

Analysis of Factors Affecting the Selection of Midwives and Shaman Labor Workers in Haria State Saparua District

Joanne Juliette Fransz¹, Indar², Sukri Palutturi², Darmawansyah²,
Saifuddin Sirajuddin³, Syamsuar Manyullei⁴, Suci Rahmadani²

¹Magister Student, Program Department of Health Administration and Policy, Public Health Hasanuddin University, ²Professor of Department of Health Administration and Policy, Public Health Hasanuddin University, ³Professor of Department of Nutrition, Public Health Hasanuddin University, ⁴Senior Lecturer of Department of Environment Health, Public Health Hasanuddin University

Abstract

Maternal mortality ratio (MMR) is an important indicator of a country's public health. MMR is currently the highest number in Southeast Asia. The coverage of childbirth in 2018 Haria State is 66.67%, still far from the Target Of Central Maluku Regency in 2018 which is 76.27%. There are 14 active child shamans who are trained shamans and there are still many wild shamans who do maternity assistance, while only 3 midwives. The purpose in this study is to analyze the factors that influence the selection of midwives and shaman laborers in Haria State saparua sub-district. This research is quantitatively descriptive using cross sectional design. The population in this study was mothers who performed childbirth, either stillborn or born alive in the working area of Porto Haria public health center saparua sub-district in 2018. The sampling used total sampling, namely all mothers who did childbirth helped by midwives as many as 62 respondents and shamans as many as 31 respondents in Haria State in 2018. Data analysis uses univariate and bivariate analysis. The results showed no influence between the number (parity) of children on the selection of maternity helpers in Haria State saparua sub-district (p value=0.769), There is a work influence (p value = 0.012), knowledge (p value = 0.000) and attitude (p value = 0.000) on the selection of labor helpers in Haria State saparua sub-district. It is important to improve the mother's knowledge of healthy childbirth and instill a positive attitude towards health workers so that the mother will choose a healthcare person as a helper in childbirth.

Keywords: *Knowledge, attitude, parity, maternity helper.*

Introduction

Maternal mortality ratio (MMR) is an important indicator of a country's public health. According to WHO (World Health Organization) data cited by Donsu (2014) in most cases of maternal death in the world occurs in developing countries including Indonesia. Currently MMR in Indonesia is the highest

rate in southeast Asia. The most deaths occur due to complications during pregnancy, childbirth, and 42 (forty-two) days postpartum with causes directly or indirectly related to pregnancy. Maternal Mortality Ratio (MMR) is one indicator to see the success of maternal health efforts. MMR is the ratio of maternal mortality during pregnancy, childbirth caused by pregnancy, childbirth, its management but not for other causes such as accidents or falls in every 100,000 live births².

Mothers have a large role in infant growth and child development, health problems experienced by pregnant women can affect fetal health and the growth of children³⁻⁸ The risk of maternal death occurs most in the period of childbirth and the period of childbirth contributes greatly to the maternal mortality rate in Indonesia. Maternity deaths and the first week are

Corresponding Author:

Joanne Juliette Fransz

Magister Student, Program Department of Health Administration and Policy, Public Health Hasanuddin University

e-mail: julietfranz.oei@gmail.com

estimated to be 60% of all maternal deaths. Factors that influence the cause of behavior are distinguished in three types, namely predisposition factor, enabling factor, and reinforcing factor. Predisposition factor is antecedent factor towards behavior that is the basis or motivation of behavior. A possible factor is antecedent factor in behavior that allows motivation or inspiration to take place. The reinforcement factor is a factor that dates after the behavior rewards, incentives or penalties for behavior and plays a role towards settling or disappearance of that behavior¹⁰.

Maternity assistance by trained health workers is critical in efforts to reduce maternal mortality ratio as it can help identify medical problems and help families seek emergency care^{8,11-17}. In 2011 the Ministry of Health established a policy that all childbirth should be carried out by trained health workers and started the Maternity Assurance program, which is a package of programs that includes antenatal services, childbirth, postnatal and Family Planning¹⁸. The treatment of toddlers in the working area of Porto Haria Public Health Center in 2019.

Data in 2018, from 7 countries in Saparua sub-district, there are 2 states with the help of shaman labor (mama biang), namely Haria State and Kulur State while the other 5 states 100% maternity assistance has been done by health workers. Haria state is the country with the highest population in Saparua Sub-district, 6,674 people, also with the highest number of maternity assistance by mama biang (shaman) which is 32 mothers and kulur country with the least number of souls in Saparua sub-district, 952 people, there were 8 mothers in the same year¹⁹. The purpose in this study is to analyze the factors that influence the selection of midwives and shaman maternity helpers in Haria State Saparua sub-district

Materials and Method

The type of research used in this study is quantitative descriptive research with cross sectional design where independent and bound variable (dependent) variables are collected simultaneously. The population in this study was mothers who performed childbirth, either stillborn or born alive in the working area of Porto Haria Public Health Center at Saparua sub-district in 2018. The sampling used total sampling, namely all mothers who performed childbirth were helped by midwives as many as 62 respondents and shamans as

many as 31 respondents in Haria State in 2018. Data analysis using univariate and bivariate statistical analysis.

Results

Table 1 shows that out of 93 respondents based on the selection of the most maternity helpers were those who chose childbirth helped by health workers which was 62 people (66.7%) and the fewest were respondents who chose childbirth helped by 31 shamans (33.3%).

Table 1. Distribution of Respondents based on the Selection of Childbirth Helper in Haria State, Saparua District

Childbirth Helper	n	%
Health workers	62	66.7
Shaman	31	33.3
Total	93	100.0

Source: Primary Data 2020

Table 2 shows that out of 93 respondents based on the highest number of children is the number of children with a high risk of 49 people (52.7%) while the least number of children with low risk was 44 (47.3%). Based on the most jobs are the respondents who are not working which is 73 people (78.5%) and the fewest are respondents who work with a fixed income of 20 people (21.5%) working as a civil servant and self-employed. Based on the most knowledge are respondents with high knowledge who can answer correctly $\geq 70\%$ of questions in the questionnaire which is 53 people (57.0%) and the least low knowledge as many as 40 people (43.0%). Based on the most attitude variables are respondents with a positive attitude of 70 people (75.3%) and the fewest were respondents with negative attitudes of 23 people (24.7%)

Table 2: Distribution of Respondents Based on Research Variables in Haria state, Saparua District

Variable	n	%
Number of Children (Parity)		
Parity 2 - 3	44	47.3
Parity 1 or > 3	49	52.7
Profession		
Work	20	21.5
Does not work	73	78.5

Variable	n	%
Knowledge		
High knowledge	53	57.0
Low knowledge	40	43.0
Attitude		
Positive	70	75.3
Negative	23	24.7
Total	93	100.0

Source: Primary Data 2020

Based on Table 3 statistical test results obtained p value value = 0.769, because the value $p > \alpha = 0.769 > 0.05$ then H_0 is accepted, this means that there is no statistically meaningful influence of the number of children on the selection of labor helpers in Haria State

Saparua Sub-district. Statistical test results are obtained p value = 0.012, because the value $p < \alpha = 0.012 < 0.05$ then H_0 is rejected, this means that there is a statistically meaningful influence between the work variables on the selection of labor helpers in Haria State Saparua Sub-District. The statistical test result was obtained p value = 0.000, because the value $p < \alpha = 0.000 < 0.05$ then H_0 was rejected, this means that there is a statistically meaningful influence between knowledge of the selection of labor helpers in Haria State Saparua Sub-District. The statistical test result was obtained p value = 0.000, because the value $p < \alpha = 0.000 < 0.05$ then H_0 was rejected, this means that there is a statistically meaningful influence between attitudes towards the selection of labor helpers in Haria State Saparua sub-district.

Table 3: Relationship of Research Variables to Selection of Childbirth Helper in Haria state, Saparua District

Variable	Childbirth Helper				Total		p-value
	Shaman		Health workers		N	%	
	n	%	n	%			
Number of Children (Parity)							
Parity 2-3	14	31.8	30	68.2	44	100	0.769
Parity 1 or > 3	17	34.7	32	65.3	49	100	
Profession							
Work	2	10.0	18	90.0	20	100	0.012
Does not work	29	39.7	44	60.3	73	100	
Knowledge							
High	2	3.8	51	96.2	53	100	0.000
Low	29	72.5	11	27.5	40	100	
Attitude							
Positive	12	17.1	58	82.9	70	100	0.000
Negative	19	82.6	4	17.4	23	100	
Total	31	33.3	62	66.7	93	100.0	

Source: Primary Data, 2019

Discussion

The last approach to solving health problems is the setting approach. This approach emphasizes a region²⁰⁻²⁴. The handling of declining maternal and infant mortality rates needs to be addressed with this kind of approach to avoiding sectoral egos. The reason maternity mothers who choose a childcare helper (mama biang) is mostly

due to the cultural factor^{5,25} where most mothers never do maternity assistance to health workers. Various problems can also occur due to various diseases and nutritional problems such as stunting^{3,26-31}. From the results of the interview, the most reason is because mama biang service is more “thorough” than starting to massage the mother to sometimes wash the mother’s

clothes, and mama biang is considered to understand and obey the will of the mother compared to the health workers. So although it has been supported by the family to choose childbirth on health workers and pregnancy screening services are carried out by health workers, but the final decision is on the mother (the mother's own desire) to choose a shaman or health professional.

Parity is confounding on the relationship between age and the selection of maternity helpers, attitudes with the selection of maternity helpers and family support with the selection of maternity helpers. This means that although parity does not have a significant direct relationship with the selection of maternity helpers but also affects the relationship of age with the selection of maternity helpers, attitudes with the selection of maternity helpers and family support with the selection of maternity helpers.³²This indicates parity affects maternal age, attitudes towards maternity helpers and family support. This means that the more parity the older the mother, the more positive the mother's attitude towards maternity helper and the greater the family support towards the maternity helper, because based on the experience of previous childbirth.³³However, these results are not in line with Nurul's research (2018) although statistical test results both state there is no significant influence but mothers with high parity prefer shamans as helpers over health workers. This can be because mothers with high parity do not know the dangers of pregnancy and childbirth and childbirth are survived and without problems despite being helped by a baby shaman.³⁴

The mother's work in this study was measured into two, namely work that has a job and a monthly fixed income, including civil servants, private, Indonesian National Army / Police of the Republic of Indonesia and mothers who do not work who do not have a job and a fixed income every month namely housewives and farmers. The knowledge examined in this study is everything that mothers know about pregnancy and childbirth.³⁵

The knowledge studied in this study is everything that mothers know about pregnancy and childbirth. Weaving was measured into two low knowledge and high knowledge based on the mother's answers to 10 questions asked about pregnancy and childbirth in the questionnaire. Where knowledge is low when giving <70% correct answers and high knowledge when answering $\geq 70\%$ true, where unfilled answers are

not counted. The results showed that low-knowledge maternity mothers were 40 (43.0%), while those with knowledge were 53 (57.0%) People. This means that more than half of the maternity mothers studied in Haria State saparua sub-district have high knowledge. The average mother with high knowledge is a minimum of high school graduates. This study in line with the research conducted by Limbong et al (2020) shows there is a relationship between knowledge and attitude with the selection of labor helpers in the public health center totoli region³⁶. Other research conducted by Okdarisna et al (2020) shows there is a knowledge relationship with the selection of labor helpers in the Public Health Center Janthomas Working Area³⁷.

The attitudes in this study were the response of the mother to pregnancy and childbirth divided into two measuring results namely positive and negative attitudes obtained from 10 statements of attitudes Agree, disagree or do not know. Attitude is readiness or awareness to act, attitude is not yet an open reaction or activity, but a closed reaction. This attitude can change from positive or otherwise because it is influenced by knowledge, thoughts, beliefs and emotions. Therefore, in order for the attitude to be positive needs education in the form of information about health, especially in the selection of maternity helpers. The results of the analysis of attitude variables obtained that there were as many as 23 (24.7%) Mother's negative attitude. As for mothers who are positive, there are as many as 70 (75.3%) and most who have a positive attitude, choosing maternity assistance in health workers is 58 (82.9%). Research conducted by Fahriani et al (2020) shows there is a significant link between the attitude of maternity mothers and the selection of maternity helpers in the working area of public health center nimbang, district south musirawa³⁸.

Conclusion

There is a meaningful relationship with the selection of labor helpers is work, knowledge and attitude. And what affects significantly is knowledge and attitude. Respondents who had more knowledge of childbirth were carried out by health workers. And respondents with more positive attitudes than those who had negative attitudes and also seen in the selection of maternity helpers where 82.9% of respondents with a positive attitude chose to perform childbirth helped by midwives. So attitudes can change from positive or otherwise because they are influenced by knowledge, thoughts, beliefs and emotions. Therefore, in order for the attitude

to be positive needs education in the form of information about health including in the selection of labor helpers. This means that if a mother is positive about the helper of childbirth then the mother will choose the person to help her childbirth. Therefore it is very important to increase the mother's knowledge of healthy childbirth and instill a positive attitude towards health workers so that the mother will choose a healthcare person as a helper in childbirth.

Ethical Clearance: Taken from Faculty of Public Health ethical committee

Source of Funding: Self

Conflict of Interest: Nil

References

- Lia d. Determinan Pemanfaatan Dukun Bayi Dalam Pendamping Proses Persalinan Di Desa Bulu Cina Kecamatan Hampan Perak Kabupaten Deli Serdang. *Jurnak AKRAB JUARA*. 2019;Volume 4 Nomor 1.
- Kemendes RI. *Profil Kesehatan Indonesia*. Jakarta: Kementerian Kesehatan; 2019.
- Amiruddin R, Palutturi S. The Effect of Ammuntuli Bija Tianang Na Beja-Beja Model on Knowledge, Motivation, and Attitude of Pregnant Women's Health Services in Jenepono District, Indonesia. *Indian Journal of Public Health Research & Development*. 2019;10(9):763-768.
- Amiruddin R, Palutturi S, Rahman SA. Increasing Midwifery Skill for Pregnancy Health Care with Ammuntuli Bija Tianang Na Beja-Beja Model. *Indian Journal of Public Health Research & Development*. 2018;9(9).
- Asrina A, Palutturi S, Andyanie E. Culture and health behavior of buton society of Baubau City, Southeast Sulawesi. *Indian Journal of Public Health Research & Development*. 2018;9(9):315-318.
- Asrina A, Palutturi S, Tenri A. Dole-Dole Tradition in Health Seeking Behavior of Buton Society, Southeast Sulawesi. *Indian Journal of Public Health Research & Development*. 2018;9(7):270-274.
- Thaha RM, Palutturi S. The Behaviour of Consuming Alcohol of Adolescents in South Bolaang Mongondow Regency of North Sulawesi Province. *Indian Journal of Public Health Research & Development*. 2019;10(4):980-983.
- Said M, Palutturi S. Increasing inpatient service quality of using quality function deployment method in nene mallomo hospital of sidrap regency, Indonesia. *Indian Journal of Public Health Research & Development*. 2018;9(4):287-291.
- Nurrahmiati. *Faktor-Faktor Yang Berhubungan Dengan Cakupan Persalinan Oleh Tenaga Kesehatan di Provinsi Banten [thesis]*, FKM-UI; 2010
- Andi Nahlah SP, Muh. Yusri Abadi. Factors Related to the Satisfaction of Patients in Pelamonia Hospital. *Indian Journal of Public Health Research & Development*. 2019;10(7):5.
- Irene Elyse Juniana MYA, Sukri Palutturi. Faktor yang Berhubungan dengan Pemanfaatan Pelayanan Antenatal Care (ANC) Pada Ibu Hamil Di Puskesmas Tamalate Kota Makassar: Administrasi dan Kebijakan Kesehatan, Universitas Hasanuddin; 2015.
- Rahmawati D, Moedjiono AI, Palutturi S. The Effect of Health Center Service and Role of Husband Towards Contraceptive Use in Makassar City, Indonesia. *Health Notions*. 2019;3(7):314-321.
- Tahir M, Amiruddin R, Palutturi S, Rivai F, Saleh LM. Religious Character in Improving Primary Health Services Quality in South Sulawesi. *Indian Journal of Public Health Research & Development*. 2019;10(10):1428-1432.
- Amiruddin R, Palutturi S, Rahman SA. Training effect to the knowledge and skills of midwives in maternity health services at primary health care. *International Journal Of Community Medicine And Public Health*. 2018;5(11):4651-4655.
- Tahir M, Amiruddin R, Palutturi S, Rivai F, Saleh LM. Quality Evaluation of Health Services at Community Health Centers: through Accreditation Surveys in Indonesia. *Indian Journal of Public Health Research & Development*. 2020;11(1).
- Hafsa AM, Maidin A, Palutturi S. Policy Concept of Public Health Services on Regionalization of JKN Referral Systems in Border Areas. *Indian Journal of Public Health Research & Development*. 2019;10(8):1298-1302.
- Indar, Nurhayani, Amir MY, Darmawansyah, Palutturi S, Hernadi. Legal Aspects of Emergency Medical Services Department of Wahidin Sudirohusodo Hospital, Makassar Indonesia. *Indian*

- Journal of Public Health Research & Development. 2018;9(5):16-20.
18. Hutapea. Faktor-Faktor Yang Berhubungan Dengan Pemilihan Penolong Persalinan Di Wilayah Kerja Puskesmas Cibungbulang Kecamatan Cibungbulang Kabupaten Bogor Jawa Barat. Depok, FKM UI; 2012.
 19. Profil Puskesmas Porto Haria. Profil Puskesmas Porto Haria. Provinsi Maluku: Puskesmas Porto Haria; 2019.
 20. Palutturi S, Chu C, Moon JY, Nam EW. A Comparative Study on Healthy City Capacity Mapping: Indonesia and Korea. *The Social Sciences*. 2015;10(6):848-854.
 21. Palutturi S, Rutherford S, Davey P, Chu C. Comparison Between Healthy Cities and Adipura in Indonesia. *Malaysian Journal of Medicine and Health Sciences*. 2013;9(1):35-43.
 22. Palutturi S, Zulkifli A, Syam A. The Key Challenges and Recommendations for Healthy Cities Implementation of North Kolaka, Indonesia. *Indian Journal of Public Health Research & Development*. 2017;8(2):252-257.
 23. Palutturi S, Rutherford S, Davey P, Chu C. Professional Challenges to Strengthen Partnerships in the Implementation of Healthy Cities in Indonesia: A Case Study of Makassar. *Research Journal of Medical Sciences*. 2015;9(3):147-153.
 24. Palutturi S, Arifin MA. Re-Standardization Makassar Healthy City based on Local Needs. *Indian Journal of Public Health Research & Development*. 2019;10(2).
 25. Latu S, Maidin A, Palutturi S. Implementation of family planning program policy based on culture in Jayawijaya Province of Papua. *Indian Journal of Public Health Research & Development*. 2018;9(8):54-58.
 26. Palutturi S, Sahiddin M, Ishak H, Hamzah. Community Motivation and Learning to Pay the National Health Insurance Contribution. *Asian Journal of Scientific Research*. 2018;11(2):276-286.
 27. Noor NB, Amiruddin R, Awal M, Palutturi S, Mallongi A. Proxy model of comorbidities with stroke incident in South Sulawesi. *Pak. J. Nutr.* 2017;16:857-863.
 28. Awal M, Amiruddin R, Palutturi S, Mallongi A. Relationships between lifestyle models with stroke occurrence in South Sulawesi, Indonesia. *Asian Journal of Epidemiology*. 2017;10(2):83-88.
 29. Kamba I, Razak A, Saifuddin S, Palutturi S. The Effect of Video on the Change of Attitude Toward Stunting Prevention among Children in State Senior High School 1 Topoyo, Central Mamuju. *Indian Journal of Public Health Research & Development*. 2019;10(8):1315-1320.
 30. Palutturi S, Syam A, Asnawi A. Stunting in a political context: A systematic review. *Enfermería Clínica*. 2020;30:95-98.
 31. Kamba I, Razak A, Saefuddin S, Palutturi S. Video Effect for the Prevention of Knowledge Increasing Stunting in State High School 1 Children in Topoyo Central Mamuju. *Indian Journal of Public Health Research & Development*. 2019;10(10):1422-1427.
 32. Andi Asrina SP, Ella Andayanie. Culture and health behavior of buton society of Baubau City, Southeast Sulawesi. *Indian Journal of Public Health Research & Development*. 2018;9(9):4.
 33. Fairus Prihatin Idris SPP. The Relationship between Mother's Knowledge, Attitudes and Beliefs to Exclusive Breastfeeding in Jeneponto District. *International Journal of Innovation, Creativity and Change*. 2019;8(5):16.
 34. Nurul Husnul Lail WS. PEMILIHAN TENAGA PENOLONG PERSALINAN DI DESA PANANCANGAN KECAMATAN CIBADAK KABUPATEN LEBAK PROVINSI BANTEN TAHUN 2017 *Jurnal Akademi Keperawatan Husada Karya Jaya*. 2018;4(1):20.
 35. Amriani Madani S, Indar. FAKTOR YANG BERHUBUNGAN PEMBERIAN ASI EKSKLUSIF DI WILAYAH KERJA PUSKESMAS PEKKAE KABUPATEN BARRU. *ISSN*. 2014;3(6).
 36. Limbong T, Sukarta IM, Sonda M. HUBUNGAN PENGETAHUAN DAN SIKAP IBU DENGAN PEMILIHAN PENOLONG PERSALINAN DI WILAYAH PUSKESMAS TOTOLI KABUPATEN MAJENE. *Media Kebidanan*. 2020;1(1):15-19.

37. Okdarisna NR, Rafsanjani T. FAKTOR YANG BERHUBUNGAN DENGAN PEMILIHAN TENAGA PENOLONG PERSALINAN DI WILAYAH KERJA PUSKESMAS JANTHO TAHUN 2019. *Majalah Kesehatan Masyarakat Aceh (MaKMA)*. 2020;3(1).
38. Fahriani M, Sitorus E. HUBUNGAN SIKAP IBU BERSALIN DAN DUKUNGAN KELUARGA DENGAN PEMILIHAN PENOLONG PERSALINAN DI WILAYAH KERJA PUSKESMAS NIBUNG KABUPATEN MUSI RAWAS UTARA. *An-Nadaa: Jurnal Kesehatan Masyarakat*. 2020;6(1).