



## Direct Counseling Model with Lectures and Discussions Effectivity In Increasing The Knowledge And Attitudes Of Pregnant Women On Healthy Childbirth

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Received: 23 June 2022; Revised: 12 July 2023; Accepted: 19 August 2023  
DOI: <http://dx.doi.org/10.37905/aksara.9.3.1635-1640.2023>

### Abstract

The Human Development Index is affected by one of the success factors, specifically the growth of the Health sector. Preventing maternal and neonatal mortality during and after childbirth is a strategy that supports the development of the health sector. The 2020 maternal mortality rate in West Java Province is estimated to be 85.77 per 100,000 births, which exceeds the goal of 85 per 100,000 births. To reduce maternal mortality during childbirth or postpartum, the Ramasari Village standby village program held an innovative community empowerment program for pregnant women who will give birth, specifically in the third trimester of pregnancy, using a direct counseling model with lectures and discussions on healthy childbirth. Third-trimester expectant women will receive counseling to improve their knowledge and attitudes. This study aimed to ascertain the efficacy of a direct counseling model consisting of lectures and discussions in enhancing the knowledge and attitudes of pregnant women in their third trimester in Ramasari Village regarding healthy childbirth. This research employed a combination of exploratory and qualitative descriptive techniques, including observation diaries and interviews, to examine lecture counseling and discussion. Then, paired sample T-tests were used to ascertain the increase in knowledge and attitudes of third-trimester pregnant women regarding healthy childbirth using pre- and post-tests. There were as many as sixty-five pregnant women in Ramasari Village, accounting for thirty percent of the population of expectant women. With 20 third-trimester expectant women as the sample type. The number of pre-test and post-test scores, individual counseling, lectures, and discussions. As a result of direct counseling with lecture and discussion methods, expectant women in Ramasari Village have greater knowledge and attitudes regarding healthy childbirth, as determined by the study's conclusion.

### Keywords

Healthy Childbirth, Direct Counseling With Lecture and Discussion, Pregnancy.

### INTRODUCTION

The Human Development Index (HDI) is a method proposed by the United Nations Development Program (UNDP) in its 1996 Human Development Report for enhancing aspects of people's lives. Long and healthy lives, a sufficient level of education, and a decent standard of living are unquestionably aspects of the so-called existence that support and influence one another. (Hasan & Nurhayati, 2012; Setiawan & Hakim, 2008). According to the WHO (World Health Organization), health is a condition of physical, mental, and social perfection, and not merely the absence of disease and disability. Social, economic, and cultural factors contribute to a nation's development. (Suparman, 2020). Mother and infant wellbeing is an indicator of health status. In Indonesia, however, both the Maternal Mortality Rate (MMR) and the Infant Mortality Rate (AKB) remain quite high. According to data from West Java Province, the maternal mortality rate in 2020 was 85.77 per 100,000 live births, exceeding the goal of 85 per 100,000 births. In Indonesia, the direct causes of maternal death are hemorrhage, infection, eclampsia, old parturition, and



complications of abortion. The high Maternal Mortality Rate (MMR) is a result of multiple complex factors, including social, cultural, economic, education level, health service facilities, and gender (Sukmadewi, 2016).

Labor and delivery are physiologically typical life processes. For the mother and her family, the delivery of a child is also a social occasion. The role of the mother is to give birth to her child, while the role of the family is to offer assistance and support to the mother during labor. In this instance, the role of health care professionals in assisting and supporting mothers to ensure the safety of both the mothers and their newborns throughout the entire labor process is of equal importance (Sumarah & Wiyati, 2010).

Antenatally, expectant women commonly experience heightened levels of anxiety preceding the event of childbirth. Consequently, the cognition and perspective of the women concerning parturition can substantially impact the progression of labor. Behavior and actions are underpinned by one's understanding and awareness, implying that if a gestating woman possesses a considerable degree of knowledge related to childbirth, she would be inclined to perceive it as a non-frightening event (Sukmadewi, 2016).

From the direct observation result, in Ramasari Village, third-trimester pregnant women have limited knowledge of healthful childbirth. The purpose of the study was to determine the efficacy of the direct counselling model consisting of lectures and discussions in enhancing the knowledge and attitudes of third-trimester expectant women in Ramasari Village regarding healthy childbirth. Ramasari Village third-trimester expectant women continue to have limited knowledge. This divide can be closed through direct counselling lectures and discussions.

Counseling is a form of community education that aims to provide information, knowledge, skills, or guidance to certain target students in certain fields (Jabar et al., 2021b; Jabar & Nurhayati, 2021; Mulyati & Nurhayati, 2020). Counselling is typically administered by extension workers who are specialists in their respective disciplines, such as agricultural counselling, health counselling, religious counselling, etc. Individual or group counselling can be conducted face-to-face or via mass media, formally or informally. Counselling as a component of out-of-school education is distinguished by the following characteristics: 1) Counselling is voluntary, meaning that target students can choose to attend or not attend based on their needs and interests; 2) Counselling is flexible, meaning that it can be adapted to the circumstances and conditions of the target students, including time, place, methods, materials, and media; 3) Counselling is participatory, meaning it actively engages student targets in the learning process, such as through discussion, questioning, experience sharing, and practise; 4) Counselling is problem-solving, in the sense that it seeks to assist students in resolving issues in certain fields, such as increasing productivity, health, and welfare.

Counseling as part of community education also has several objectives, including (Jabar et al., 2021a; Jabar & Nurhayati, 2021; Mulyati & Nurhayati, 2020; Simamora & Saragih, 2019): 1) Increase the knowledge and awareness of the target learner about certain fields related to his life; 2) Improve the skills and abilities of target students in certain areas that can help them improve their quality of life; 3) Improve positive and constructive attitudes and behaviors of learners in certain fields that can benefit themselves and their environment; 4) Increase participation and cooperation of student targets with related parties in certain fields that can increase the effectiveness and efficiency of counseling.

This study was conducted to determine the effectiveness of the direct counseling model with lectures and discussions in increasing the knowledge and attitudes of pregnant women about healthy childbirth in Ramasari Village, as an effort to reduce maternal and infant mortality due to unhealthy childbirth. This research is expected to contribute to the development of health extension models that are in accordance with the needs and conditions of the local community. Knowledge of healthy childbirth greatly influences pregnant women to give birth clean and safe. Healthy, clean and safe childbirth can take place if the delivery is in a health facility by health workers, pregnant women



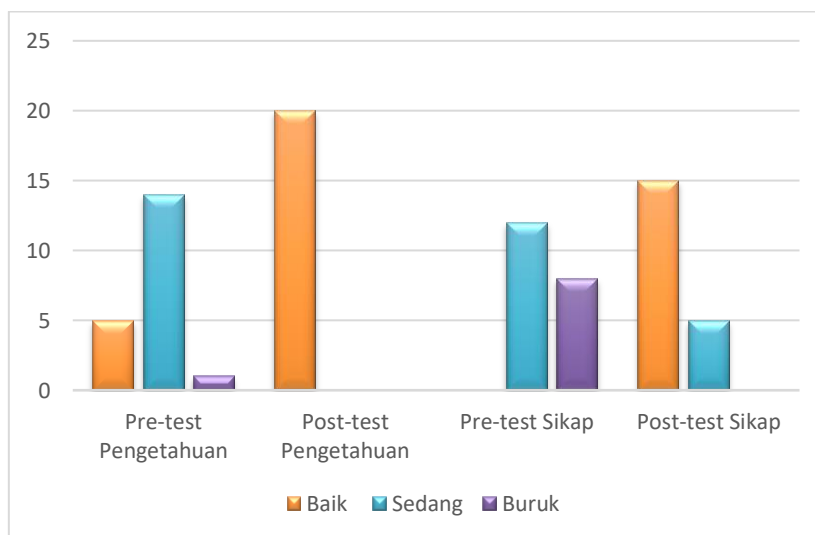
who have low knowledge of healthy childbirth are more likely to choose childbirth in non-health facilities and vice versa, so it is necessary to increase knowledge and attitudes about the benefits of childbirth in health facilities (Nurlinda & Supriyanto, 2014)

## METHOD

This study used a mix of exploratory methods with qualitative descriptives using observation sheets and interviews about lecture counselling and discussion. Then, with quantitative methods using a paired sample T-test, This study aims to determine the effectiveness of the direct counselling model with lectures and discussions on increasing the knowledge and attitudes of third-trimester pregnant women about healthy childbirth in Ramasari Village. The population in this study was 30% pregnant women, or as many as 65 pregnant women in Ramasari Village, with a sample size of 20 third-trimester pregnant women.

## RESULTS AND DISCUSSION

Drawing from empirical observations, the utilization of both lecture-style and discursive modalities in direct counselling have demonstrated considerable efficacy. The lecture method of direct counselling, renowned for its capacity to disseminate information to large cohorts, is not the sole approach. In conjunction, a discursive approach is also implemented, distinguished by its ability to encourage greater participant engagement, and facilitate the exchange of personal experiences. Furthermore, this method allows for the discussion of diverse themes relevant to the participants. Upon conducting interviews with a sample of 10 pregnant women, it emerged that there exists a deficiency in the comprehension of healthy childbirth procedures, attributable in part to a lack of awareness surrounding 'P4K'. Hence, the respondents underscored the significance of counselling sessions in augmenting both their knowledge base and their attitudes toward healthy childbirth practices. However, it was also noted that understanding of the potential complications associated with childbirth and the necessity of utilizing healthcare facilities during childbirth remain largely deficient.



**Figure 1.** Graph of Knowledge Level and Attitude of Participants Before and After Counseling

Figure 1 shows that there was an increase in participants' knowledge and attitudes before and after direct counseling, lectures, and discussions on healthy childbirth.



**Table 1.** The difference in the average value of respondents' knowledge scores before and after counseling.

Variable	Mean	t	p
<b>Knowledge</b>			
Before	67,75	-12,704	0,000
After	82,25		

Based on table 1 above, it can be seen that the results of the analysis using the Paired sample t test obtained that the average knowledge of respondents before direct counseling of lectures and discussions amounted to 67.75 and after being given direct counseling of lectures and discussions amounted to 82.25. with a t-count of -12.704 and a probability of 0.000. If the probability  $p < 0.05$ , then it can be concluded that there are differences in respondents' knowledge before and after counseling. This can be interpreted as an influence of direct counseling, lectures, and discussions on increasing respondents' knowledge about healthy childbirth. The results of this study are supported by previous research conducted by Lubis (2019) regarding the influence of counseling with lecture and discussion methods on increasing children's knowledge and attitudes about PHBS in 065014 State Elementary School, Namogajah Village, Medan Tuntungan District in 2013, which stated that there was an increase in knowledge and attitudes of elementary school children about PHBS through counseling with lecture and discussion methods. This is in line with another study conducted by Buzarudina (2013) that found a difference between the score before counseling and the score after counseling, which means that counseling on adolescent reproductive health is effective in increasing respondents' knowledge about adolescent reproductive health. This research is also supported by research conducted by Octavia (2020) regarding increasing public knowledge about the use and rational management of drugs through DAGUSIBU counseling, showing that there was a significant increase in knowledge about the correct use and management of drugs by PKK cadres in Madulegi Village, Sukodadi District, after counseling on DAGUSIBU. Likewise, research conducted by Simamora and Saragih (2019) regarding public health counseling about gout using audio-visual media Where before counseling was given, community knowledge was in the category of lacking, and after counseling, community knowledge increased to a good category, which means the influence of health counseling on public knowledge about gout in Environment XIV of Sunggal Village.

**Table 2.** Differences in the average value of respondents' attitude scores before and after counseling

Variable	Mean	t	p
<b>Attitude</b>			
Before	58,50	-11,174	0,0
After	76,75		

Based on table 2 above, it can be seen that the results of the analysis using the Paired sample t test obtained that the average attitude of respondents before direct counseling lectures and discussions amounted to 58.50 and after being given direct counseling lectures and discussions amounted to 76.75. with a t-count of -11.174 and a probability of 0.000. If the probability  $p < 0.05$ , then it can be concluded that there are differences in respondents' attitudes before and after counseling. This can be interpreted as indicating that there is an influence of direct counseling, lectures, and discussions on improving respondents' attitudes about healthy childbirth. Based on the theory proposed by Notoatmodjo (2003), attitude is a reaction that is still closed from a person to a



stimulus or object by showing the suitability of emotional reactions to certain stimuli in everyday life. In addition, Notoatmodjo(2007) also states that a person's knowledge gained through education or the learning process can affect attitude change. With the difference between pre-counseling attitudes (Leaflet) and post-counseling (Leaflet), according to Indrawati (2018), the percentage of pre-counseling attitudes and media-based post-counseling shows an increase. The results of this study are also supported by Lubis (2019) regarding the influence of counseling with lecture and discussion methods on increasing children's knowledge and attitudes about PHBS in 065014 State Elementary School, Namogajah Village, Medan Tuntungan District in 2013, which states that there is an increase in the knowledge and attitudes of elementary school children about PHBS through counseling with lecture and discussion methods.

## CONCLUSION

Direct counselling with lecture and discussion methods is effective in increasing the knowledge and attitudes of pregnant women about healthy childbirth in Ramasari Village. This is shown by the significant difference between knowledge scores and attitudes before and after counselling. Direct counselling with lecture and discussion methods can provide complete and accurate information about healthy childbirth and can foster awareness and motivation in pregnant women to give birth in a way that is clean, safe, comfortable, and respects the rights of mothers and babies. Direct counselling with lecture and discussion methods can also increase the participation and interaction of pregnant women with extension workers and fellow pregnant women, to broaden their horizons and experiences about healthy childbirth. This research can be developed using other counselling methods that are in accordance with the characteristics and needs of pregnant women, such as audio-visual media, leaflets, booklets, posters, or role plays. Further research is expected to be carried out in different locations with a larger and more varied number of samples, to increase the generalization of research results. Further research can also be done by adding other variables related to healthy childbirth, such as the behavior of pregnant women in carrying out healthy childbirth, factors that influence the knowledge and attitudes of pregnant women about healthy childbirth, or the impact of the knowledge and attitudes of pregnant women on the health of mothers and babies.

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