



A Correlation Between Knowledge And Motivation Of Pregnant Women With The Implementation Of Maternal Classes In The Working Area Of Megang Sakti Health Center

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Abstract. Prenatal exercise is a beneficial form of physical activity because it develops body muscles, increases the elasticity of pelvic floor muscles and ligaments, reduces bleeding during and after delivery, and can reduce the incidence of fetal distress. Exercise is also a form of coping that can prevent physical stress caused by pregnancy, such as reducing leg and back cramps and improving the mother's ability to adapt to changes in her body. This study was a descriptive correlational study using a cross-sectional design. The independent variables were the knowledge and motivation of pregnant women, while the dependent variable was the implementation of prenatal classes. The sampling technique used was total sampling, with a sample size of 55 pregnant women. Data collection used a questionnaire. Data analysis used univariate and bivariate methods. The results of the univariate analysis showed that the majority of pregnant women in the Megang Sakti Health Center had good knowledge of prenatal exercise (44 women, 80.0%). 39 (70.9%) of pregnant women were highly motivated to attend prenatal classes, and 26 (47.3%) of pregnant women attended prenatal classes. The bivariate analysis yielded a p-value of 0.013, indicating a relationship between knowledge and prenatal class implementation. A significant result was also obtained with a p-value of 0.016, indicating a correlation between prenatal motivation and prenatal class implementation ($p < 0.05$). Given the importance of prenatal exercise for maternal health, it is hoped that community health centers, as primary care providers, will be able to increase health promotion about prenatal exercise, facilitate prenatal exercise activities, and encourage community support for regular prenatal exercise activities.

Keywords: *Knowledge, Motivation, Prenatal Class.*

INTRODUCTION

Based on data from the South Sumatra Provincial Health Office in 2024 covering 9 regencies and 3 cities, it was found that all community health centers (Puskesmas) already have pregnancy classes. Musi Rawas Regency ranks third highest, with 93.2% of health centers providing pregnancy classes. Data from the Musi Rawas Regency Health Office in 2024 indicate that all 7 Puskesmas in Musi Rawas Regency have pregnancy classes. The highest number of pregnant women was recorded at Megang Sakti Health Center, with 271 participants (Health Office, 2024).

Improving the health of pregnant women can be achieved through various efforts, starting from antenatal check-ups to the implementation of pregnancy exercise programs. Pregnancy exercise consists of specific physical movements designed to improve maternal health during pregnancy. It is highly recommended for pregnant women, as it can facilitate the childbirth process, help manage prolonged labor, and prepare the mother mentally by fostering inner calmness and building self-confidence in facing labor (Elizawarda, 2017).

Pregnant women also require support and motivation to engage in certain activities, including pregnancy exercise. Many women do not participate in pregnancy exercise due to daily routine constraints such as work and household responsibilities, leaving them with limited free time. In fact, pregnancy exercise can be practiced at home and integrated into daily activities. Most housewives stated that they were unable to attend pregnancy exercise classes due to the long distance from their homes, making access difficult, combined with a lack of personal awareness and limited availability of public transportation. Insufficient knowledge about pregnancy exercise and low motivation to participate result in many women being indifferent to their pregnancy condition, unable to apply proper breathing techniques during labor, and experiencing exhaustion during the pushing stage. Therefore, knowledge of the benefits of pregnancy exercise and intrinsic motivation to perform it are crucial for pregnant women (Sardiman, 2020).

Previous research conducted by Sembiring (2016) showed that among 40% of mothers with good knowledge, 32.3% participated in pregnancy exercise, while 7.7% did not. Among the 40% of mothers with moderate knowledge, 21.5% participated and 18.5% did not. Of the 20% of mothers with poor knowledge, only 4.6% participated, while 15.4% did not. Furthermore, among 41.5% of mothers with high motivation, 33.8% participated in pregnancy exercise and 7.7% did not. In contrast, among 58.5% of pregnant women with low motivation, 24.6% participated, while 33.8% did not. Pregnant women often do not perform pregnancy exercise due to low motivation or reluctance, which stems from a lack of understanding of its objectives, benefits, procedures, and requirements. Low motivation to seek information regarding pregnancy exercise further diminishes mothers' willingness to engage in such activities.

Failure to perform pregnancy exercise may lead to fatigue and weakness in pregnant women due to suboptimal muscle function. Muscles function not only as structural support but also as stimulators of blood circulation. Muscle weakening is a common condition during pregnancy, as pain and cramps are frequently experienced by some women. Therefore, muscle flexibility is essential to maintain normal activity levels and to ensure a comfortable pregnancy experience (Didik, 2019).

Based on preliminary observations through brief interviews with 10 pregnant women in the working area of Megang Sakti Health Center, 6 respondents stated that they had never participated in pregnancy exercise due to low motivation or reluctance, caused by a lack of understanding of its objectives, benefits, procedures, and requirements. Meanwhile, 4 respondents frequently performed pregnancy exercise because they were already aware of its benefits. This situation influences mothers' knowledge and motivation regarding the importance of implementing pregnancy exercise. Another contributing factor is the lack of counseling or information provided by health workers regarding pregnancy exercise.

LITERATURE REVIEW

Knowledge is the result of knowing, and it occurs after an individual engages in sensory perception of a particular object. Sensory perception takes place through the human senses, namely sight, hearing, smell, taste, and touch. Most human knowledge is acquired through the eyes and ears. Knowledge, or cognition, constitutes a highly important domain in shaping a person's actions or overt behavior (Notoatmodjo, 2018).

Motivation originates from the Latin word *movere*, which means to drive or to move. Motivation is generally directed at human resources in general and subordinates in particular. It is a driving force that creates work enthusiasm, encouraging individuals to cooperate, work effectively, and integrate all their efforts in order to achieve satisfaction (Hasibuan, 2019).

Motivation is a factor that encourages an individual to engage in a particular activity; therefore, it is often defined as a driving force behind human behavior. Every activity performed

by an individual is influenced by certain motivating factors, which are generally needs and desires (Sutrisno, 2017).

Motivation strongly influences a person's mindset in undertaking an action, including participation in pregnancy exercise. Motivation can be derived from both intrinsic and extrinsic sources. High levels of motivation accompanied by low participation may occur because pregnant women lack the opportunity to engage in exercise due to work-related commitments. Motivation and knowledge alone are often insufficient to prompt action; adequate facilities and infrastructure are also required. For example, some pregnant women may wish to participate in pregnancy exercise programs at community health centers but are constrained by transportation costs, lack of appropriate exercise clothing, limited free time in the morning, or availability only in the afternoon, among other factors (Hudajanti, 2018).

Pregnancy Classes are learning groups for pregnant women with a gestational age between 20 and 32 weeks, with a maximum of 10 participants per class. In these classes, pregnant women learn together, engage in discussions, and exchange experiences related to maternal and child health (MCH) in a comprehensive and systematic manner. The classes are conducted on a scheduled and continuous basis. Pregnancy classes are facilitated by midwives or other health professionals using standardized learning packages, including the MCH handbook, flip charts, guidelines for implementing pregnancy classes, facilitator manuals for pregnancy classes, and pregnancy exercise books (L. Fitriani, 2021).

METHODS

Univariate Analysis

The data analysis conducted includes univariate analysis, which is used to obtain an overview of the frequency distribution of each research variable, both independent and dependent variables. This analysis employs the percentage formula:

$$P = F / n \times 100$$

Description:

P :Percentage to be calculated

F : Frequency of each response category

n : Total population

Based on the formula above, the proportion values obtained in percentage form can be interpreted as follows:

- 0% : None of the respondents
- 1%–25% : A small proportion of respondents
- 26%–49% : Nearly half of the respondents
- 50% : Half of the respondents
- 51%–75% : The majority of respondents
- 76%–99% : Almost all respondents
- 100% : All respondents

Bivariate Analysis

Bivariate analysis is used to examine the relationship between the dependent variable and the independent variables by applying the chi-square test (χ^2), with a significance level (α) of 0.10 and a Confidence Interval (CI) of 90% (Notoatmodjo, 2014). Decision-making criteria:

1. If the $p\text{-value} \leq \alpha$ (0.05), then H_0 is rejected and H_1 is accepted, indicating that there is a relationship between the knowledge and motivation of pregnant women and the implementation of pregnancy classes in the working area of Megang Sakti Health Center.

2. If the $p\text{-value} \geq \alpha$ (0.05), then H_1 is rejected and H_0 is accepted, indicating that there is no relationship between the knowledge and motivation of pregnant women and the implementation of pregnancy classes in the working area of Megang Sakti Health Center.

RESULTS

Univariate Analysis

Univariate analysis in this study aims to describe the results of data collection from respondents. The aspects analyzed in this research include an overview of mothers' knowledge regarding pregnancy exercise, an overview of pregnant women's motivation toward the implementation of pregnancy exercise, and an overview of the implementation of pregnancy exercise by pregnant women.

Table 1 Frequency Distribution of Respondents According to Pregnant Women's Knowledge in the Working Area of Megang Sakti Health Center

No.	Level of Knowledge	f	%
1.	Poor	4	7.3
2.	Moderate	7	12.7
3.	Good	44	80.0
	Total	55	100

Table 2 Distribution of Respondents' Motivation in the Working Area of Megang Sakti Health Center

Motivation Level	f	%
Low	16	29.1
High	39	70.9
Total	55	100

Table 3 Frequency Distribution of Respondents According to the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Implementation	Frequency	Percentage
Performed	29	52.7%
Not performed	26	47.3%
Total	55	100%

Bivariate Analysis

Bivariate analysis aims to examine the relationship between two variables, namely the independent variables (knowledge and motivation of pregnant women regarding pregnancy classes) and the dependent variable (implementation of pregnancy classes). The statistical tests used were the Chi-square test and correlation analysis.

Table 4 Relationship Between Knowledge and the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Knowledge Level	Not Performed		Performed		Total	p-value
	n	%	n	%		
Good	19	43.2	25	56.8	44	0.013
Moderate	7	100.0	0	0.0	7	
Poor	3	75.0	1	25.0	4	
Total	29	47.3	26	47.3	55	

Table 5 Relationship Between Pregnant Women's Motivation and the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Motivation Level	Not Performed		Performed		Total N	p-value
	n	%	n	%		
Low	13	81.3	3	18.8	16	0.016
High	16	41.0	23	59.0	39	
Total	29	52.7	26	47.3	55	

DISCUSSION

Overview of Pregnant Women's Knowledge and the Implementation of Pregnancy Classes

Based on the analysis presented in Table 5.1 above, of the 55 respondents, the majority had good knowledge, totaling 44 respondents (80.0%), followed by sufficient knowledge among 7 respondents (12.7%), and poor knowledge among 4 respondents (7.3%). It can be concluded that almost all pregnant women who participated as respondents in this study had good knowledge regarding pregnancy classes.

Notoatmodjo (2018) states that knowledge is the result of knowing, obtained through an individual's five senses—sight, hearing, smell, touch, and taste—toward a particular object. In this study, pregnant women's knowledge refers to their ability to understand matters related to pregnancy exercise, including its objectives, benefits, and related aspects.

This finding is consistent with a study conducted by Sukisno (2018), which reported that pregnant women who participated in pregnancy exercise had very good knowledge and demonstrated positive outcomes. This was evidenced by their ability to answer questions about pregnancy exercise fluently and confidently, as well as their understanding of its benefits in training specific muscles to prepare for and facilitate childbirth.

Pregnancy exercise is a form of therapeutic physical activity designed to prepare pregnant women both physically and mentally for a fast, safe, and spontaneous delivery. Exercise performed during pregnancy helps mothers cope with stress and anxiety. Exercises that promote comfort assist pregnant women in preparing for childbirth (Bobak, 2015).

Pregnancy exercise is not a new concept in Indonesia, and its dissemination continues through health workers, magazines, and other printed media. However, many people still lack knowledge about pregnancy exercise. This is evident from the study results, which show that 5 pregnant women (9.1%) had only sufficient knowledge of pregnancy exercise. This level of knowledge was reflected in their inability to correctly answer questions regarding the objectives and benefits of pregnancy exercise.

The findings of this study differ from those of Salamah et al. (2021), who examined the relationship between knowledge and attitudes of pregnant women toward pregnancy exercise at Banguntapan I Health Center, Bantul, Yogyakarta. Their study found that 8.1% of pregnant women had poor knowledge of pregnancy exercise. That study employed a non-experimental descriptive correlational method with a cross-sectional approach and involved a population of 102 respondents. Differences were also observed in the characteristics of pregnant women, as 54.8% of respondents in that study had junior high school education.

According to Locke (2021), once humans receive information, it is further processed through thinking, analyzing, questioning, classifying, and reflecting. Adequate knowledge should therefore be maintained and enhanced by exploring pregnancy exercise more deeply through the provision of information via health promotion activities at health centers, explanations from health workers, and the use of leaflets or posters to make information more engaging and optimally received.

Overview of Pregnant Women's Motivation and the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Based on Table 5.2, of the 55 respondents, the majority—39 respondents (70.9%)—had high motivation in participating in pregnancy classes, while 16 respondents (29.1%) had low motivation. It can therefore be concluded that almost all respondents had high motivation.

According to Clapp (2021), pregnancy exercise is a beneficial form of physical activity as it strengthens body muscles, increases the elasticity of pelvic muscles and ligaments, reduces the incidence of bleeding during and after delivery, and decreases the risk of fetal distress. This is in line with the study by Hudajanti (2015), which found that 71.8% of respondents had low motivation regarding participation in pregnancy exercise.

An individual's motivation to take action is influenced by various factors, including personal experience, the influence of significant others, culture, mass media, and health institutions. These factors function as important information systems in the cognitive process, social change, and the shaping of individual behavior (Azwar, 2015).

Overview of the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Based on Table 5.3, it was found that the majority of respondents—29 individuals (52.7%)—participated in pregnancy classes, while 26 respondents (47.3%) did not. Thus, it can be concluded that most pregnant women in this study participated in pregnancy classes.

According to Kwick (1974, in Notoatmodjo, 2018), behavior refers to actions or activities of an organism that can be observed and studied. Skinner (1938, in Notoatmodjo, 2018) distinguishes behavior into two types: covert behavior, which involves internal responses such as attention, perception, knowledge, awareness, and attitudes that cannot be directly observed; and overt behavior, which refers to observable actions or practices.

The behavior examined in this study was covert behavior; therefore, researchers did not directly observe respondents' actions. Data were collected solely through questionnaires regarding the implementation of pregnancy exercise.

This finding aligns with the study by Sukisno (2018), which found that pregnant women's behavior toward pregnancy exercise was very positive, driven by a strong desire for normal, natural delivery without surgical intervention, recommendations from doctors, and moral support from husbands.

Factors contributing to pregnant women not performing pregnancy exercise include insufficient knowledge and negative attitudes toward pregnancy exercise. This is evident from the respondents' answers, which indicated that most pregnant women did not perform pregnancy exercise independently at home but rather at health service facilities. The primary goal of pregnancy exercise is to strengthen pelvic muscles, improve blood circulation through increased oxygen supply, enhance oxygen delivery to the fetus, and train pregnant women in relaxation techniques to facilitate the labor process (Leifer, 2023).

According to Johnson's perspective, the goal of nursing is to maintain, restore, or achieve balance and stability within a client's behavioral system. When individuals are unable to adapt to environmental pressures, nurses act as external regulatory forces to modify structures or guide functional needs to restore stability. The results of this study indicate that more than half of pregnant women (52.7%) participated in pregnancy exercise. Given the many benefits of pregnancy exercise, it is essential for health workers to implement preventive measures to promote pregnancy exercise and improve pregnant women's participation.

Relationship Between Knowledge and the Implementation of Pregnancy Exercise

Based on the analysis presented in Table 5.4, it was found that among respondents with good knowledge, the majority (56.8%) participated in pregnancy classes due to extensive

information received regarding the benefits of pregnancy classes. Meanwhile, none of the respondents with sufficient knowledge participated in pregnancy classes, and among those with poor knowledge, 3 respondents (75.0%) did not perform pregnancy exercise.

The Chi-square test yielded a p-value of 0.013, indicating a statistically significant relationship between knowledge and the implementation of pregnancy classes.

This finding is consistent with the study conducted by Febriani (2019), which reported a p-value of 0.043 ($p < 0.05$), indicating a relationship between knowledge and the frequency of pregnancy exercise among pregnant women. Women with higher knowledge levels are more likely to engage in pregnancy exercise, believing it to be beneficial for facilitating childbirth. Conversely, those with lower knowledge levels tend to be less inclined to participate, often due to a lack of understanding of exercise procedures and benefits, as well as barriers such as laziness, lack of motivation, and limited encouragement from health services.

Bloom (2023) explains that the formation of new behavior begins in the cognitive domain, where individuals first become aware of stimuli, leading to knowledge acquisition, attitude formation, and ultimately action. This study confirms a relationship between pregnant women's knowledge of pregnancy exercise and its implementation. The findings are consistent with Habibatus (2012), who reported a significant relationship between knowledge and interest in participating in pregnancy exercise.

Knowledge is closely linked to the learning process and is influenced by internal factors such as motivation, as well as external factors such as information availability and sociocultural conditions. Pregnant women's knowledge of pregnancy exercise includes its definition, objectives, guidelines, and movements.

Therefore, it is crucial for health workers at Megang Sakti Health Center to provide more information and motivation regarding pregnancy exercise. With higher knowledge and adequate motivation from health services, pregnant women are more likely to participate in pregnancy classes, as knowledge serves as a strong foundation for behavioral change.

Relationship Between Motivation and the Implementation of Pregnancy Classes in the Working Area of Megang Sakti Health Center

Based on Table 5.5, among 55 respondents, 13 pregnant women (81.3%) with low motivation did not participate in pregnancy classes, while 23 pregnant women (59.0%) with high motivation participated in pregnancy classes. The Chi-square analysis yielded a p-value of 0.016, leading to the rejection of the null hypothesis (H_0) and acceptance of the alternative hypothesis (H_1). This indicates a significant relationship between motivation and the implementation of pregnancy classes in the working area of Megang Sakti Health Center.

This finding is in line with the study by Haswita (2021), which found a significant relationship between motivation and participation in pregnancy exercise ($p = 0.01$). Motivation plays a crucial role, as individuals who are motivated tend to engage in activities diligently to achieve positive outcomes. However, this result contrasts with the study by Neni Nursepti (2021), which found no relationship between motivation and participation in pregnancy exercise among primigravida mothers ($p = 0.217$). High motivation accompanied by low participation may be attributed to limited opportunities or insufficient family support.

CONCLUSION

Based on the results of the study and the discussion presented in the previous chapter, the conclusions that can be drawn from this study are as follows:

1. Almost all respondents (80.0%) have good knowledge regarding the class for pregnant women.
2. Almost all respondents (70.9%) have high motivation in participating in the implementation of the class for pregnant women in the Puskesmas Megang Sakti service area.

3. The results of the statistical test using the Chi-square test obtained a p-value of 0.013, indicating that there is a statistically significant relationship between the knowledge variable and the implementation of the class for pregnant women.
4. The results of the Chi-square analysis show a p-value of 0.016, which means that there is a significant relationship between motivation and the implementation of the class for pregnant women in the service area of Puskesmas Megang Sakti.

LIMITATION

Pregnancy exercise is very important for pregnant women in preparing for childbirth so that the delivery process can be safe and smooth. Therefore, it is expected that pregnant women will increase their motivation to participate in pregnancy exercise, considering that pregnancy exercise plays a crucial role in facilitating the labor process.

Puskesmas is a health service institution that emphasizes preventive, promotive, and curative care. To improve the quality of maternal health services, it is necessary for the health center to conduct health promotion activities related to pregnancy exercise for pregnant women and to organize pregnancy exercise programs, so that pregnant women are interested and motivated to participate in pregnancy exercise. Educational institutions are expected to improve quality and provide constructive input for midwifery students in enhancing their knowledge regarding the utilization of classes for pregnant women, particularly those related to pregnancy exercise.

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