

THE APPLICATION OF NEW HABITS IN PREGNANT WOMEN AS AN EFFORT TO PREVENT THE SPREAD OF COVID-19

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Abstrak : Adaptasi Kebiasaan Baru (AKB) merupakan salah satu bentuk upaya pencegahan penyebaran COVID-19. Penyebaran virus corona (COVID-19) masih menjadi darurat kesehatan masyarakat global. Penelitian ini mengungkapkan tingkat kepatuhan dan pengetahuan dalam penerapan AKB di lingkungan masyarakat Karang Pule khususnya di Pande Besi. Jenis penelitian ini adalah penelitian deskriptif dengan pendekatan *cross sectional* dan evaluasi kuesioner. Berdasarkan hasil studi pendahuluan, ada 7 dari 10 ibu hamil yang ada di lingkungan Karang Pule belum menerapkan protokol kesehatan adaptasi kebiasaan baru pada saat pemeriksaan ANC. Kuesioner diberikan kepada 30 responden ibu hamil sebagai sampel. Dari hasil penelitian ini didapatkan bahwa sebagian besar ibu hamil memiliki pengetahuan cukup memadai tentang adaptasi kebiasaan baru yaitu sebanyak 14 responden (46,7%) dan tingkat penerapan adaptasi kebiasaan baru pada ibu hamil di Pande Besi secara umum cukup memadai yaitu sebanyak 26 responden (86,7%).

Kata kunci: Adaptasi Kebiasaan Baru (AKB), COVID-19, ibu hamil, pengetahuan

Abstract: Adaptation to New Habits in New Normal (ANH) is one form of effort in preventing the spread of COVID-19. The spread of the corona virus (COVID-19) is still categorized as a global public health emergency. This study reveals the level of compliance and knowledge in the application of ANH in the Karang Pule specially in Pande Besi. From a preliminary study conducted, there were 7 per 10 pregnant women who did not apply the adaptation of new habits during the ANC. The method used in this study was descriptive with a cross sectional perspective and questionnaires review. 30 respondents as sample conducted by distributing questionnaires. From the results of this study, it was found that the knowledge of pregnant women about COVID-19 in implementing adaptation of new habits was generally quite sufficient, as many as 14 respondents (46.7%) and the level of application of new habits of adaptation to pregnant women in the Pande Besi is generally quite sufficient, with 26 respondents (86.7%).

Keyword: Adaptation to New Habits (ANH), COVID-19, knowledge, pregnant women

INTRODUCTION

Berbicara tentang konteks pendidikan yang selalu Indonesia is one of the countries affected by the Coronavirus Disease-19 (COVID-19) pandemic with the number of new cases increasing drastically. The Corona virus Disease infection has spread since 2019. According to WHO (World Health Organization) stated that this virus was first discovered in Wuhan in 2019, this virus causes diseases such as mild flu to more severe respiratory infections, namely MERS CoV and SARS CoV. The situation currently being faced is increasingly developing into a global public health emergency (Yang et al, 2020).

Corona virus (COVID-19) is a new type of virus, namely SARS-CoV-2 which causes complaints of respiratory tract disorders, the process of spreading is very fast because it is transmitted from one human to another through droplets directly when the patient coughs or sneezes (Irawati et al, 2021).

Thus, the Indonesian government has declared a policy through the Presidential Decree of the Republic

of Indonesia Number 12 of 2020 which stipulates those non-natural disasters spreading COVID-19 as a national disaster because they have an impact on increasing the number of casualties, the economy, and the size of the area affected by the COVID-19 virus disaster (Kementerian Kesehatan RI, 2020). Therefore, many countries are carrying out prevention and control of being infected with the corona virus for their people and becoming the main focus of every country including Indonesia, namely groups that are so vulnerable or easily affected and the potential risk is greater, one of which is pregnant women. In this situation, the government has made a policy regarding restrictions on almost every routine service such as in health care facilities (Qiao, 2020)

The Center for Disease Control and Prevention (CDC) states that pregnant women are one of the special groups who are easily infected with the COVID-19 virus, this is because pregnancy changes the immune system. Physiological and immunological

changes that occur as a normal component of pregnancy can have systemic effects that increase the risk of obstetric complications from respiratory infections in pregnant women (POGI,2020)

Based on data from the task force for the acceleration of handling COVID-19 as of September 14th, 2020, the number of confirmed COVID-19 patients was 221,523 people, recovered patients were 158,405 (71.5% of confirmed patients), 8,841 patients died (3,9% of confirmed patients), for the group of pregnant women, there were 4.9% of pregnant women who were confirmed positive for COVID-19 from 1,483 confirmed cases with data on accompanying conditions. This data shows that pregnant women are very susceptible to COVID-19 infection and it is feared that it will increase maternal and newborn morbidity and mortality. In this COVID-19 pandemic situation, pregnant women must start adapting new habits in order to stay healthy.

Adaptation to New Habits (ANH) is one form of effort to prevent the spread of COVID-19, such as changing behavior, lifestyle, and habits, so that they can live productively and stay protected from the transmission of the COVID-19 virus, and when they are active, they must continue to apply health protocols(Kementerian Kesehatan RI,2020).

Pregnant women have been added to the list of people at moderate risk as a precaution (RCOG, 2020). There are controversies regarding vertical transmission of COVID-19 from mother to baby in-utero(Dong et al., 2020) In many countries, lockdown become the effective choice to prevent COVID-19. But, in Indonesia Large-scale social restrictions or LSSR (Indonesian: Pembatasan Sosial Berskala Besar or PSBB) are currently in place in response to the COVID-19 pandemic and also by implementing the ANH in the new normal era(Kementerian Kesehatan RI,2020).

From a preliminary study conducted, there were 7 per 10 pregnant women who did not apply the adaptation of new habits during this pandemic. This shows that pregnant women who apply the adaptation of new habits in the Karang Pule are still very low. Therefore, researchers are interested in researching in that environment. The purpose of this study was to determine the level of knowledge and behavior of implementing new habit adaptations in pregnant women as an effort to prevent the spread of COVID-19.

METHOD

The research design used is descriptive cross sectional with total sampling technique was 30 people with data collection techniques using questionnaires. Inclusion criteria of the study population consisted of pregnant women that presented to the antenatal clinic for their routine antenatal care in Poskesdes Karang Pule. The questionnaire had two parts: demographics and knowledge, attitude and implementation towards

ANH to COVID-19. Data were analysed using statistical software (SPSS for windows® version 22, SPSS Inc.; Chicago, USA). The results were presented in tables, frequencies and percentages from the 30 participants that signed informed consent and completed the questionnaires.

RESULT

Based on the results of research, the following data were obtained:

Table 1. Demographic Characteristic Respondents

Characteristics	Category	n	%
Age	<20	2	6,7
	20-35	24	80
	>35	4	13,3
Level of education	No		
	education	0	0
	Primary	9	30,0
	Secondary	9	30,0
	Tertiary	12	40,0
Occupation	Higher education	0	0
	Unemployed	27	90
	Employed	3	10

Table 2. Type Source of ANH Respondents Information

Source of ANH Information	n	%
Friends	10	33,3
Newspaper	7	23,3
Electronic media	0	0
Medical Employee	13	43,3

The most respondent characteristics were at the productive age (20-35 years old), have tertiary level of education, unemployed and got the ANH information mostly from medical employee.

Table 3. Distribution of Respondents Based on Knowledge About COVID-19 in Implementing New Habit Adaptations During the COVID-19 Pandemic

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Knowledge Category	n	%
1 Good	6	20,0
2 Sufficient	14	46,7
3 Less	10	33,3

Based on table 3, it shows that the respondents have sufficient knowledge about COVID-19 in implementing the adaptation of new habits, as many as

14 respondents (46.7%). From the research that has been done, it was found that the knowledge of pregnant women in the Karang Pule in implementing the New Habit Adaptation as an effort to prevent COVID-19 is in the sufficient category. The data is shown from table 3 the number of respondents in the category of sufficient knowledge is 14 respondents (46.7%), good as many as 6 respondents (20.0%), and less as many as 10 respondents (33.3%). This is in accordance with the results of education in the area that most pregnant women are more than those who graduated from high school. This data is also in line with the results of information source data, some pregnant women still do not receive information from health workers, but in the Karang Pule, pregnant women still rarely apply health protocols. So it can be concluded that a person's knowledge is strongly influenced by education and information.

Education affects the learning process, the higher a person's education, the easier it is for someone to receive information. With higher education, someone will tend to get information, both from other people and the mass media. the more information entered, the more knowledge gained about health. Education is very influential on a person's knowledge which in this case is related to the prevention of COVID-19, it could be because respondents do not get information about COVID-19 and its prevention. So knowledge plays a very important role in taking action as well as in carrying out New Habit Adaptation as an effort to prevent COVID-19. Someone who has good knowledge in maintaining health. This is in accordance with the theory put forward namely behavior based on knowledge will be more lasting than behavior that is not based on knowledge. The knowledge referred to is the knowledge of pregnant women in implementing the New Habit Adaptation as an effort to prevent COVID-19.

Table 4. Distribution of Respondents Based on Attitude in Implementing New Habit Adaptations During the COVID-19 Pandemic

	Attitude Category	n	%
1	Good	0	0
2	Sufficient	26	86,7
3	Less	4	13,3

Based on the results of data filling out questionnaires by pregnant women in the Karang Pule, there are still many attitude that are still not understood and rarely implemented, regarding statement no. 6, "During a pandemic when gathering with family, mothers always keep a distance of 1-2 meters from other people". Maintaining a distance of 1-2 meters is one of the steps to prevent and control Corona virus infection by encouraging healthy people to limit visits to crowded places and direct contact with other people. When implementing social distancing, a person is not allowed to shake hands and

maintain a distance of at least 1 meter when interacting with other people, especially with people who are sick or at high risk of suffering from COVID-19.

The process of changing preventive behavior from knowledge, namely behavior based on knowledge, will last longer than behavior that is not based on knowledge. The process of behavior change includes: awareness, interest, evaluation (weighing), trial (trying behavior), adoption (attitude)(Rogers,2002). Knowledge is very important to improve preventive behavior. The stages of knowledge that can influence a person to behave: know, comprehensions, application, analysis, synthesis and evaluation (Notoatmodjo,2016). The results of the researcher's analysis show that a good source of knowledge about COVID-19 prevention will guide pregnant women to the right preventive behavior so that it will keep pregnant women from the risk of contracting COVID-19. Meanwhile, table 5 based on the results of the checklist for the application of new habit adaptations to pregnant women in the Pande Besi Karang Pule at 2021.

Table 5. Distribution of Respondents Based on the Checklist for the Implementation of New Habits Adaptation (6M) for Pregnant Women in the Karang Pule During the COVID-19 Pandemic

	Implementation 6M	n	%
1	Good	0	0
2	Sufficient	22	73,3
3	Less	8	26,6

From the research that has been done, it was found that from 30 pregnant women who became respondents, the results were in the sufficient category, namely 26 respondents (86.7%), in the less category as many as 4 respondents (13.3%), and for the good category there were none. This is because pregnant women have received enough information. However, from these results, it is known that there are still many pregnant women who rarely apply the New Habit Adaptation behavior during this COVID-19 pandemic. so it is necessary to provide counseling to pregnant women so that they can add insight and pregnant women to be more alert during this pandemic, and continue to apply the New Habit Adaptation as an effort to prevent the spread of COVID-19.

DISCUSSION

There is a significant relationship between public knowledge including pregnant women on adherence to COVID-19 prevention by always using a mask ($p < 0.005$)(Sari,2020). Furthermore, research conducted in Africa, from 284 pregnant women respondents, 173 respondents (60.9%) pregnant women had adequate knowledge of COVID-19. This

study also states that there is a significant relationship between knowledge and prevention of COVID-19 (Nwafor et al,2020). Knowledge of pregnant women is needed to be able to prevent COVID-19. Knowledge has a significant relationship to management of prevention, preparation and preparedness in dealing with COVID-19(Qi H Liu et al,2020).

Based on the results of the checklist for the Implementation of New Habits of Adaptation (6M) to Pregnant Women in the Karang Pule at 2021, it was found that from 30 pregnant women who became respondents, the results were in the sufficient category with 22 respondents (73.3%) , and for the less category as many as 8 respondents (26.6%). The 6M behaviors are wearing a mask, washing hands with soap in running water or use hand sanitizer, keep the distance, stay away from the crowd, reduced mobility and avoid eating together (Kementerian Kesehatan RI.2020).

In this study, researchers monitored pregnant women when distributing questionnaires and according to their daily patterns. so the researchers concluded that in the Karang Pule pregnant women who applied the behavior of Adapting to New Habits were still in the sufficient category, because they still rarely did it and there were still those who did not understand so that the results from ANH checklist were statements that were still poorly understood by pregnant mothers in the Karang Pule is limiting mobilization and interaction and the respondent are rarely using hand sanitizer when travelling whereas it can make by using *Piper betle* and *Citrus aurantiifolia* extract(Listari et al,2020).

Based on the results of research on the level of application of new habit adaptations in pregnant women as an effort to prevent the spread of COVID-19 in the Karang Pule Poskesdes at 2021, which causes knowledge and behavior to be still in the sufficient category. The environment is everything that is around the individual, both the physical, biological, and social environment. The environment affects the process of entering knowledge into different individuals in the environment. This happens because of the reciprocal interaction that will be responded to as knowledge.

CONCLUSION

Based on the results of research that has been carried out in the Karang Pule at 2021, the authors can conclude that the knowledge of pregnant women about COVID-19 in implementing adaptation of new habits in the Pande Besi, Karang Pule at 2021 is generally in the sufficient category, 14 respondents (46.7%). The behavior of pregnant women in implementing adaptation of new habits during the COVID-19 pandemic in the Pande Besi, Karang Pule at 2021 was generally in the sufficient category, 26 respondents (86.7%).

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