	Tribes		
	 outer of minangese 	9	11.8
	 minangese 	67	88.2
4	Education		
	 High education 	67	100
	 Low education 	0	0

Table 2 knowledge and attitude prospective brides before and after the course

Variables	Before course	After the course	P value
Knowledge (n i=38; n k=38) Low High	41 (53%) 35 (46.1%)	26 (34.2%) 50 (65.8%)	0.011
Attitude (n i=38; n k=38) negative positive	37 (48.7%) 39 (51.3%)	26 (34.2%) 50 (65.8%)	0.035

Table 2 shows that there is an effect on the provision of reproductive health courses of the knowledge of the prospective brides in the Koto Tangah District of Padang City (p-value = 0, 011). Also, table 2 shows that there is an effect of giving reproductive health courses of the attitude to prospective brides in the Koto Tangah, in Padang City (p-value = 0, 035).

DISCUSSION

The results showed that there was a relationship between age and knowledge after the prospective brides' reproductive health courses in Koto Tangah District, Padang City in 2016. Various conceptual as outlined in determining the age limit of marriage are very varied. The Ministry of Religion categorizes underage marriages, which is between the ages of 15-19 years, the Ministry of Health categorizes 10-19 years while the WHO determines 12-24 years. At present the government program through the National Family Planning Coordinating Agency (BKKBN) has launched an effort to reduce the age of marriages (PUP) for Indonesian citizens, aged twenty years old or older than it. The results of this study are in line and support for the new policy implemented since 2016. The results of this study interpret that brides who have an ideal age for marriage that is 24 years and older show an increase in their knowledge after attending the course. Thus it can be concluded that the more mature a person is, the easier it will be to understand the information provided. The information he receives is what can later become a provision for acting and acting.

Knowledge (Know) is also interpreted as a result of the human being or the result of knowing someone about an object of the senses they have, by it self at the time of sensing to produce knowledge. This is strongly influenced by the intensity of attention and perception of the object. Knowledge is a very important domain so that the formation of one's actions is also influenced by the existence of self-motivation, experience, and support from their families (Notoadmodjo, 2014).

In the wide variety of the learning methods that can be done. In this study, the learning methods used are lectures, small group discussions, and case studies. Based on the Indonesian Ministry of Health (in 2012) states that adult learning is very suitable to use the learning methods as outlined above. In the course of this course, the material is given by brainstorming method, followed by a small group discussion that is there are five small groups with one group of 4 people, here also a case study is conducted by giving interesting cases that they may experience in marriage later. In this case, they were asked to discuss the case. With this learning method, the atmosphere becomes interesting which makes participants not bored.

The results of this study also showed that there was an effect of reproductive health course on the attitude to the prospective brides in Koto Tangah, Padang City in 2016. The attitude was someone's readiness or willingness to act. Attitude is not an action or activity, but it is a predisposition to an action or behavior. An attitude has not automatically manifested in action. Please note that the attitude to the couple is a supporter in his preparedness in dealing with a marriage that created a happy family.

The Ministry of Religious Affairs' policy outlined in KMA No. 74 of 2010 which stipulates that every couple must be required to take a 24-hour course in 3 hours including a reproductive health course. The policy is expected to be able to contribute to the attitude to the couple that later can be the basis of them in taking action on reproductive health for their families. Murray CE and Murray TL (2004) also found that couples who get pre-marital counseling show better psychological health, do not have serious problems of marital relationships and premarital counseling can help the prospective brides get a solution that might occur in her marriage. Other research conducted by Rahim R, et al (2013). The couple of courses of reproductive health can increase respondents' knowledge by 29.6% and respondent attitudes

increase by 81.5%. Similar research conducted in Yogyakarta stated that there were differences in readiness before and after premarital education. There is an influence of premarital education on readiness in facing the first pregnancy of the bride and groom in Kalasan District (Rosmawati, I, 2013).

CONCLUSION

- There is an effect of reproductive health courses of the knowledge of the prospective brides in Koto Tangah Sub-District of Padang City (p-value 0.011).
- There is an effect of reproductive health courses of the attitude to the prospective brides in Koto Tangah Sub-District of Padang City (p-value 0.035)

REFERENCES

- Kementeriaan Agama. 2014. Hambatan dan potensi sumberdaya lokal dalam mengurangi resiko kematian ibu. Jurnal Kesehatan Reproduksi. Vol 5(1) April 2014.
- Kementeriaan Agama, 2011. Pedoman Penyelenggaraan Kursus Pra Nikah no. 372 Tahun 2011
- Kementerian Kesehatan, 2012. Lembar balik kesehatan reproduksi dan seksual bagi calon pengantin. Jakarta.
- Kementerian Kesehatan, 2014. Kurikulum dan modul pelatihan kegawatdaruratan obstetrik dan neonatal bagi pendidik. Jakarta.

 Murray CE and Murray TL (2004). Solution and focused premarital counceling, helping
- 5.
- Notice of their marriage. Journal of marital and family therapy. 30 (3), 349-58.

 Notoadmodjo, S. 2014. Pendidikan dan perilaku Kesehatan. Jakarta: Rineka Cipta Yulizawati, dkk (2017). Pengaruh Pendikan Kesehatan metode peer education mengenai skrining pre konsepsi terhadap pengetahuan dan sikap wanita usia subur di wilayah Kabupaten Agam tahun 2016. Journal of Midwifery 1(2) 11-20.2017
- Rosmawati, I (2013). Pengaruh Pendikan Pranikah terhadap Kesiapan Menghadapi Kehamilan Pertama pada Calon Pengantin Putri di KUA Kecamatan Kalasan Sleman Yogyakarta Tahun 2013
- Yogyakarra Ianun 2013 Susanti, D, Rustam, Y, Doni, A.W (2018). Pengaruh Pendidikan Kesehatan Pranikah terhadap Pengetahuan dan Sikap Calon Pengantin di Lubuk Begalung Padang.Jurnal Sehat Mandiri.13(2), 18-25.
 Wals, V. Danish. 2007. Evidence Based care for normal labour. A guide for midwife.
- New York. Taylor and Francis. E Library.