**Original Article**

**DIFFERENCE IN KNOWLEDGE BETWEEN PRIMIGRAVIDA AND MULTIGRAVIDA MOTHERS ABOUT THE DANGER SIGNS OF PREGNANCY AT SERIRIT 1 HEALTH CENTER**

1Ketut Eka Larasati Wardana, 1Yopita Triguno, 1Ni Ketut Ayu Wulandari

1 *STIKES Buleleng, Bali, Indonesia*

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| ARTICLE INFO |  | ABSTRACT |
| Article History:  Submit, 16 Nov 2021  Revised, 30 Nov 2021  Accepted, 1 Nov 2021  Available online, 31 Des 2021 |  | *Background*: Maternal Mortality Rate (AKI) is one of the efforts to assess the degree of public health. One of the problems associated with maternal mortality is pregnancy problems that should be avoided. Pregnancy problems can be detected early from the presence of danger signs in pregnancy. One of the factors that influences mothers knowing the danger signs of pregnancy is the mother's knowledge. From the preliminary study conducted there is still a difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy in Seririt I Health Center. The purpose is to find out the difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy in Seririt I Health Center..  *Methods*: Research methods is Comparative Study with a cross sectional approach. The population is primigravida and multigravida pregnant women in Seririt I Health Center in 2021, with purposive sampling and obtained a sample of 52 respondents. The research instrument used is a questionnaire. The results of the study were then analyzed with an independent T-test.  *Results*: The results of the analysis showed no difference in knowledge between primigravid mothers and multigravidas about pregnancy danger signs in Seririt 1 Health Center with a p-value of 0.000 and p-value of 0.0160 so that p-value&gt;α 0.05.  *Conclusion*: Conclusion there is no difference in knowledge between primigravida and multigravid mothers about the danger signs of pregnancy. |
| *Keywords*:  Midwife, Counseling, Reproductive Health Rights, Youth |  |
| *Corresponding Author Contact: Yopita Triguno,*  *STIKES Buleleng, Bali, Indonesia*  *Email: yopipita28@gmail.com* |  | **Cite this as:** Wardana, K. E. L., Triguno, Y., & Wulandari, N. K. A. (2021). Difference In Knowledge Between Primigravida And Multigravida Mothers About The Danger Signs Of Pregnancy At Seririt 1 Health Center. Journal of Applied Nursing and Health, 3(2), 136–140. https://doi.org/10.55018/janh.v3i2.26. |

**Introduction**

Maternal death is the death of a woman while pregnant or 42 days after the end of pregnancy, regardless of the duration of pregnancy and the location of delivery due to any cause related to or triggered by pregnancy or its complications and management but not due to other causes. accidental or incidental causes (*Pelayanan Kesehatan Maternal*, 2010). Danger signs of pregnancy are pregnancies that have danger signs or risks that are greater than usual, so that they can cause illness or death before and after delivery (Tiran, 2007). The danger signs of pregnancy include vaginal bleeding, severe headache, blurred vision, swelling of the face and hands, severe abdominal pain and reduced or no fetal movement (Fadlun dan Feryanto, 2011).

The maternal mortality rate is also one of the targets that have been determined in the millennium development goals, namely the 5th goal, namely improving maternal health. Knowledge of pregnant women about danger signs can be caused by several factors, namely internal factors such as education, occupation, age and experience. External factors such as environmental and socio-cultural (*Kesehatan Dalam Kerangka Subtainble Development Goals (SDGs)*, 2015). Micro effects that can occur in pregnant women who experience pregnancy danger signs are miscarriage, preeclampsia, bleeding, premature birth and defects. While the macro impact that can occur is maternal and infant mortality. **Survey Demografi Kesehatan Indonesia (2017),**, shows pregnancy disorders or complications experienced by 3 women 15-49 years who had their last live birth in the 5 years prior to the survey. Eight out of ten (81%) women experience no complications during pregnancy. Among women with pregnancy complications, 5 percent experienced excessive bleeding, 3 percent each experienced persistent vomiting and swelling of the feet, hands and face or headache with seizures, and 2 percent each experienced heartburn before 9 months and amniotic fluid. premature rupture. 8 percent of women experience other pregnancy complaints, including high fever, seizures and fainting, anemia and hypertension.

Of course, during pregnancy, health workers have provided counseling and counseling about the danger signs of pregnancy to pregnant women to increase the knowledge of pregnant women about the danger signs of pregnancy. Counseling / counseling on the danger signs of pregnancy is certainly not only given to mothers who are pregnant for the first time but also to pregnant women who have given birth before. So it is hoped that if pregnant women know about the danger signs of pregnancy, it is hoped that all possible risks can be detected as early as possible so as to reduce maternal mortality. In line with research (Dian and Kamidah 2013), the higher a person's knowledge about the danger signs of pregnancy, the more obedient in carrying out pregnancy tests. This study aims to determine the difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy.

**Method**

This research is a comparative study with a sectional design. This study uses primary data using a questionnaire given to primigravida and multigravida pregnant women at the Seririt 1 Public Health Center in the period September 2021. The population in this study was 70 primigravida and multigravida pregnant women. The sample in this study were all samples that met the inclusion criteria, namely 52 primigravida and multigravida pregnant women, using purposive sampling technique. The analysis used in this study is to explain the difference between the 2 variables with statistical analysis techniques t-test difference with data normally distributed so that using the independent sample t-test test method.

**Results**

Table 1. Frequency Distribution of Knowledge About Pregnancy Danger Signs in Primigravida Mothers at Seririt Health Center 1 Year 2021

|  |  |  |
| --- | --- | --- |
| **Knowledge** | **n** | **%** |
| Good | 3 | 11.5 |
| Enough | 10 | 38.5 |
| Less | 13 | 50.0 |
| Total | 26 | 100 |

Source: primary research data 2021

Based on table 1 above it can be interpreted that primigravida mothers have less knowledge about the danger signs of pregnancy as many as 13 people (50.0%).

Table 2. Frequency Distribution of Knowledge about Pregnancy Danger Signs in Multigravida Mothers About Pregnancy Danger Signs at Seririt Health Center 1 year 2021

|  |  |  |
| --- | --- | --- |
| **Knowledge** | **n** | **%** |
| Good | 4 | 15.4 |
| Enough | 12 | 46.2 |
| Less | 10 | 38.5 |
| Total | 26 | 100 |

Source: research primary data 2021

Based on table 2, it can be interpreted that the knowledge of multigarvida mothers about the danger signs of pregnancy is sufficient, namely as many as 12 people (46.2%).

Table 3. Differences in Knowledge Between Primigravida and Multigravida Mothers About Danger Signs of Pregnancy at Seririt Health Center 1 in 2021

|  |  |  |
| --- | --- | --- |
|  | **Mean** | **SD** |
| Primigravida | 12.69 | 4.269 |
| Multigravida | 14.54 | 3.349 |
| *p-value* 0.160 > 0.05 | | |

Based on table 5.10 above, it can be interpreted that the difference knowledge between primigravida and multigravida mothers about the danger signs of pregnancy obtained a significance (p) of 0.160.

Based on the results of statistical tests using an independent t-test , it is known p\_value is 0.160, which means p\_value > , 0.160 > 0.05, so H0 isaccepted and H1is rejected, meaning that there is no difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy at the Puskesmas. Seririt 1 Year 2021

**Discussion**

There is no difference in knowledge between primigravida and multigravida mothers because the characteristics of each primigravida and multigravida mothers are almost the same, namely from the characteristics of age, education and occupation. This shows that a person's knowledge of the danger signs of pregnancy is not only influenced by previous childbirth experiences. It is expected that multigravida mothers have better knowledge than primigravida mothers because multigravida mothers have been pregnant and gave birth before. As stated by (Fandiar dan Titin, 2013) in their research, the main thing that distinguishes knowledge between primigravida and multigravida about the danger signs of pregnancy, is because the experience of multigravida mothers is more during pregnancy and their experience from previous counseling or counseling. But it can be seen in this study that the experience from previous counseling and counseling given to previous pregnancies did not increase the knowledge of the mutigravida mother. This is in line with research (Damanik Fadilayana, 2015), which said there was no change in the level of knowledge of multigravida pregnant women about the danger signs of pregnancy before and after counseling with a value of 0.532. So it can be said that we cannot judge someone's knowledge only from one side, but there are many factors that must also be considered in assessing someone's knowledge. This is in line with what was stated by (Wawan dan Dewi, 2010) who said that the factors that affect a person's knowledge are education, occupation, age, environment and socio-culture.

With pregnant women knowing about the danger signs of pregnancy, it is hoped that all possible risks can be detected as early as possible so as to reduce maternal mortality, so that if they know about the danger signs of pregnancy, it will prevent pregnant women from unwanted risks such as maternal and child deaths. By knowing about the danger signs of pregnancy and being able to detect early warning signs of pregnancy, it is hoped that these pregnant women can check their pregnancy more often with health workers. This is in line with the research conducted (Sama.M.C, 2013) which stated that there was a relationship between the level of knowledge of pregnant women about the danger signs of pregnancy and adherence to antenatal care in third trimester pregnant women at Pandan Arang Hospital Boyolali in 2010 with a value of 0.016.

According to (Fadlun dan Feryanto, 2011), there are several danger signs in pregnancy, namely vaginal bleeding, severe headache, blurred vision, swelling of the hands and face, severe abdominal pain and reduced or no fetal movement. If these pregnant women know about the danger signs of pregnancy, they will be able to prevent them so that these dangers do not threaten the health of the mother and her unborn baby and as soon as possible can diagnose and treat in order to avoid or reduce the risks that may occur.

Thus the results of this study are different from the results of research (Haryanti.R.S, 2008), Differences in Knowledge Levels between Primigravida and Multigravida about Pregnancy Danger Signs at Sibela Health Center Surakarta, which states that there is a difference in knowledge between primigravida and multigravida with a value of 6.5 while the value is 6.5. the significance is 0.000 (ρ<0.05). From the results of the research above, it can be concluded that there is no difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy. This can happen because the characteristics between primigravida and multigravida mothers are almost the same in terms of age, education and occupation. But even though they have almost the same characteristics, the slightly better knowledge of multigravida mothers could be due to other factors such as experience. Repeated experiences will make a person's memory better. In addition to these factors, there are also other factors that can affect a person's knowledge in today's modern era, namely the social and technological environment. This of course has positive and negative sides, if the surrounding environment provides good information, especially information about health, of course one's knowledge about health will also be better, if someone uses technology to find useful information for himself, especially health, it will also have an effect on increasing his knowledge. and vice versa.

**Conclusion**

There is no difference in knowledge between primigravida and multigravida mothers about the danger signs of pregnancy at the Balowerti Health Center, Kediri City in 2017 with p\_value (0.160) > (0.05)

**References**

Damanik Fadilayana. (2015). *Tingkat Pengetahuan Ibu Primigravida Tentang tanda Bahaya Kehamilan Sebelum dan Sesudah Penyuluhan di Wilayah Kerja Puskesmas Rejosari tahun 2015*.

Fadlun dan Feryanto. (2011). *kebidanan Patologis*. Rhieka Cipta.

Fandiar dan Titin. (2013). Pengetahuan Tentang Tanda Bahaya dan Perilaku Perawatan Kehamilan Pada Ibu Hamil Trimester III. *Universitas Indonesia*.

Haryanti.R.S. (2008). Perbedaan Tingkat Pengetahuan antara Primigravida dan Multigravida Tentang Tanda Bahaya Kehamilan di Puskesmas sibela Surakarta. *Universitas Sebelas Maret*.

Kesehatan Dalam Kerangka Subtainble Development Goals (SDGs), (2015).

Sama.M.C. (2013). Hubungan Pengetahuan Tentang Tanda Bahaya Kehamilan dengan Kepatuhan Ibu Trimester III Melakukan Kunjungan Antenatal Care (ANC) di BPM Errawati Kecamatan Jogonalan Klaten. *Universitas Respati Yogyakarta*.

Laporan Angka Kematian Ibu, (2017).

Tiran. (2007). *Kehamilan dan Permasalahannya*. EGC.

Wawan dan Dewi. (2010). *Teori dan Pengukuran Pengetahuan, Sikap dan perilaku Manusia*. Nuha Medika.

Pelayanan Kesehatan Maternal, (2010).

Damanik Fadilayana. (2015). *Tingkat Pengetahuan Ibu Primigravida Tentang tanda Bahaya Kehamilan Sebelum dan Sesudah Penyuluhan di Wilayah Kerja Puskesmas Rejosari tahun 2015*.

Fadlun dan Feryanto. (2011). *kebidanan Patologis*. Rhieka Cipta.

Fandiar dan Titin. (2013). Pengetahuan Tentang Tanda Bahaya dan Perilaku Perawatan Kehamilan Pada Ibu Hamil Trimester III. *Universitas Indonesia*.

Haryanti.R.S. (2008). Perbedaan Tingkat Pengetahuan antara Primigravida dan Multigravida Tentang Tanda Bahaya Kehamilan di Puskesmas sibela Surakarta. *Universitas Sebelas Maret*.

Kesehatan Dalam Kerangka Subtainble Development Goals (SDGs), (2015).

Sama.M.C. (2013). Hubungan Pengetahuan Tentang Tanda Bahaya Kehamilan dengan Kepatuhan Ibu Trimester III Melakukan Kunjungan Antenatal Care (ANC) di BPM Errawati Kecamatan Jogonalan Klaten. *Universitas Respati Yogyakarta*.

Laporan Angka Kematian Ibu, (2017).

Tiran. (2007). *Kehamilan dan Permasalahannya*. EGC.

Wawan dan Dewi. (2010). *Teori dan Pengukuran Pengetahuan, Sikap dan perilaku Manusia*. Nuha Medika.

Pelayanan Kesehatan Maternal, (2010).