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Danger Signs and 4T Risk Factors of Pregnant Women



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Abstract

The number of cases of maternal death in 2020 was 122, an increase of 25 cases compared to 2019, which was 97 cases of maternal death. The highest number of maternal death cases was in West Lombok district with 43 cases. The maternal mortality rate in NTB Province has increased from 93.92 per 100,000 live births to 119.05 per 100,000 live births. When compared with the performance achievements in the RPJMN, the NTB province is still below the national target. The 4T factors (too old, too young, too closely spaced between pregnancies and too many children) can increase cases of complications in the mother. Birth interval between one child and another child of less than 2 years can increase the risk of maternal death. Delivery at intervals of less than 24 months (too often) is a high-risk group for postpartum hemorrhage. This research aimed to determine the risk factors experienced by pregnant women so that prevention can be taken to prevent maternal death during childbirth. The research method used a quantitative analytical observational with a Focus Group Discussion (FGD) approach. The research results showed that pregnant women did not understand the danger signs and risk factors for 4T, so that pregnant women are able to take preventive measures. Apart from that, this research also provides anticipatory solutions so that pregnant women and their husbands can avoid further complications related to the risks of 4T. This research concludes that the understanding of pregnant women and their husbands regarding the danger signs and risks of 4T has increased so that they are able to know the mother's condition during pregnancy and are able to plan and have a healthy pregnancy.

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INTRODUCTION

The maternal mortality rate in NTB Province has increased from 93.92 per 100,000 live births to 119.05 per 100,000 live births in 2019. When compared with the performance achievements in the RPJMN, the province is still below the national target. According to data from the NTB Health Service program (2013), the majority of maternal deaths (32%) were caused directly by bleeding and the majority of deaths (43%) were due to LBW cases. A more basic cause is the still high rate of early marriage. According to Riskesdas 2010, 41.6% of women in NTB married for the first time at the age of 15 - 19 years . (BPS NTB, 2021).

There are several factors that influence high risk pregnant women, namely young primiparas aged less than 16 years, old primiparas aged more than 35 years, secondary primiparas with the smallest child aged over 5 years, height less than 145 cm, bad pregnancy history (had a miscarriage, had a premature birth, stillbirth, and a history of delivery with procedures such as vacuum extraction, forceps extraction and caesarean section), pre-eclampsia, eclampsia, serotinus gravida, pregnancy with antepartum bleeding, pregnancy with position abnormalities, pregnancy with maternal disease that can affect pregnancy. (Mutiarra et al., 2022).

The existence of information regarding the high number of maternal deaths is useful in developing reproductive improvement programs, especially pregnancy services and creating safe pregnancies without high risks. The causes that still dominate are bleeding and hypertension. And maternal health services were not implemented according to standards (maternal classes, posyandu, ANC and KIA referral system) due to the Covid-19 pandemic. (BPS NTB, 2021).

In Indonesia, especially in rural areas, there are still many women who have low educational status, economic conditions and prevailing customs resulting in many young marriages. Perk benchmark Marriage in society is based on physical maturity (menstruation, body shape that shows secondary sexual signs) and things that are not at all related to the individual's readiness to face marriage. This results in high levels of teenage pregnancies.(Notoatmodjo et al., 2018). Therefore, this research aims to determine the level of understanding of pregnant women regarding the danger signs and risk factors of 4T (too young, too old, too close a pregnancy and too many children).

METHODS

This research was descriptive qualitative research with a cross sectional design. The research population was pregnant women who checked their womb at Batu Kute Polindes, while the sample was taken based on the inclusion and exclusion criteria totalling 22 respondents. The data collection was carried out by descriptive analytics, namely observation and interviews to determine the level of knowledge of respondents on the danger signs of the 4T risk factors in pregnant women. The data screening was first carried out to obtain data in accordance with the research criteria. The data were analysed using chi square and the Miles and Huberman technique, namely reducing data, presenting data and drawing conclusions. This research was located at Batu Kute Polindes, Narmada Health Centre Work Area, West Lombok Regency, NTB. The research was conducted from August 14, 2023 to October 7, 2023.

RESULTS

From the research results, data was obtained that the level of knowledge of pregnant women or respondents regarding the danger signs and risk factors of 4T in pregnancy varies according to the respondent's level of education, age and occupation.

Table 1: Distribution of Respondent Characteristics

Characteristics	F	Percent (%)
Age		
Age < 20 years	3	14
Age 20 – 35 Years	14	64
Age > 35 Years	5	22
Education		
elementary school	2	9
MiddleSchool/Equivalent	7	32
Senior High/Vocatioonal/Equivalent	11	50
College	2	9
Work		
Housewife	12	54
Self-employed / Private Employees	9	40
Civil servants	1	6
Level of Knowledge of Danger Signs and Risk Factors 4T		
Good	2	9
Enough	5	23
Not enough	15	68

From table 1 above, it can be seen that the level of understanding of pregnant women regarding the danger signs and risk factors of 4T is still very low, this could be due to the type of work they do or the level of education they have taken. Several previous similar studies also showed that pregnancies that are too close together can increase the risk of complications, premature pregnancy and miscarriage. (Mutiara et al., 2022).

Table 2: Relationship between education level, age of pregnant women and employment on the appearance of danger signs and risks of 4T in Polindes Batu Kute.

Kategori	Frekuensi			
	Not Appear		Appear	
Age	f	%	f	%
Age < 30 years	2	16,7	7	63,6
Age > 30 Years	10	83,3	4	36,4
Education				
Low	3	23,1	7	77,8
High	10	76,9	2	22,2
Work				
Unwork	4	33,3	8	80
Work	8	66,7	2	20

From the results of table 2, it is known that the percentage of danger signs appearing and the risk of 4T in pregnant women was found to be higher in respondents who were under 30 years of age, namely 63.6%: 36.4%. The results of the chi square analysis showed $p = 0.014 < \alpha 0.005$. Furthermore, in the Education category, it was found that pregnant women with low levels of education had higher levels of danger signs than pregnant women with high education, namely 77.8%: 22.2%. The chi square result is $p = 0.036 < \alpha 0.05$ and in the category of pregnant women who are not working and working, the percentage of danger signs appearing is 80%: 20% with the chi square result being $p = 0.013 < \alpha 0.05$. From the results of the analysis above, it can be concluded that there

is a significant relationship between the age of pregnant women, the level of education and occupation of pregnant women regarding the emergence of danger signs and the risk of 4T. The 4T risk factors, namely too young, too old, too close a pregnancy and too many children) can cause pre-eclampsia, eclampsia, serotinus gravida, antepartum hemorrhage and other pregnancy diseases. (Sulistiyowati & Senewe, 2014).

DISCUSSION

The research results showed that 9% of pregnant women recognized the danger signs and risk factors for 4T in pregnancy. This is influenced by the work environment and the desire to learn independently through online media. Meanwhile, 68% don't know at all. This is because they did not receive information about this matter. Furthermore, the level of education is low so they do not understand how to learn independently and seek independent information from online media. The respondents who knew some information regarding the danger signs and risks of 4T were the group of respondents who were in their third pregnancy. They obtained this information from counseling from health workers about the risks of pregnancy and childbirth for those aged >35 years and multigravida and grand multigravida pregnancies.

In line with Mutiara S (2022) research, entitled factors related to the risk of 4T in pregnancy at the Kampar Kiri Kepualaun Health Center, Batam Riau, stated that of the 32 respondents used, a higher percentage of 4T risk was found in respondents with low education compared to those with less education, namely 73.7% : 23.1%. Apart from that, the percentage of respondents who had a negative attitude was also higher than respondents who had a positive attitude, namely 71.4% : 18.2%. So the conclusion of the research is that there is a significant relationship between knowledge and the risk of 4T in pregnant women. (Mutiara et al., 2022).

Figure 1. Counseling on solutions to anticipate danger signs and risk factors for pregnancy.



Location: Batu Kute Village Healthy Clinic

Figure 2. Training and assistance for pregnancy exercise and massage for pregnant women and their husbands



Location: Batu Kute Village Healthy Clinic

Based on the results of research data analysis, it was found that pregnant women who did not know the danger

signs and risks of 4T in their pregnancy were more likely to have a low level of education, so they did not actively seek information at health facilities or through online media. Apart from that, pregnant women who are still small or < 30 years old are also not active or obedient to routine check-ups at village health facilities. Apart from that, pregnant women who do not work, which results in pregnant women not socializing with the work environment or the surrounding environment, do not know about the danger signs and risk factors for 4T in pregnancy, so these danger signs often appear and occur when they are pregnant. According to Notoatmodjo (2017), the mother's age influences her mindset regarding the importance of education and being active in seeking information about the danger signs of pregnancy and 4T risk factors.

Researchers and health workers together provide knowledge about the importance of pregnant women recognizing the danger signs and risk factors of 4T during pregnancy. Apart from that, researchers also provide anticipatory solutions so that pregnant women do not experience further complications, so that pregnant women understand their condition and are able to prepare for normal pregnancy and childbirth. From the research results, it was also found that pregnant women did not know that the emergence of danger signs and risks of 4T in their pregnancy was caused by their low level of education. This causes pregnant women to not comply with routine pregnancy checks at the village police and the inability to seek information about the danger signs and risks of 4T in their pregnancy. Apart from that, pregnant women who do not work also receive less information from activities or interactions with their environment compared to pregnant women who work and interact socially. Pregnant women aged < 20 years also very rarely participate in health outreach, especially pregnant women at the Batu Kute Polindes, this is because they are still small and are interested in participating in health outreach, especially pregnant women, in addition to their low education factor due to early marriage.

CONCLUSION

Increased understanding of pregnant women about the importance of knowing the danger signs during pregnancy and the 4T risk factors that can affect the mother's condition during the pregnancy process. Pregnant women know about the condition of their pregnancy and what things can affect the mother's condition during pregnancy. So that pregnant women are able to plan and have a healthy pregnancy.

SUGGESTION

It is hoped that there will be support from the family and community in improving the quality of maternal and baby health. All family members, especially pregnant women and their husbands, are expected to understand what can influence the mother's condition during pregnancy and be able to plan and have a healthy pregnancy so that mother and baby are safe.

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CONFLICTS OF INTEREST

The authors declare no conflict of interest in this study.

AUTHOR CONTRIBUTIONS

All authors fully contributed in this research.

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