

MIDWIFERY SERVICE FACTORS THAT CAN REDUCE CHILDBIRTH SECTIO CAESAREA AT AZ-ZAHRA. PRIMARY HEALTH CARE

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ABSTRACT

Introduction: Indonesia's section Caesarea rate in the JKN ERA is currently 79.2%, higher than the WHO recommendation of 10% to 15%. As the leading midwifery services, primary health services have an essential role in reducing cesarean section referrals. Midwifery services in primary health services are currently considered unable to lower the referral rate for Sectio Caesarea. This study aims to determine the indicators of midwifery services in primary health services that can reduce cesarean section deliveries.

Research Methods: This study used a qualitative research design. Data were collected using in-depth interviews using a sample of 19 people. They divided into nine primary informants (pregnant women) and ten additional informants (mothers who had a history of cesarean delivery).

Research Results: Found 18 indicators in midwifery services at the primary health care Clinic Azzahra Tangerang. 1. Competent, 2. Comfortable, 3. Motivational, 4. Compassionate, 5. Clean, 6. Communication, 7. Knowledge, 8. Praying, 9. Friendly, 10. Calm, 11. Patient, 12. Sustainable, 13 Childbirth Assistant, 14. Availability, 15. Appreciating, 16. Complete Facilities, 17. Low Cost, 18. Leadership

Conclusion: Comprehensive midwifery services can reduce cesarean delivery in Az-Zahra Primary Health Services.

Keyword: Midwifery service, reduction, Sectio Caesarea, primary health service

I. PRELIMINARY

The incidence of SC in the world has continued to increase since 2014, especially in developing and developed countries past the average standard set by the World Health Organization (WHO) in a land of around 5-15 percent per 1000 births in the world (Sihombing et al. , 2017). Some of the countries with the highest SC numbers include Brazil (54%), Australia (32%), and Colombia (43%) (Puspitaningrum, 2017).

This case also happens in Indonesia, both in government and private hospitals. The proportion of deliveries of Sectio Caesarea in government hospitals is 20%-25%, and private hospitals are 30%-80% (Susilo et al., 2019). The IDHS data (Indonesian Demographic and Health Survey) shows an increasing trend of 1.3-6.8% in deliveries of Sectio Caesarea in Indonesia from 1991 to 2007 (Sihombing et al., 2017).

The high rate of deliveries by cesarean section compared to regular deliveries is currently a focus in midwifery services. Several studies explain the disadvantages of cesarean section delivery, including causing pain which causes problems in postpartum mobilization, and breastfeeding problems. Around 68% of post-Sectio Caesarea mothers have difficulty with baby care, moving up, down from the bed, adjusting to a comfortable position during breastfeeding on the bed, and adjusting to a comfortable position during breastfeeding pain. As a result of this pain, the patient delays breastfeeding from the start (Rini, 2018). Cesarean birth also affects the child's sensory perception, sensory integration ability, neuropsychiatric and developmental influences, and the relationship between baby and mother (Chen and Tan, 2019).

Another disadvantage of having a cesarean section delivery is the heavier financial burden compared to regular delivery. Sectio Caesarea delivery will cost many times greater than expected delivery. Therefore, the family's financial ability is one of the considerations in deciding to give birth by Caesarean section (Sihombing et al., 2017). According to the JKN-KIS Quality Control and Cost Control Team (KMKB) Report, Sectio Caesarea has increased after Indonesia implemented JKN-KIS. The number of deliveries with JKN-KIS in 2014-2018 recorded as much as 57% choosing delivery via cesarean section, the remaining 43% with regular deliveries. In a study conducted by Widjayanti (2020), the proportion of cesarean deliveries for JKN participants was 79.21%.

A systematic review of 137 articles concluded that involvement in decision-making, the quality of the health care provider's relationship with the patient, and the support provided by the care provider are the three main factors that influence women's satisfaction with their birth experience (Hodnett, 2002).

The concept of health services in the era of national health insurance is primary health care. Essential health services, also called basic health services, consist of several types of health services considered crucial (very important) to maintain the health of a person, family, and community to live socially and economically productive.

A study conducted (Naariyong & Poudel, 2012) stated that the weak relationship between antenatal care and maternal health outcomes was due to a lack of attention to the content and quality of antenatal care. The hope that mothers have before using antenatal services is to get antenatal services provided by health workers who have the competency, assurance, responsiveness, and communication (Myrra Rizky Yanuaria, n.d.). The success of essential health services, primarily promotive and preventive, will reduce the burden of continued services (Bappenas, 2018).

II. RESEARCH METHODS

This study uses a qualitative method. Students, through in-depth interviews, collected data to explore and explore the information needed to build dimensions or indicators of midwifery services. The selection of informant subjects used purposive sampling as a data source in this study with the criteria of mastering the problem, having data, being domiciled in Tangerang City, and being willing to provide complete and accurate information. Qualitative research was conducted from April to May 2020 using a sample of 19 people. They divided into nine primary informants (pregnant women) and ten additional informants (mothers who had a history of caesarean section delivery).

The data collection stage in this study a) Determines qualitative research informants, b) Takes a personal approach to ask for willingness to become informants, c) Determines time to conduct in-depth interviews, d) Conducts interviews with predetermined informants. Data collection techniques carried out in this study used: a) Structured Interviews, b) Documents.

Data Processing and Analysis Techniques in this study are qualitative data collected, both primary and secondary, imported into NVivo and classified according to the type of data to facilitate data processing and analysis in NVivo 12 Plus. Ranked data imported into NVivo is in the form of a data transcript. The data will be according to the purpose of the study. The three types of coding used in this study are open, axial, and selective. Then triangulated the data.

III. RESULTS AND DISCUSSION

Table 1 Characteristics of Main Informants 1

No	Name	History of Pregnancy and Childbirth	Pregnancy Check-up
1.	Mrs. AF	G2P1A0, BSC 1x; 4 years	Clinic Az-Zahra
2.	Mrs. FS	G3P2A0, BSC 2x; 2 years	Clinic Az-Zahra
3.	Mrs. AP	G2P1A0, BSC 1x; 5 years	Clinic Az-Zahra
4.	Mrs. RH	G2P1A0, BSC 1x; 5 years	Clinic Az-Zahra
5.	Mrs. HS	G1P0A0	Clinic Az-Zahra
6.	Mrs. RS	G2P0A1	Clinic Az-Zahra
7.	Mrs. IP	G1P0A0	Clinic Az-Zahra
8.	Mrs. IS	G1P0A0	Clinic Az-Zahra
9.	Mrs. SA	G3P2A0	Clinic Az-Zahra

Source: Primary Data 2020

Table 2 Characteristics of Additional Informants

No	Name	Referral Diagnosis	Type of Delivery
1.	Mrs. NA	G3P2A0 Uk 38-39 Sunday with KPD	SC
2.	Mrs. TA	G1P0A0 Uk 40 Weeks with prolonged second stage + KPD 12 hours	SC
3.	Mrs. IE	G2P1A0 Uk 40 Weeks with Elongated First Stage	SC
4.	Mrs.ER	G2P1A0 Uk 40mg with BSC 1X	SC
5.	Mrs.SE	G1P0A0 Uk 39-40 Sunday with KPD	SC
6.	Mrs.HM	G1P0A0 Uk 38 Week With 2nd Stage Extends	SC
7.	Mrs.MT	G3P1A1 with PEB	SC
8.	Mrs.LA	G1P0A0 UK 38 Weeks with PER	SC
9.	Mrs.GH	GIPOA0 Pregnant UK 39 mg with PROM	SC
10.	Mrs.AY	G1P0A0 Uk 38 weeks with HT and Oligohydramnios	SC

Source: Primary Data 2020

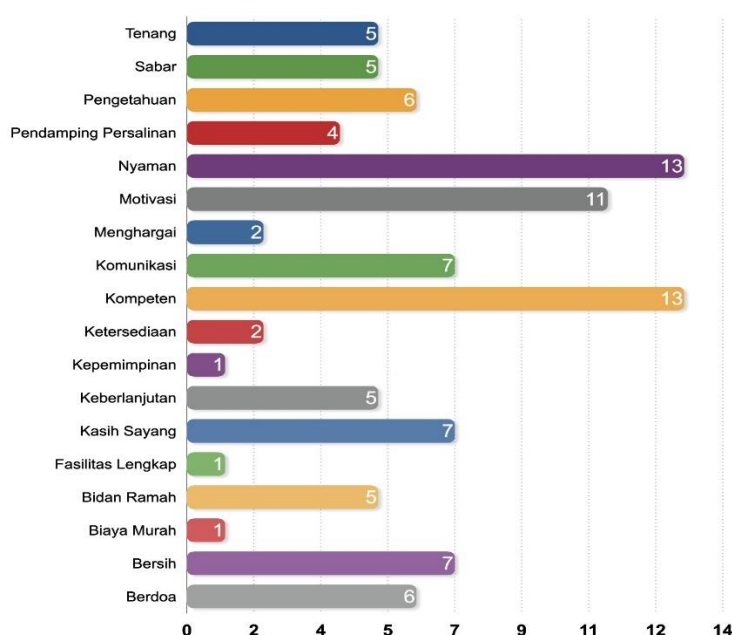


Figure 1. Results of the Midwifery Service Qualitative Code1

Found 18 indicators in midwifery services at the primary health service Azzahra Clinic Tangerang.1. Competent, 2. Comfortable, 3. Motivational, 4. Compassionate, 5. Clean, 6. Communication, 7. Knowledge, 8. Praying, 9. Friendly, 10. Calm, 11. Patient, 12. Sustainable, 13 Childbirth Assistant, 14. Availability, 15. Appreciating, 16. Complete Facilities, 17. Low Cost, 18. Leadership

1) Competent

<Files\\INTERVIEW\\Patient Astrisa>

Reference 1 - 2.53% Coverage

"Having trained and competent health personnel."

Competence is the basic knowledge, skills, and values reflected in the habit of thinking and acting consistently and continuously, which allows a person to be competent, having the basic knowledge, skills, deals , and attitudes to do something. The habit of thinking and acting base on the noble character in personal, social, social, religious life, and the life of the nation and state (Tajmiati, Astuti, and Suryani, 2016)

Midwives in carrying out midwifery services use the following principles: The working code of midwives is one of them being competent in midwifery services (Tajmiati, Astuti, and Suryani, 2016)

Midwife competence is the ability of midwives to carry out a task and job based on knowledge, skills, and work attitudes. Midwife competency standards formulate a midwife's ability based on knowledge, skills, and attitudes. The Ministry of Health stipulates that midwives must have nine competencies based on the Decree of the Minister of Health of the Republic of Indonesia Number 369/MENKES/SK/III/2007 concerning the professional standards of midwives. (Sefrina Werni, Identification of Midwives Competence).

According to Sujiyatini et al. (2009), the ability/competence of midwives is the power and characteristics that include knowledge, skills, and behaviors that a midwife must possess in carrying out midwifery practice safely and responsibly in various health care settings. Competency standards are the formulation of an ability based on knowledge, skills, and attitudes. Midwife competency standards formulate a midwife's ability based on knowledge, skills, and attitudes.

2) Convenient

<Files\OBSERVATION\Testimony of patient Nurul Khoirunnisa az-Zahra clinic>

Reference 1 - 17.03% Coverage

"The facilities are now even better and more comfortable, and we decided to give birth at the Azzahra clinic again."

A mother who feels comfortable giving birth will have confidence, the ability to cope, and a solid capacity to reduce pain perception and reduce the risk of medical intervention during childbirth. It is necessary to evaluate whether the comfort needs of the maternity mother meet; the increase in comfort indicates that the tension/anxiety of the Maternity Environment Arrangement as an Effort to Increase Maternity Comfort and Satisfaction is being restored and leads to more constructive behavior. Constructive behavior, described as a sense of renewal, can strengthen motivation and a positive attitude towards the challenges of labor progress even though the mother may experience pain from labor contractions (Chuntharapat, 2007).

3) Motivation

<Files\INTERVIEW\Midwife Dewi>

Reference 1 - 2.18% Coverage

"given motivation and can be grateful in life"

A mother who has the support of her partner and other family members, the wider the environment where she lives can influence the development of the fetus in the mother's womb. Commitment from husbands as well as mental support from parents and family make the right combination in helping the mother and the baby psychologically in her womb so that pregnant women can achieve inner peace because the environment and atmosphere are very supportive and will also make the baby's development optimal (Harijanto, Moestopo, and Beautiful, 2014)

The feeling of security, comfort of a mother going through pregnancy and childbirth is obtained by the moral support of her husband. But not only psychologically needed by the mother, the thing that can significantly influence the choice of delivery method is material support. When the mother is pregnant, the husband's real support encourages the mother to have a scheduled pregnancy check (Cherawaty, 2004).

4) Affection

<Files\INTERVIEW\Beautiful Patients>

Reference 1 - 1.96% Coverage

"Service with loving care"

According to the Big Indonesian Dictionary (KBBI), the meaning of affection is love. Another meaning of compassion is compassion. (KBBI, 2021)

Affection is one form of affection according to psychological theory. But literally, affection is a psychological response to external influences, causing a willingness to care, empathy, sadness, and anger. While narrowly, affection is defined as a form of feeling between two parties.

5) Clean

<Files\\INTERVIEW\\Patient Annisa> - 1 reference coded [4.97% Coverage]

Reference 1 - 4.97% Coverage

"and have adequate infrastructure so that patients will feel calm, safe, and comfortable."

According to the Big Indonesian Dictionary, the meaning of clean is free from dirt, not polluted, clear, and neat (KBBI, 2021). Cleanliness is a human effort to protect themselves and their environment from dirty and vile to realize and preserve a healthy and comfortable life. Cleanliness is a condition for realizing health, and health is one of the factors that can give happiness. On the other hand, dirty destroys beauty and can also cause various diseases, and illness is one of the factors that cause suffering (Masrifah, 2013).

6) Communication

<Files\\INTERVIEW\\Patient Rahma>

Reference 1 - 6.77% Coverage

"midwives/doctors who want to hear the complaints of pregnant women and want to teach sharing in a comfortable and relaxed manner."

Communication is interpreted as the process of conveying messages to other parties. The keyword in communication is the message itself. From that message, the communication process is carried out. Communication can take place because there is a mandate that wants or must be given to other individuals. The news here is not only in the form of information but also symbols or symbols. Symbols can be used to designate something else based on the agreement of a group of individuals. Symbols can be words (verbal messages), nonverbal behavior, and objects mutually agreed meanings. The human ability to use symbols enables the development of language. It handles the relationship between humans and objects (natural and abstract) without the existence of the individual and the entity. Therefore, communication is also called a symbolic process (Mulyana, 2005).

7) Knowledge

<Files\\INTERVIEW\\Patient Rahma>

Reference 1 - 2.19% Coverage

"Educate pregnant women well"

Notoatmodjo (2007) defines knowledge as a form of knowing after someone receives information from a particular object, namely the senses of sight, hearing, smell, feeling, and touch. The majority of knowledge is obtained from the minds of sight and hearing. The importance of knowledge for a person is to be able to build one's character.

8) Pray

<Files\\INTERVIEW\\Patient Astrisa>

Reference 1 - 1.51% Coverage

"and always lead to dhikr"

Dolatian et al. (2017), in their research mentions, in today's world, spiritual issues are considered an essential element in everyday life. Praying is a great manifestation of an individual's relationship with God, allowing the individual to communicate with God in times of despair or even happiness and thus gain new strength. Higher well-being helps individuals experience positive emotions through effective communication with others and better evaluate events in their lives.

9) Friendly

<Files\\INTERVIEW\\Patient Annisa>

Reference 1 - 2.51% Coverage

"The midwife is friendly, so we don't hesitate to ask."

According to the Big Indonesian Dictionary, Friendly is good-natured and attractive in language, sweet in speech and demeanor, likes to get along, and is fun in association (KBBI, 2021).

Sociability is a behavior and attitude of people familiar in association and likes to smile, polite and respectful in communicating, light-handed, likes to greet, wants to help selflessly and so on which is done with sincerity and has a good attitude towards other people who are already known. And those who are not yet known (Setiadi, 2017).

10) Calm down

<Files\\INTERVIEW\\Midwife Ria>

Reference 1 - 5.13% Coverage

"And teach stomach breathing so that it is more connected, makes mother calm."

The environment is one crucial factor that tends ignored. The climate in the labor process Setting the delivery environment to increase the tranquility and satisfaction of childbirth can significantly affect calm, comfort, anxiety, fear, smooth delivery, and patient satisfaction. The atmosphere in question is something that is around the mother giving birth. The current climate looks straightforward. In this room, the patient's psychological factors and comfort factors can say to ignored. The space is only intended to support the physical function of healing, even though the area's role will not optimally support the healing process (Sari, 2013 in Meiranny, 2018).

11) Be patient

<Files\\OBSERVATION\\Testimony of patient Siti Lutfiah az-Zahra clinic

Reference 1 - 5.27% Coverage

"The midwife was very patient and painstaking in helping me give birth."

Patience is an attitude and emotion of resisting desire and surviving in difficult situations by not complaining. Patience is the ability to control oneself, which is seen as an attitude with high values and reflects the strength of the soul of the person who has it. The higher the patience a person has, the stronger he will be in dealing with all kinds of problems that occur in life. Patience is also often associated with positive behavior highlighted by an individual or someone (Nida, 2021)

12) Sustainability

<Files\\OBSERVATION\\Testimony of patient Siti Lutfiah az-Zahra clinic

Reference 1 - 5.4% Coverage

"Everything is here, complete from pregnancy to postpartum care."

Continuity of care in Midwifery is a series of continuous and comprehensive service activities starting from pregnancy, childbirth, postpartum, newborn care, and family planning services that connect the health needs of women in particular and each individual's circumstances (Homer et al., 2014).

The continuity of care model philosophy emphasizes natural conditions, namely helping women give birth with minimal intervention and monitoring women and their families' physical, psychological, spiritual, and social health (McLachlan et al., 2012).

13) Childbirth Assistant

<Files\\OBSERVATION\\Testimonies of patients Anisa az-Zahra clinic

Reference 1 - 1.4% Coverage

"husband may accompany the birth."

Research Cheung et al. (2011) found that the 'two-to-one approach to care developed partly from MNBU midwives' original uncertainty about their role relative to birth attendants. This uncertainty is attributed to the novelty of the concept of birth attendants in China. For some midwives, this uncertainty led to the assumption that she would be redundant or, at least, overdone. When midwives realized their assumptions were wrong, they quickly learned to encourage birth attendants to assume an essentially active role, and midwives stopped providing all 'direct' care to women in labor. On the other hand, the midwife's role has become increasingly educating and supporting women and birth attendants.

14) Availability

<Files\OBSERVATION\Testimonies of patients Anisa az-Zahra clinic

Reference 1 - 1.64% Coverage

"Everything is here, complete from pregnancy to postpartum care."

Availability of health services (available) is a condition that becomes a benchmark for quality health services. Health services must show their existence through physical evidence such as physical facilities, equipment and equipment used, and their officers' appearance (Azwar, 1996).

The availability of health care facilities is a factor that allows individuals to take advantage of health services (Kehusmaa et al., 2012; Dahl et al., 2015).

15) Appreciate

<Files\INTERVIEW\Beautiful Patients>

Reference 1 - 6.49% Coverage

"Services while respecting what the patient wants. For example, by following your instincts when you push."

Respecting the patient's independence/autonomy, not intervening but helping the patient when asked or needed according to the information provided, the midwife explores the patient's wishes either subjectively or the results of rational thinking (Tajmiati, Astuti, and Suryani, 2016)

A midwife also behaves professionally by respecting local culture related to health practices, pregnancy, birth, postpartum, newborns, and children. (Tajmiati, Astuti and Suryani, 2016)

16) Complete Facilities

<Files\OBSERVATION\Testimony of patient Nurul Khoirunnisa az-Zahra clinic>

Reference 1 - 5.87% Coverage

"Post-birth care is also complete."

Facilities are physical resources that must exist before a service can be offered to consumers. Facilities are everything that makes it easy for consumers to meet various needs regarding the service offering. In a business engaged in services, all existing facilities, namely the condition of the facilities, completeness, interior, exterior design, and the cleanliness of the facilities, must be considered, especially those closely related to what consumers feel or get directly (Tjiptono, 2005).

17) Low Cost

<Files\OBSERVATION\Testimony of patient Nurul Khoirunnisa az-Zahra clinic>

Reference 1 - 5.87% Coverage

"Affordable cost does not burden the patient."

Economical or cheap in the sense that the imposition of fees or service tariffs must be determined reasonably by taking into account: the value of goods and services, the ability of the community to pay, and applicable laws and regulations (Barrimi et al., 2013)

18) Leadership

<Files\\OBSERVATION\\Testimony of patient Nurul Khoirunnisa az-Zahra clinic>

Reference 1 - 2.47% Coverage

"The midwife directs us what to do."

According to the Big Indonesian Dictionary (KBBI (2019), the meaning of the word leadership is about leaders and how to lead. Leadership comes from the word lead, which means to direct, foster or regulate, guide, and show or influence. Leaders have physical and spiritual responsibilities on the success of the work activities of those who led.

According to (Yamin and Maisah, 2012), leadership is an influencing process that manages group members to achieve organizational goa

IV. CONCLUSION

Midwifery services are carried out based on the expectations and needs of clients, namely indicators of Competent, Comfortable, Motivational, Compassionate, Clean, Communication, Knowledge, Pray, Friendly, Calm, Patient, Sustainable, Childbirth Assistance, Availability, Respect, Complete Facilities, Low Cost, Leadership, can reduce cesarean delivery in primary health services Az-Zahra. Therefore, it is expected that all health services could provide comprehensive services according to client needs.

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