



The Influence of Education and Attitude of Pregnant Women on Antenatal Care Visits at Health Centers

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Abstract

Antenatal care (ANC) visits are one of the important efforts in reducing maternal and infant mortality rates. However, compliance of pregnant women in conducting ANC visits is still a challenge in various regions. This study aims to determine the effect of education level and attitudes of pregnant women on the frequency of ANC visits at the Community Health Center. This study used a quantitative design with a cross-sectional approach. The sample of the study was 100 pregnant women who visited Community Health Center X during the last six months. Data were analyzed using the chi-square test and logistic regression. The results showed that education level ($p = 0.003$) and attitudes of pregnant women ($p = 0.001$) had a significant effect on compliance with ANC visits. It can be concluded that the higher the education and positive attitudes of pregnant women, the higher the likelihood of them making ANC visits according to standards. Therefore, interventions in the form of health education and counseling are needed to increase awareness of pregnant women regarding the importance of ANC.

Keywords: Antenatal Care, Education, Attitude, Pregnant Women, Community Health Center

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1. Introduction





Antenatal care (ANC) is a health service provided to pregnant women periodically to monitor the health of the mother and fetus. WHO recommends a minimum of four ANC visits during pregnancy. However, in practice, many pregnant women do not meet this number of visits. Various factors influence the compliance of pregnant women in making ANC visits, including education level and attitudes towards pregnancy and health services.

Education plays an important role in shaping individual knowledge and behavior, including in terms of health decision making. Meanwhile, attitudes reflect individual acceptance or rejection of an object, which in this context is ANC services. Thus, it is important to examine the relationship between education and attitudes of pregnant women with the frequency of ANC visits.

2. Research Methods

This study used a cross-sectional design with a purposive sampling technique. The number of respondents was 100 pregnant women who came to Puskesmas X during the study period. Data were collected through a structured questionnaire covering demographic data, education level, attitudes towards ANC, and frequency of ANC visits.

Data analysis was conducted using the chi-square test to determine the relationship between variables, as well as logistic regression to see the simultaneous influence of education and attitudes towards ANC visits.

3. Results And Discussion

a. Results

Of the 100 respondents, 60% of pregnant women had secondary education and above, and 40% had low education. Positive attitudes towards ANC were found in 70% of respondents, while 30% had negative attitudes.

As many as 65% of pregnant women made at least 4 ANC visits, according to WHO standards. The results of the analysis showed a significant relationship between education level and ANC visits ($p=0.003$) and between attitude and ANC visits ($p=0.001$).

b. Discussion





Higher levels of education tend to make pregnant women better understand the importance of ANC, so they are more compliant with the visit schedule. Positive attitudes towards ANC also reflect readiness and awareness of the importance of pregnancy monitoring.

This finding is in line with previous research showing that mothers with higher levels of education have better access to health information and are more proactive in seeking health services.

4. Conclusion

The level of education and attitude of pregnant women significantly influence antenatal care visits. To increase the coverage of ANC visits, the Health Center needs to increase educational efforts and effective communication approaches to pregnant women, especially those with low education or negative attitudes towards ANC.

5. Compliance with Ethical Standards

Funding:

This research did not receive funding from any institution, whether government, private, or non-profit organization.

Conflict of Interest:

The author declares that there is no conflict of interest in the implementation and reporting of the results of this research.

Ethical Approval:

This study has been approved by the Health Research Ethics Committee with approval letter number. All research procedures were conducted in accordance with the principles of the Declaration of Helsinki.

Informed Consent:

Before data collection, participants were given an explanation of the purpose, procedures, risks, and benefits of the study. Participants who were willing to participate were asked to sign a consent form after being given an explanation (informed consent).

Reference





Publish: Association of Indonesian Teachers and Lecturers

International Journal of Health Sciences (IJHS)

Journal Homepage: <https://jurnal.agdosi.com/index.php/IJHS/index>

Volume 3 | Number 2 | June 2025 |



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