

## Knowledge Analysis with *Coitus* behavior In Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency

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### ABSTRACT

Until now, sexual issues are still considered taboo. But sex is a need. If one need is not met, it will cause psychological disorders for both the pregnant woman and her partner. Or it can even cause a breakdown in household relationships. The purpose of this research is to find out the relationship between knowledge and *Coitus* behavior In Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency. The design of this research is a correlational research approach cross *sectional*. Respondents are recruited using techniques *Purposive Sampling* who meet the inclusion and exclusion criteria. The population studied was all pregnant women in the first trimester with a sample of 30 mothers. The Independent Variable studied is Knowledge and the Dependent Variable is *Coitus* behavior In First Trimester Pregnant Women. The results were analyzed using statistical tests *Spearman Rank*. The research results showed that knowledge of pregnant women in the first trimester was known to almost all respondents in the Good category, 23 (77%) respondents. Behavior *Coitus* For pregnant women in the first trimester, it was found that the majority of respondents were in the mild category, 19 (63%) respondents. The results of data analysis show that the significance level is  $0.000 < \alpha = 0.05$  so that  $H_0$  is rejected and  $H_1$  is accepted thus there is a Relationship between Knowledge and Behavior *Coitus* In Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency. Based on the research results, it is hoped that mothers should actively seek information about the dangers of having sexual intercourse during pregnancy and be able to find out the risks to the development of the fetus in the womb if the frequency of intercourse is irregular and even if the position of intercourse is uncomfortable.

**Keywords:** Behavior, *Coitus*, Knowledge, Pregnant Women

### INTRODUCTION

Until now, sexual issues are still considered taboo. But sex is a need. If one need is not met, it will cause psychological disorders for both the pregnant woman and her partner. Or it can even cause a breakdown in household relationships. Psychological disorders in pregnant women will cause problems with the growth and development of the fetus. A problem that often occurs in the first trimester is that pregnant women's sexual desire generally decreases due to experiencing morning *sickness*, vomiting, nausea and fatigue, which will affect their enthusiasm, desire and libido for sexual intercourse (Bobak, 2012).

Many married couples are afraid to have sexual relations when their wife is pregnant. Myths circulating in society regarding sexual relations during pregnancy and the wife's discomfort make married couples reluctant or even afraid to have sexual relations. Sarwono (2012), explains that pregnancy is not an obstacle to sexual intercourse and is not dangerous,

does not cause miscarriage or premature birth if carried out safely from the time the fetus is formed until the moment of delivery, as long as the pregnancy proceeds normally. In marriage, sexuality has four dimensions. Important are the dimensions of procreation, recreation, relationships and institutions. Some couples stated that they were satisfied with their sexual relations during pregnancy, while other couples stated the opposite. Sexual behavior that continues to be carried out with a partner during pregnancy includes a form of attention, love and affection from a husband towards his pregnant wife to prove that pregnant women are still important and appreciated. These different feelings are influenced by physical factors, emotions, interactions, superstitions about sex during pregnancy, sexual dysfunction problems, and physical changes in women. Changes in body shape, body image, and discomfort influence partners' desire to express their sexuality (Bobak, 2012).

There are 2 factors that influence sexual relations during pregnancy, namely medical and non-medical factors. According to medical factors, during pregnancy it is normal that there are no obstacles to sexual intercourse. Sexual relations are prohibited or postponed if there is a history of miscarriage, a history of premature birth, bleeding during sexual intercourse, rupture of amniotic fluid, and there are infectious diseases in both husband and wife. Meanwhile, one of the non-medical factors is the mother's knowledge. Good maternal knowledge will influence the process of conveying opinions or complaints and receiving advice from health workers. The better the mother's knowledge, the easier it will be for health workers to provide advice. In this case, the higher the mother's education, the more knowledge she will gain about sexual behavior during pregnancy (Notoatmodjo, 2012).

Knowledge (*knowledge*) is the result of knowledge from humans, which simply answers the question "*what*", for example what is water, what is human, what is nature, and so on (Notoatmodjo, 2017). Knowledge is the result of knowing, and this occurs after people sense a particular object. This sensing occurs through the five human senses, namely sight, hearing, smell, taste and touch (Azwar, 2016).

Behavior from a biological perspective is an activity or activities of the organism concerned. So human behavior is essentially an activity of humans themselves (Notoatmodjo, 2017). Ardana (2017), defines behavior Humans are all activities carried out by humans, whether seen indirectly or directly by outside parties.

Therefore, efforts that can be made to overcome this problem are openness between pregnant women and their husbands. Good communication and mutual understanding will really help to resolve this problem. Married couples can communicate when is the right time to have sexual relations by considering the mother's physical condition and pregnancy. Apart from that, communication with health workers regarding the condition of the mother's pregnancy is also very important. This is intended so that husband and wife know the current condition of the mother's pregnancy. Is the condition of the pregnancy good and normal or does it require supervision from health workers so that there are no obstacles to having sexual relations at any time? The aim of this research is to determine "The Relationship between Knowledge and *Coitus* behavior "In Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency."

## METHOD

This research is a quantitative type of research with *cross sectional research* that aims to determine the relationship between two or more variables by collecting data only once from each research variable. The population is 30 respondents, namely all pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency. The sampling technique uses techniques *Purposive Sampling*. For questionnaire results using tests *Chi Square To* determine the relationship between independent and dependent variables with a confidence level of  $\alpha = 0.05$ . If  $p \leq \alpha$ , it means  $H_0$  rejected and  $H_1$  accepted, which means there

is a relationship between knowledge and coitus behavior in pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency and if  $p > \alpha$ , it means  $H_0$  accepted and  $H_1$  rejected, which means there is no relationship between knowledge and coitus behavior in first trimester pregnant women at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency.

## RESULT

Data (knowledge and behavior) of pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri City (*Dates 05-19 March 2020*)

No	Knowledge	Frequency	Percentage (%)
1	Less	2	6
2	Enough	5	17
3	Good	23	77
	<b>Amount</b>	<b>30</b>	<b>100</b>
No	Coitus Behavior	Frequency	Percentage (%)
1	Light	19	63
2	Currently	9	30
3	Heavy	2	7
	<b>Amount</b>	<b>30</b>	<b>100</b>

Based on the table above, Knowledge of Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri City, it is known that almost all respondents in the Good category are 23 (77%) respondents. Coitus Behavior in Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri City, it is known that the majority of respondents in the Mild category were 19 (63%) respondents

Based on the results of data analysis, it shows that the level of significance  $0,000 < \alpha = 0.05$  so  $H_0$  is rejected and  $H_1$  is accepted thus there is a relationship between knowledge and behavior *Coitus* In Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency.

## DISCUSSION

Based on the research results, it is known that the Knowledge of Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri City, it is known that almost all respondents are in the Good category, namely 23 (77%) respondents. This shows that pregnant women know about forms of sexual behavior such as hugging, kissing, masturbation/masturbation. This is supported by the statement of one pregnant woman that this form of sexual behavior was obtained from internet media, which is an act done to express love to a partner. The results of this research are different from Fitiri's research (2018), in her research journal, it shows that pregnant women's knowledge about sexual relations during pregnancy in this study was still not good, as shown by the data that 43 (52.4%) respondents had insufficient knowledge. Good and bad knowledge is influenced by several factors including education level, age, information, experience, economic status and socio-culture. Pregnant women's knowledge about sexuality during pregnancy is still lacking due to the little information they get about sexual relations during pregnancy and sometimes pregnant women hear wrong information from other people. Pregnant women also rarely ask health workers about sexual problems and do not seek knowledge such as from books, magazines, television or the internet.

Based on the research results, it is known that the age of pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it is known that the majority of respondents are  $> 35$  years old, namely 20 (67%) respondents. This shows that the age of pregnant women is closely related to knowledge about the benefits or importance of

maternal and baby health, where the older a person is, the better their level of maturity and strength will be in thinking and determining health attitudes and behavior, especially knowledge about coitus behavior. Education of Pregnant Women in the First Trimester At BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it is known that the majority of respondents had a high school education level, namely 18 (60%) respondents. This shows that education is an experience that, with that experience, a person or group of people can understand something that they did not previously understand. This experience occurs because there is interaction between a person or group and their environment. This interaction causes a process of change (learning) in humans and then the process of change results in development (development) for the life of a person or group in their environment.. Work of Pregnant Women in the First Trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it is known that almost half of the respondents work as private employees, namely 12 (40%) respondents. This shows that work is the main activity carried out by humans. In this case, the pregnant woman's job is as a private employee, where her monthly income is able to meet the family's needs, especially the nutritional needs of the mother and fetus in the womb.

Based on the research results, it is known that coitus behavior among pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it is known that the majority of respondents in the Mild category are 19 (63%) respondents. This is supported by the statement of one respondent that sexual behavior is always carried out carefully by husband and wife, engaging in sexual intercourse for a declaration of love to a couple. One of the pregnant women said that always forbids my husband have intercourse during pregnancy. Nindia (2015), in her research journal, shows that the majority of respondents had adequate perceptions of (80.0%) and the majority of respondents had fairly good sexual behavior during the first trimester of pregnancy, namely (66.7%). Statistical analysis shows a significant relationship between sexual perception and sexual behavior in first trimester pregnant women with a significance value of  $p\ 0.043 < 0.05$  with low correlation ( $r = 0.367$ ). Yuni Purwati (2015), in her research also showed that the behavior (knowledge, attitudes and practices) of fulfilling the sexual needs of partners with pregnant women at the Kasihan II Bantul Community Health Center, after being given sexual education was significantly better than before being given sexual education. This change did not occur in the control group, so the behavior (knowledge, attitudes and practices) in fulfilling the sexual needs of the intervention group was significantly better than the control group.

The results of data analysis show that the level of significance  $0,000 < \alpha = 0.05$  so  $H_0$  is rejected and  $H_1$  is accepted thus There is a relationship between knowledge and coitus behavior in first trimester pregnant women at BPM Rosa Siskawati, Plosoklaten District, Kediri City. Cross tabulation results between Knowledge and Coitus Behavior in First Trimester Pregnant Women at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency It is known that 19 respondents with Good knowledge were in the Light category. The researcher did not test the validity and reliability of the data because the source of the questionnaire used was taken from previous research.

During pregnancy, women usually experience changes including effects on their sexuality and sexual activity. Apart from that, there was also a significant decrease in the frequency of sexual intercourse, sexual desire, intimacy, orgasm, and sexual satisfaction during pregnancy compared to before pregnancy. Sexual expression during pregnancy is individual. These different feelings are influenced by physical, emotional and interactive factors, including myths about sex during pregnancy, sexual dysfunction problems and physical changes during pregnancy. Sexual intercourse during pregnancy increases because many men think pregnant women look different than before, besides that an increasingly enlarged body indicates an increased sexual drive. Hormonal changes that occur in pregnant women cause blood flow to the genital area to also increase, causing increased sexual desire. When pregnant, it usually

takes longer to reach orgasm, but orgasm lasts longer and there are some pregnant women who experience their first orgasm during pregnancy.. During pregnancy, sexual relations between husband and wife have no standard limits regarding frequency. The frequency of sexual intercourse should not be as frequent as usual during the first three months of pregnancy. Forced sexual intercourse during the three months of pregnancy is feared to result in spontaneous miscarriage (Bobak, 2017). Therefore, sexual relations must be carried out carefully, considering that the fetus is still vulnerable to miscarriage due to shock. Sexual intercourse is not prohibited in pregnancy, except 6 weeks before and 6 weeks after delivery. Gravidas with a history of infertility or habitual and primitudinal abortion should be advised not to have sexual relations during early pregnancy.

## CONCLUSION

The research results show that the knowledge of pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it is known that almost all respondents are in the Good category, namely 23 (77%) respondents. *Coitus* behavior For pregnant women in the first trimester at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency, it was discovered that the majority of respondents in the Mild category were 19 (63%) respondents. The results of data analysis show that the level of significance  $0,000 < \alpha = 0.05$  so  $H_0$  is rejected and  $H_1$  is accepted thus there is a relationship between knowledge and coitus behavior in first trimester pregnant women at BPM Rosa Siskawati, Plosoklaten District, Kediri Regency. Therefore, it is hoped that mothers must actively seek information about the dangers of sexual intercourse during pregnancy and be able to find out the risks to the development of the fetus in the womb if the frequency of sexual intercourse is irregular and even if the sexual position is uncomfortable.

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