Midwife Behaviors in UsingPoedjiRochjati Scorer to the Early Detection of High-Risk Pregnancy Efforts

[1]Sri Widatiningsih,[2]Siti Rofi'ah,[3]Siti Maryani

Abstract-- ***Background:****The "Jateng GayengNginceng Wong Meteng" related to the early detection of high risk pregnant women this is efforts to reduce maternal mortality. This effort requires activities that are innovative, proactive and anticipatory. Early detection is done by means of adequate treatment for all pregnant women, mothers at low risk or high risk mothers who are still healthy and mothers with delivery complications through the utilization of health facilities efficiently and cost-effectively be relevant, rational and professional. One of the tools for early detection of risk pregnant women using PoedjiRochjati Score Card (KSPR).*

Purpose : *ToAnalyzis many factors that influence the behavior of midwives in the use of scores "PoedjiRochyati" in the early detection of high risk pregnancy*

Method :*Explanatory research with qualitative and quantitative approaches. The population of the midwife in Magelang as much as 424 people with a sample of 77 midwives. The informants are five midwives, five pregnant women, 1 Family Health staff Health Office Magelang District and 1 chairman of the Indonesian Midwives Association (IBI) MagelangDistrict to cross check data. The analysis used was Spearman Rank test and multiple logistic regression test*

Research result: *There are variables influence knowledge, attitudes midwife community and community support for the midwife's behavior in the use of scores "Poedji Rochyati" in the early detection of high risk pregnancy. The results of this study are expected to be used as input for the Head of Department of Health in setting policy program of early detection of high risk pregnancy. And then research is expected to create a formulation for early detection of risk that has been compiling a variety of sources.*

Keywords--*Early Detection of High Risk Pregnancy; Score "Poedji Rochjati"*

I. INTRODUCTION

The "JatengGayengNginceng Wong Meteng" related to the early detection of high risk pregnant women in an effort to reduce maternal mortality. This effort requires activities that are innovative, proactive and anticipatory approach to risk include the control / prevention of complications of labor proactive consisting of strategies, methods and tools. Research(Yusuf, Anugerah and Adiani, 2017)states that the risk of pregnancy detection devices can be used and as decent a recording and reporting system for midwives. Early detection is carried out by mean of the handling is adequate for all pregnant women, mothers at low risk or high risk mothers who are still healthy and

[1]*Health Polytechnic of Semarang, Midwifery Study Program of Magelang; E-mail: s.widatiningsih@gmail.com*
[2]*Health Polytechnic of Semarang, Midwifery Study Program of Magelang; E-mail: nandasheeta@yahoo.com*
[3]*Health Polytechnic of Semarang, Midwifery Study Program of Magelang; E-mail: maryanisiti63@yahoo.com*

mothers with premature childbirth complications through the utilization of health facilities efficiently and cost-effectively by using it relevan, rational and professional.

One of the efforts for the early detection of risk pregnant women by using the scorecard method Poedji Rochjati (KSPR) issued by the Department of Safe Motherhood dr. Soetomo General Hospital. Research result(Widarta *et al.*, 2015)stating that the relevant KSPR still be used for early detection of risk factors for pregnant women. The scorecard is used as a tool of maternal health record-based family. The scorecard is made in one piece of paper and do it manually(Rochjati, 2011), The use of this score card is a form of support for health professionals in early detection of high risk pregnancy as submitted research(Khadijah and Arneti, 2018),

However, early detection of complications with Scorecard "Poeji Rochjati" has not been fully implemented. Various factors are reasons not to use this method. Under these conditions, researchers interested in conducting research on what are the factors that influence the behavior of midwives in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy?

Purpose Knowing the factors that influence the behavior of midwives in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy.

II. METHODS

Explanatory research with cross sectional study design. This research with quantitative and qualitative approach on several factors that are considered important. The population in this study were all midwives working in Magelang district health centers in 2018as many as 424 people(Dinkes Kab. Magelang, 2018), the total sample of 77 people. As for the qualitative data do cross check against what has been done by the respondent in the midwife behaviors in using of scores "PoedjiRochjati" in the early detection of high risk pregnancy by conducting in-depth interviews to five pregnant women who had received antenatal care at least 3 times by midwives in health centers working area of the research sample. Each maternal health centers represents one work area. Cross check is also made to the midwife, Family Health StaffMagelang district and chairman of the Indonesian Midwives Association (IBI) Magelangdistrict.Quantitative sampling done in several stages: 1) How purposive sampling that is based on a consideration consideration of the working area health centers represent respondents who far from the city center and close to the city center then made the determination based on the location of the districts with the city center, Based on these considerations gained five (5) groups of health centers; 2)The second stage is determination of samples Simple random sampling method is being used that each group has the same characteristics taken one to represent; 3)To determine the number of samples of each midwife and puskesmas using the Proportionate Random Sampling. Sample size calculation obtained from a total of 77 midwives were respondents in this study criterion midwife respondents are 1) Has passed or is currently studying for the Diploma in Midwifery; 2)Serving clients midwife pregnant women to visit at least 3 times in July 2019.Data analysis was done by univariate analysis with frequency distribution, bivariate analysis performed by *the Spearman rank* correlation test; Multivariate analysis using multiple logistic regression test(Dahlan, 2019).

III. RESULTS AND DISCUSSION

Analysis of the results showed average age of midwives in the district of Magelang 43 years. Age is one factor predispose a person's behavior changes(Green, 1991). Age is one factor that affects a person's mature physically, psychologically and social. Age also affects the maturity of thought somebody to take a decision on an issue. Increasing age of a person then the individual will make adjustments to the state of the environment. Both the physical and non-physical environment.

Midwives as a public figure in the community should be able to provide examples in everyday life as well as in carrying out their duties. With the maturity of age, the midwife should be able to understand the duties and responsibilities in society, including the early detection of high risk pregnancy Score "Poedji Rochjati". Undang-undang RI No.4 tahun 2019 on midwifery that one of the roles and functions of the midwife is as obstetric care giver(Presiden Republik Indonesia, 2019).Then in providing pregnancy care, midwife should make early detection of high risk pregnancies, especially using the Score "Poedji Rochjati". Increasing the age of midwives, it is expected that more steady in providing services and early detection of high risk pregnancy. Thus, morbidity and maternal and infant mortality can be decreased

Long work of midwives in Magelang district average of 20 years. The midwife who has worked for more than 20 years as many as 41 people. According toUndang-undang RI No.4 tahun 2019 on midwifery mentioned that the midwife who will run the midwifery practice are required to have licensed to practice. Permission was given in the form SIPB. To get SIPB, midwives must have a valid STR and has a practice. STR is valid for 5 years and shall be extended if the validity is up(Presiden Republik Indonesia, 2019), Long worked for at least 6 years and maximum 29 years, so the minimum already once and a maximum of 7 times midwife filed a registration letter.

Based on the theory of Green, duration work of respondents as one of the characteristics of respondents are predisposing factors for the occurrence of a person's behavior(Green, 1991). By the length of a midwife to practice midwifery services to the community, the more experience you have. Experience that many will gain confidence midwives in carrying out its duties and responsibilities. Thus, the quality of work of midwives in providing health services, especially during the early detection of high risk pregnancy Score "Poedji Rochjati" will get better. Midwives will further improve performance and implement positive things including early detection of high risk pregnancy, especially using the Score "Poedji Rochjati".

Midwives have a level of knowledge than the average (score 7) as many as 53 people. A good midwife knowledge can not be separated from the will to refresh knowledge, especially obstetrics. Knowledge can be obtained from the education, the experience of self and others, the mass media and the environment. Or cognitive domain knowledge is very important for the formation of one's actions(Notoatmodjo, 2012),

This is consistent with the theory of Green stating that knowledge as a predisposing factor for the occurrence of a person's behavior(Green, 1991), The knowledge required to drive a person psychologically in the growing self-confidence. Besides knowledge will motivate a person to behave and perform appropriate behavior with knowledge. Good knowledge of the respondents about the early detection of high risk pregnancies Score

"Poedji Rochjati" likely due to the continuous independently or midwife attending a seminar or read a reference to the early detection of high risk pregnancy. In addition knowledge about early detection of high risk pregnancy is generally obtained when the college Diploma III Midwifery Program Study so that knowledge most of the respondents were above average.

The majority of respondents do not know that the FR group II is to have danger signs during pregnancy. While the FR group I is a pregnancy that has problems that need to be wary of. They lack an understanding of the distribution of risk factors. This is most likely because the women feel cumbersome or less time in studying the scoring in the early detection of high risk pregnancies Score "Poedji Rochjati". The ability to know someone affected the ability of learning and memory(Notoatmodjo, 2012), Some of the respondents have less knowledge well, one possible reason is because they forget the knowledge that has been acquired and have never been put into practice in our daily activities. The power factor is the individual recall different from one another, so that respondents who have a good knowledge and some that have a poor knowledge.

However, some informants claim that scoring "Poedji Rochjati" easy to understand and easy to do because it is not much different from the initial screening. In fact, almost all the respondents knew that the danger to pregnant women with a youngest child aged <2 years is postpartum bleeding can occur. This is indicated by the results of the correct answer to that question as much as 96.1%

Midwife attitude towards the use of scores "Poedji Rochjati" had an average score of 8 by the number of midwives has a score of more than an average of 42 people or 54.5%. Midwife attitude towardthe use of scores "Poedji Rochjati" in the early detection of high risk pregnancies more than half of the respondents are already good.

Attitude is the inner response to external stimuli that cause feelings of like or dislike(Notoatmodjo, 2012), Attitude is a response that would arise if an individual faced with a stimulus that requires an individualized response.

Based on the theory of Green, attitudes are predisposing factors that influence a person's behavior(Green, 1991), The attitude of respondents who support a feeling of siding against the activities of early detection of high risk pregnancies Score "Poedji Rochjati". Instead attitude that less support is less an impartial attitude towards the activities of early detection of high risk pregnancies Score "Poedji Rochjati".

In establishing a unified stance, the necessary knowledge, thoughts, beliefs, and emotions. Being supportive or not supportive of respondents to the early detection of high risk pregnancies Score "Poedji Rochjati" begins from the level of knowledge. A midwife with good knowledge about early detection of high risk pregnancies Score "Poedji Rochjati" it would likely be supportive to such behavior, and vice versa. If knowledge midwife poorly on early detection of high risk pregnancies Score "Poedji Rochjati" he is a lack of understanding the importance of early detection of high risk pregnancies Score "Poedji Rochjati" so that the midwife to be less supportive of early detection of high risk pregnancies Score "Poedji Rochjati ".

All respondents answered correctly on the statement "How do you say to say that; at the time of performing the task when encountering high risk pregnant mothers. I made a referral on time to avoid complications. However, respondents answered almost entirely erroneous statements about "How do you say that in the FR group II had

problems peru watch out". Midwives rarely Score "Poedji Rochjati" in the early detection of high risk pregnancies possibility because there is no suggestion of the Department of Health for its use. This causes less midwife understand the contents of scoring "Poedji Rochjati" For that we need a policy of stakeholders to support midwife early detection of high risk pregnancy because based on research results(Widarta et al., 2015)stating KSPR still relevant to be used for early detection of risk factors for pregnant women. Prevention of four late factor essential for reducing the maternal mortality rate.

Midwife with a score less than the median which is 9 by 32.5%. Motivation midwives againstthe use of scores "Poedji Rochjati" in the early detection of high risk pregnancies have the highest score 10 and the lowest score 5. The average indicates that the motivation of midwives in the district of Magelang is good enough. This is most likely because they do early detection of high risk only to obligations. Motivation is an impulse within the individual person who can be seen from the behavior of the person. Motivation arises because of the stimulus or stimuli that must be achieved to meet their needs(Muninjaya, 2011),

Green theory states that motivation is one of the predisposing factors for the occurrence of a person's behavior(Green, 1991). The motivation of respondents to use score "Poedji Rochjati" in the early detection of high risk pregnancy is a condition that affects the midwife to develop, direct, and always use the scores "Poedji Rochjati" in the early detection of high risk pregnancy.

A midwife who have a good motivation will always improve performance in the early detection of high risk pregnancies Score "Poedji Rochjati" in order to reduce morbidity and maternal and infant mortality. He will always make early detection of high risk pregnancies using score "Poedji Rochjati" as a form of responsibility and authority in detecting high-risk pregnancy. Midwives who have a good motivation will always make early detection of high risk pregnancies using score "Poedji Rochjati" although there is no punishment if he did not carry it out.

However, the midwives who are motivated less well in the early detection of high risk pregnancies Score "Poedji Rochjati" will find that it is very burdened if they have to carry it out. He felt there was no reason to carry out such behavior, even he felt a duty as a midwife is not resolved when he did the early detection of high risk pregnancies Score "Poedji Rochjati".

Most of the respondents in this study already had a good motivation in the early detection of high risk pregnancies Score "Poedji Rochjati", meaning most respondents always want to improve the performance and always strive for early detection of high risk pregnancies Score "Poedji Rochjati" so mother and baby healthy and safe to suppress morbidity and maternal and infant mortality.

Almost all respondents as many as 98.7% are motivated that run early detection of high risk pregnant women to suppress the occurrence of complications. This shows a high awareness that midwives are committed to reduce maternal mortality and morbidity. Nevertheless, there are still more than half of the respondents answered incorrectly on the motivation statement I want the best achievement of the other friend in performing early detection high risk pregnant women. The answer to this statement illustrates that midwives lacked the spirit of competition

among peers. They make early detection of high risk as the obligation to run government rules and worrying about making mistakes.

The average behavior of community midwives showed a very good score of 10 with the number of midwives has a score of 10 as much as 53.2%. The behavior of the midwife community is one Reinforcing Factors, are factors that strengthen or promote a change in one's behavior related to health(Green, 1991), Someone in a health behavior requires not only knowledge and positive attitude but be an example of behavior of friends is a community.

Midwives who feel that the behavior of community support for the early detection of high risk pregnancies Score "Poedji Rochjati" then he will follow the behavior of the community. He will feel different and do not become part of the community if it does not implement behavior do with the community.

IV. RESULTS OF THE STUDY

The results of the study more than half of the respondents stated that the behavior of community support for the early detection of high risk pregnancies Score "Poedji Rochjati" so they will try to imitate the behavior of their peers. They will always try to implement such behaviors do with the community. It is appropriate that expressed by the Family Health Staff Magelang District Health Office and Chairman of the Indonesian Midwives Association (IBI) Magelang district.

Instead, the midwife who found the behavior of the community does not support for the early detection of high risk pregnancies Score "Poedji Rochjati" will feel strange and awkward if he did not do early detection of high risk pregnancy because of the community is not doing the behavior.

Someone will behave by imitating the behavior of the people closest. Although midwives have the knowledge, attitude, and motivation is good about the early detection of high risk pregnancies Score "Poedji Rochjati" but chances are he did not carry it out because of the behavior of the community does not support the implementation of the role.

All respondents found fellow friends midwife provides health education materials on the high-risk pregnancy. They argue that in providing services pregnancy always undertake health education on high risk pregnancy. However, there are 20.78% of the midwives or as many as 16 people were found "friends of my fellow midwives carry out early detection high risk using score" Poedji Rochjati "only in pregnant women at risk"; My friends fellow midwife has prepared several tools to carry out early detection high risk using score "Poedji Rochjati"; and "Friends of my fellow midwife early detection high risk using score "Poedji Rochjati"according to the instructions that right".

Some responses such statement is less likely due to a scoring "Poedji Rochjati" has not a fundamental program to be executed so that the midwife used as an additional or supplementary tool in the early detection of high risk pregnant women.

Public support for midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancy had an average score of 9. Respondent with a total score above the median for 52 people. Community

support is one of the factors (Reinforcing factors) are factors that strengthen or promote a change in one's behavior related to health(Green, 1991),

Public support for the midwife in the early detection of high risk pregnancy Score "Poedji Rochjati" is Perception owned by the midwife to the cooperation provided by the public, especially pregnant women use score "Poedji Rochyati" in the early detection of high risk pregnant women. With the support of a good society would be very helpful and encouraging midwives to always make early detection of high risk pregnancies Score "Poedji Rochjati". Conversely, if the public support is less good, it will lead to the midwife did not want to do early detection of high risk. One example of poor public support as mentioned in the respondent's answer is the Client (pregnant women) do not ask questions or answer questions midwife after conducting early detection high risk using score "Poedji Rochjati". With less active clients, midwife will trouble early detection of high risk pregnancies Score "Poedji Rochjati". making it difficult for midwives to determine which interventions should be given.

All respondents found clients (pregnant women) are willing to receive services in pregnancy care from midwives appropriate roles, duties and responsibilities of the midwife profession. In general the people are very supportive of the behavior of the midwife in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy. Community welcomed the midwife's behavior because behavior has been very beneficial for pregnant women and families to detect and determine the immediate action if there is a high risk pregnancy. One form of community support is participation in classroom activities expectant mothers

However, some midwives found there are still clients (pregnant women) are often cut off early detection activities high risk using score "Poedji Rochjati" provided by midwives with a reason to go home. This is likely due to a lack of awareness of clients (pregnant women) on the importance of health education in particular on high-risk pregnancy. The most important factor in changing the public's support is awaken the community through family education

The average score of the availability of facilities for midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancy as much as 5 or almost all midwives stated that adequate advice for the early detection of high risk pregnancies using score "Poedji Rochjati".

Availability means is the presence or absence of tools to supportmidwife on usage behavior score "Poedji Rochyati" in the early detection of high risk pregnant women. Tools in carrying out the practice is one of the enabling factors (Enabling Factors)(Green, 1991), that precede the behavior that enables a desire to be able to be implemented.

Means to support the midwife early detection of high risk pregnancies Score "Poedji Rochjati" can be a room as the provision of services, an atmosphere that supports the delivery of services, and the availability of tools to assist in the early detection of high risk pregnancies Score "Poedji Rochjati" and funds to complete the necessary means. Tools will be very helpful in the early detection of high risk pregnancies Score "Poedji Rochjati" so that high risk can be detected accurately. Similarly, both indoors and ambience of the place of service delivery must also be conducive to the early detection of high risk pregnancies Score "Poedji Rochjati".

Some midwives expressed a tool for the early detection of high risk pregnancies Score "Poedji Rochjati" is not available. In fact, the tools used in the early detection of high risk pregnancies using score "Poedji Rochjati" is actually the same as screening tools in general. If the respondents said there is a tool that is not available then it is referred to the scoring card. Midwives must be creative in making or printing the card. Based on the observations of researchers at KIA 2016 book still attached scorecard Poedji Rochjati. Researchers found that two (2) people midwife who still retain and use the card in the early detection of high risk pregnancy. Another tool used for early detection of high risk pregnant women is common pregnancy screening tool

The ambiance of a service delivery support for conducting early detection high risk using score "Poedji Rochjati" supports for 88.31% of respondents support to carry out these activities. Similarly, in the statement of the room where the delivery of services to carry out activities to support early detection high risk using score "Poedji Rochjati"; There are tools to help implement early detection activities high risk using score "Poedji Rochjati" and provided sufficient time to help implement early detection activities high risk using score "Poedji Rochjati".

These answers show that in the early detection of high risk pregnancies using score "Poedji Rochjati" means supports. Nevertheless, there is still no answer the availability funds to equip a means of conducting early detection high risk using score "Poedji Rochjati" still not sufficient. It is based on answers there are 23.38% of respondents answered no. This is because the current rules all Indonesian citizens are required to have health insurance, so that if a program or activity to be undertaken midwife is not a mandatory program, no funds as a support. For example, if the midwife wanted to add early detection using a scorecard "Poedji Rochjati" should be self-financing print it.

The average score of the behavior of midwivesthe use of scores "Poedji Rochjati" in the early detection of high risk pregnancy is 8. The midwife with a score of behavior over an average of 68.8%. The behavior is a manifestation of the implementation of an action, the practice is influenced by the will, the will is influenced by attitudes, while attitudes are influenced by the belief in the result of the actions that have been implemented in the past(Rakhmat, 2013), Behavior is influenced by predisposing Factors, Reinforcing Factors, and Enabling Factors(Green, 1991). Thus, the behavior of the midwife in the early detection of high risk pregnancies Score "Poedji Rochjati" is influenced by various factors, among other characteristics, knowledge, attitudes, motivation, behavior of the community, community support, and availability of facilities.

Midwife in organizing the practice of midwifery, midwives can take the role of obstetric care, midwifery services manager, educator and counselor, educator, mentor and facilitator clinics, driving community participation and empowerment of women and / or researchers(Presiden Republik Indonesia, 2019). In accordance with the role of midwives as maternity care providers and the midwife should make early detection of high risk pregnancy is one with a score of "Poedji Rochjati". This fits well with the(Menkes RI, 2017) which states that one midwife authority is to provide maternal health services that include konseling period before pregnancy, antenatal normal pregnancy, normal childbirth, normal puerperal women, nursing mothers, counseling period between. in normal pregnancies antenatal midwife has an obligation to do early detection of high risk. Pregnancy is included reproductive health

cycle that should get the attention of health workers, particularly midwives for midwives are health workers are most often associated with pregnant women.

In this study, almost all midwives have a high risk of early detection of pregnancy using the Score "Poedji Rochjati". This is consistent with the in-depth interviews Family Health Staff Health Office Magelang District and the chairman of IBI Magelang district states that midwives in the district of Magelang already high risk of early detection of pregnancy using the Score "Poedji Rochjati". The behavior of early detection of high risk pregnancy should always be done when giving care for popularity(Hidayah, Wahyuningsih and Kusminatun, 2018) states that there is a relationship between the level of risk of pregnancy with the incidence of complications of childbirth.

Almost all items were answered evenly statement. Approximately 25.97% to 29.87% of the respondents answered no to each item statement. This suggests that some respondents who did not carry out the behavior of early detection of high risk pregnancy using score "Poedji Rochjati", and some do, but not entirely. For example, the statement item I plan upbringing high-risk early detection using score "Poedji Rochjati"; I am evaluating care results in early detection efforts high risk using score "Poedji Rochjati"; and I do care documentation implementation of early detection high risk using score "Poedji Rochjati". Answer the statement shows that midwives are doing the behavior of early detection of pregnancy high risk using score "Poedji Rochjati but do not use tools, do not perform or not perform the evaluation and documentation of the results of the action. This is likely due to a scoring "Poedji Rochjati" is not a fundamental program for early detection of high risk pregnancies in Magelang.

Overallmidwives in Magelang district early detection of high risk pregnancies early. There is a mandatory program to implement the use of the health office use KIA book includes counseling, 18 screening and partograf. However, some of the modifications using the scorecard "Poedjo Rochjati". The midwife is inseparable from the rules governing authority, it is also one of the standards in determining that the client can be treated or should be done referral. As well as the rules of BPJS health, if it is not the authority but the authority had not yet entered criteria national health insurance the risk can not be paid by national health insurance. This is an obstacle for midwives in behavior, early detection of high risk pregnancies appropriately.

Based on the answers to qualitative assessment needs to be a tool for early detection of high risk pregnancies modification of the score "Poedji Rochjati" compiled by 18 screening, midwives authority, KIA book and BPJS rule .

There are individual variables influence knowledge, attitudes midwife community and community support for the midwife's behavior in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy. Variable knowledge of the effect is greater than the influence of the behavior of the community and community support for the midwife's behavior in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy. When the midwife good knowledge of the behavior of the midwife in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy is 11 times better. This shows that to improve the behavior of midwives in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy the midwife of knowledge should be enhanced.

However, much of the behavior of the midwife community to support the midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancies 0,16 times better. Whereas if the support of the community support the midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancy 0,085 times better.

The midwife will make early detection of high risk pregnancies using score "Poedji Rochjati" if the knowledge about the behavior of support to perform the behavior. It required an increase in the capacity of midwives on early detection of high risk pregnancies by the Department of Health and professional organizations so that all members of the midwifery profession to implement early detection of high risk pregnancy. With a good knowledge of the individual midwife will understand the need for early detection of high risk pregnancies and carry out these activities in time of pregnancy care.

Results were in line with (Khadijah and Arneti, 2018)which states that the knowledge and support of health workers is the most decisive determinant in the early detection of high risk pregnancy. It is expected that health workers to provide counseling regarding the efforts for early detection of high risk pregnancies and teach and motivate pregnant women to be able to do early detection of high risk pregnancy.

Early detection of high risk pregnancies also influenced by the behavior of the community midwife. This is according to the results of research(Rofi'ah, 2016)that the most dominant factor affecting midwifery practices in carrying out a role as an educator in prenatal care is the midwife community behavior. The midwife will carry out early detection of high risk pregnancy if professional colleagues are also doing the same thing. This requires a good control of the Department of Health and professional organizations so that all members of the midwifery profession to implement early detection of high risk pregnancy. With a supportive community behavior such behavior then each individual midwife will try to imitate and implement early detection of high risk pregnancy.

Community midwives in the early detection of high risk pregnancies integrated with a series of checks. If needed services in collaboration with other professions. This service pattern according to the results of research(Nuraisya, 2018)that the detection of high risk must be synergistic with a series of checks as detection of problems or diseases. Interventions that can help pregnant women in labor.

Besides the early detection of high risk pregnancies also influenced public support. Community support is good against the midwife's behavior early detection of high risk pregnancy, the midwife with more comfortable and full responsibility for carrying out these activities. To foster good community support necessary to do an activity for the public dissemination and cross-sector cooperation to raise public awareness of the importance of early detection of high risk pregnancy. With better public understanding about the early detection of high risk pregnancies it will lead to good community support to the activities of early detection of high risk pregnancy, then the midwife will always conduct the early detection of high risk pregnancy.

A good understanding of high-risk pregnancy and as a form of public support will foster adherence antenatal. It is appropriate research(Qudriani and Hidayah, 2017)there is a significant association between maternal perception of high risk pregnancies with antenatal care compliance. Maternal perception of high risk pregnancy that

both will be able to change the mindset, behavior and attitude to pregnant women obedient in doing the ANC. The compliance with the conditions of the pregnancy would always be monitored so as to reduce morbidity and mortality of both mother and baby.

Another way to increase people's understanding is to enable Posyandu cadres. Cadre as an arm of the midwife and always with the people, especially pregnant women will help in early detection of high risk pregnancies by society. This method is suitable community service activities(Setyaningsih, Adriyani and Ulfah, 2016)that the training of cadres Posyandu toddler and health education to pregnant women through the provision of material programmed on the class of pregnant women and antenatal premises using the method of Participatory Learning and Action (PLA). The results showed an increase in the mean activity score Posyandu cadre knowledge toddlers and pregnant women, respectively amounting to 7.6 to 37 dan14-16 point.

V. CONCLUSION

The average age of midwives in the district of Magelang is 43 years old. The average length of employment of midwives 20 years. Midwife knowledge about the use of scores "PoedjiRochjati" in the early detection of high risk pregnancy with good category as much as 68.8% with an average score 7 score of at least 5 and a maximum of 10. The midwife's attitude towards the use of scores "PoedjiRochjati" in the early detection of pregnancy high risk categories of support as much as 54.5% with an average score of 8, a minimum score of 5 and a maximum of 9. Motivation midwife to use score "PoedjiRochjati" in the early detection of high risk pregnancy with category support as much as 67.5% with an average score of 9, score a minimum of 5 and a maximum of 10. the behavior in the use of community midwives score "PoedjiRochjati" in the early detection of high risk pregnancy with support as many as 53 categories.

There is no relationship between age, length of labor, knowledge, attitudes, motivation, and availability of the midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancy. There is a relationship between the behavior of community midwives and community support with the midwife on usage behavior score "Poedji Rochjati" in the early detection of high risk pregnancy. Knowledge has a greater influence than the influence community behavior and community support for the midwife's behavior in the use of scores "Poedji Rochjati" in the early detection of high risk pregnancy.

It is suggested to the Chief Medical Officer midwife Magelang to improve knowledge about early detection of high risk pregnancies and establish a policy on monitoring and evaluation as well as facilitate a method of early detection of high risk pregnancy is already integrated. Professional Organization for Indonesian Midwives Association (IBI) Branch Magelang district to carry out monitoring and evaluation as well as provide guidance to midwives who do not carry out early detection of high risk pregnancy as well. As for further research in order to create a method for early detection of high risk pregnant women modifications score "Poedji Rochjati" which has been adapted to the authority, the KIA book, 18 screening and BPJS rules.

Acknowledgments

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