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The Role Of Husbands And Midwives' Motivation For Compliance With Providing Informed Consent In Cito Sc Actions At Merauke Regional Hospital

Hermin Langdo Layuk, Reny Yuli Astutik, Eri Puji Kumalasari, Devy Putri Nursanti

Institut Ilmu Kesehatan STRADA Indonesia

*Corresponding author: herminlangdo7@gmail.com

ABSTRACT

Informed consent is a critical aspect of medical practice, including emergency caesarean section (SC) or Cito. Compliance with informed consent becomes more complex because it involves quick decisions in emergency situations, Informed consent compliance with Cito SC actions can be influenced by the husband's role and midwife's motivation. This study aims to determine the influence of the role of husbands and midwives' motivation on compliance with the provision of informed consent in cito SC actions at Merauke Regional Hospital. This study used an Observational Analytics research design with a cross sectional approach. Sampling was carried out using the total sampling technique and a sample of 15 respondents was obtained, The independent variable consists of the role of the husband and the motivation of the midwife then the dependent variable used is the adherence of giving informed consent. The Chi-Square test is used to determine the relationship between two categorical variables. The results of the study of 15 respondents were obtained, most respondents had supporting husband role criteria, namely as many as 8 respondents (53.3%), Most respondents received poor midwife motivation which was as many as 8 respondents (53.3%) and most respondents included the criteria for compliance with informed concent on Cito SC Actions. The results of the analysis using the Chi-Square statistical test obtained the results of p = 0.005 and 0.019 <0.05, then H0 was rejected and H1 was accepted, which means that there is an influence on the role of the husband and the motivation of midwives on Compliance with Giving Informed Consent to Pregnant Women Who Perform Cito SC Actions at Merauke Regional Hospital. The role of the husband and the motivation of midwives play a very significant role in shaping the compliance of informed consent to pregnant women. Collaboration between patients, husbands, medical teams is the main key.

Keywords: Informed Consent, Husband's Role, Midwife's Motivation

INTRODUCTION

An excellent distribution of education and welfare has made people aware of the importance of guaranteeing legal protection, which applies in all fields, including health services. To prevent malpractice from occurring which could harm patients and professional practitioners themselves, the ability to understand legal instruments containing rules or procedures that apply in the health sector is very necessary. Of course, this can be achieved if there are resources and supporting health service facilities.

Hospitals as a complex health service facility are required to provide quality services. A quality service is provided to the community to provide satisfaction to the community, especially regarding the protection of patient rights and obligations. Legal awareness among

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the public has now increased, this has resulted in patient demands for better health services, and there are even frequent complaints against the authorities, making hospitals have to follow the rules of good health administration. The main source of health administration activities in hospitals starts from medical record files. These records are used as the initial basis for evidence in court and are a valid defense tool if various lawsuits arise.

In essence, informed consent is a permission or statement of agreement from the patient that is given freely, consciously and rationally after obtaining complete, valid and accurate information that is understood from the doctor's explanation about the condition of the disease and the medical treatment that will be obtained. The form and content of informed consent must comply with the rules contained in Minister of Health Regulation No. 290 of 2008 concerning approval for medical procedures, both in terms of legitimacy and the information contained in the informed consent form. Apart from that, the contents of the informed consent must be understandable and understandable by the patient as the recipient of health services.

Informed consent is a process that shows effective communication between the doctor and the patient, and a meeting of thoughts about what will and what will not be done to the patient. Informed consent is seen from a legal aspect not as an agreement between two parties, but rather as a unilateral agreement on the services offered by another party. Or Informed Consent is approval for medical action given by the patient or their immediate family after receiving a complete explanation regarding the medical action that will be carried out on the patient.

Approval for medical treatment (informed consent) is approval given by the patient or closest family after receiving a complete explanation regarding the medical action that will be carried out on the patient. To agree to an action taken by a health worker, the patient must be given an explanation first about matters relating to the planned service, because a decision of consent is required. Viewed from the position of the parties, informed consent is a subjective requirement for a therapeutic transaction to occur which relies on two types of human rights which are the basic rights of every human being, namely the human right to information and the human right to self-determination.

The purpose of Informed Consent is to provide protection to patients and provide legal protection to doctors against failure and negative nature. At the Merauke Regional General Hospital, informed consent forms have been given to all patients who will carry out procedures that have a risk of affecting the patient's health, especially for Sectio caesarea operations.

The caesarean section rate continues to increase from an incidence of 3 to 4% fifteen years ago, to an incidence of 10 to 15% today. The high incidence of caesarean section from year to year in several hospitals throughout Indonesia prompted the Executive Board of the Indonesian Doctors Association together with the Government (Ministry of Health and Department of Social Welfare) to issue a Circular Letter from the Directorate General of Medical Services (Dirjen Yanmed) of the Indonesian Ministry of Health stating that the number Caesarean section for referral hospitals is 20% and private hospitals 15% (Oxorn & Forte, 2003).

The large number of prospective mothers who ask for a caesarean section without medical recommendation is thought to be due to a lack of information about it. In fact, the risks of surgery are many and serious, so they are much more dangerous than normal delivery. And it's not just the mother who has to bear the risk, but also the baby. WHO itself says that caesarean section should only be used to handle 10-15% of births (Maulana, 2008).

Based on a preliminary study conducted on October 11 2010, cases of mothers giving birth by caesarean section were 40% of the 120 births, with the highest indication (30%) being DKP (Head of Pelvic Disproportion) and the most frequent complication being the potential for infection (20%).

After the author conducted an initial survey, the author found that out of ten 10 SC surgery case documents, there were 2 incomplete informed consent forms. There are several columns that have not been filled in, such as the name and signature of the doctor, the address of the patient/person in charge and the time to fill in. This is important because the informed consent form contains the patient's identity and proof of consent. If the informed consent form is not filled out completely then the form cannot be used as a defense tool if needed at a later date.

Caesarean section operations at the Merauke Regional General Hospital tend to increase, this can be seen from the number of patients in 2021 of 1,253 patients and an increase in 2022 of 1,585 so it can be seen that the number of patients has increased by 332 patients. The practice of implementing informed consent in the field still experiences various problems. Such as the problem of completing the medical treatment consent form (informed consent). This is especially true in the case of midwifery health workers because midwives are required to be able to provide professional health services. On the one hand, midwives often work in remote areas with minimal facilities. This causes midwives to accidentally make decisions without implementing informed consent, especially during the birthing process. Based on this problem, the author is interested in researching the extent of compliance in providing informed consent, which is stated in the research entitled "The Role of Husbands and Midwives' Motivation in Compliance with Giving Informed Consent in the Cito SC Procedure at Merauke District Hospital".

METHODS

This research uses an observational analytical research design with a cross sectional approach. With the total sampling technique, a sample of 15 respondents was obtained, the independent variable was the role of the husband and the midwife's motivation using a questionnaire and the dependent variable and the dependent variable were Informed Consent using a questionnaire. The Chi-Square statistical test was used to determine the relationship between the two variables. Analysis using the Chi-Square statistical test resulted in p=0.005 and 0.019 < 0.05, so H0 was rejected and H1 was accepted, which means there is a relationship between the role of the husband and the midwife's motivation on compliance with giving informed consent to pregnant women who carry out the Cito SC procedure at the Merauke District Hospital.

RESULT

Table.1 Distribution of Respondent Characteristics and Variables

Result of research	Frequency (f)	Precentage (%)
Age		
19 – 24 Years	8	53,3
25 – 29 Years	6	40,0
30 – 34 Years	1	6,7
Level of educations		
Elementary School	1	6,7
Junior High School	4	26,7
Senior High School	5	33,3
Occupation	5	33,3
Civil workers	2	13,3
Private staff	2	13,3
Housewife	8	53,3
Others	3	20,0
Husband Role		
Lack of Support	7	46,7
Full of Support	8	53,3
Midwife motivation		
Poor	8	53,3
Good	7	46,7
Compliance		•
Poor	7	46,7
Good	8	53,3
Total	15	100

Source: Research Questionnaire, 31st December 2023

Tabel. 2 Cross Tabulation between Variable

				Compliance		Total
				Poor	Good	
Role	of	Lack of Support	F	6	1	7
Husband			%	40,0%	6,7%	46,7%
		Full of Support	F	1	7	8
			%	6,7%	46,7%	53,3%
Total			F	7	8	15
			%	46,7%	53,3%	100%
Midwives'		Poor	F	6	2	8
Motivation			%	40,0%	13,3%	53,3%
		Good	F	1	6	7
			%	6,7%	40,0%	46,7%
Total			F	7	8	15
			%	46,7%	53,3%	100,0%

Source: Research Questionnaire of Hermin Langdo Layuk, 31st December 2023

Based on table 4.16 above, it is known that 7 respondents (46.7%) obtained the supportive Husband's Role Criteria, while 6 respondents (40.0%) obtained the obedient criteria for good midwife motivation criteria.

Analysis of Research Statistical Test Results

Symmetric Measures			
		Value	Approximate
			Significance
Nominal by Nominal	Contingency Coefficient	.591	.005
N of Valid Cases		15	

The results of the research analysis regarding the Influence of the Husband's Role on Compliance with Giving Informed Consent to Pregnant Women Who Undergo the Cito SC Procedure at the Merauke District Hospital based on statistical tests using the Chi-Square test showed that p=0.005<0.05, so H0 was rejected and H1 was accepted, which means there is an influence The role of husbands in compliance with providing informed consent to pregnant women who carry out the Cito SC procedure at Merauke District Hospital. With a correlation coefficient value of 0.591, which means that the level of relationship between the husband's role and Compliance with Giving Informed Consent to Pregnant Women Carrying Out Cito SC Procedures at Merauke District Hospital is in the medium relationship category, where the correlation value range is between 0.400-0.599, which is included in the medium relationship category (Sugiyono, 2010).

Symmetric Measures			
		Value	Approximate
			Significance
Nominal by Nominal	Contingency Coefficient	.519	.019
N of Valid Cases		15	

The results of research analysis on the influence of midwife motivation on compliance with giving informed consent to pregnant women who carry out the Cito SC procedure at Merauke District Hospital based on statistical tests using the Chi-Square test showed that p=0.019<0.05, so H0 was rejected and H1 was accepted, which means there is an influence Midwives' Motivation for Compliance in Providing Informed Consent to Pregnant Women Who Undergo Cito SC Procedures at Merauke District Hospital. With a correlation coefficient value of 0.519, which means that the level of relationship between the midwife's motivation and Compliance with Giving Informed Consent to Pregnant Women Carrying Out the Cito SC Procedure at Merauke District Hospital is in the medium relationship category, where the correlation value range is between 0.400-0.599, which is included in the medium relationship category (Sugiyono, 2010).

DISCUSSION

Identifying the role of husband

Role is defined as the behavior that is expected to be possessed by individuals who have a position in society. According to the Big Indonesian Dictionary, a husband is a man who officially becomes a woman's life partner (wife) after marriage. The husband functions as the wife's life partner and as the head of the family, bears major responsibilities in the family and has an important role, not only as a breadwinner, but also as a motivator in various family policies, including family planning. Thus, the role of husband includes the behavior of a married man, both in the context of family and society.

The husband's role and responsibility as a motivator is crucial, especially in providing informed consent. The husband's decision plays an important role in giving permission for a caesarean section. Without the husband's approval or support, this action cannot be carried out.

Husband's support has a big impact on the decision-making process, whether to approve or reject a medical procedure.

The husband's role as a motivator is a form of encouragement or support given to the wife to take action. This support can include giving permission or making decisions that support the wife's actions, providing needs when faced with an action, and being willing to accompany and provide understanding if the wife feels unsure about making a decision. As a motivator, the husband has an important role in creating motivation for the wife to carry out an action.

From the results of the analysis in Table 4.4 above, it can be seen that of the total number of respondents totaling 15 pregnant women who carried out the Cito SC procedure at the Merauke District Hospital, the largest number who received support from their husbands were 8 respondents (53.3%), while the remaining 7 Respondents were in the category who received less support from their husbands (46.7%).

Respondents aged 19-24 years and 25-29 years were the respondents who received the most support from their husbands, namely 4 respondents each (26.7%). Meanwhile, respondents aged 30-34 years were the respondents who received the least support from their husbands, namely only 1 respondent (6.7%). Respondents based on education who received the most support from their husbands for pregnant women who carried out the Cito SC procedure at the Merauke District Hospital were high school/equivalent, namely 4 respondents (26.7%). Respondents based on the type of work who received the most support from their husbands for pregnant women who carried out the Cito SC procedure at the Merauke District Hospital were housewives with 5 respondents (33.3%). Meanwhile, based on the type of work, the fewest who received less support from their husbands among pregnant women who carried out the Cito SC procedure at the Merauke Hospital were civil servants and others, namely only 1 respondent each (6.7%). Respondents to the Husband's supportive role criteria were obtained by 7 respondents (46.7%), while 6 respondents (40.0%) were obtained by respondents to the criteria for motivation of a good midwife. In the context of decision making, the husband's role as a motivator is also related to providing support in agreeing to an action. This support is needed because the husband's decision is often an important guideline for the wife, especially in Indonesia. Husband's support has a big impact on the decision-making process or informed consent in surgery, as stated by Suhita (2005).

Identifying of Midwives' Role

Midwives' motivation is very important in carrying out their duties in the world of health. Midwives have a big responsibility in supporting the health of mothers and babies from pregnancy to delivery. Their motivation is driven by the desire to provide the best service and ensure the birth goes smoothly, so that mother and baby can have a healthy start in life. Apart from that, midwives' motivation also comes from a sense of compassion and empathy for patients. They understand that pregnancy and birth are historic moments in every family's life, and the presence of a caring midwife can provide much-needed emotional support. This motivation encourages midwives to always prioritize humanitarian aspects in their practice.

The results of the analysis presented in table 4.5 above show that of the total of 15 pregnant women who underwent the Cito SC procedure at Merauke District Hospital, 8 respondents (53.3%) felt that the midwife's motivation was in the poor category, whereas Another 7 respondents (46.7%) felt that the midwife's motivation was in the good category. The highest frequency was respondents aged 19-24 years who received poor midwife motivation, namely 5 respondents (33.3%). Then respondents aged 25-29 years received motivation from midwives who were included in the good category, there were 4 respondents (26.7%). Most of the motivation of midwives who were classified as good were those with a high school/equivalent educational background, with the number of respondents being 3 people

or around 20.0%. Then, the most motivation for midwives in the good category were respondents with household work, namely 5 respondents (33.3%).

Furthermore, midwives' motivation also arises from a sense of responsibility towards health education. They act as educational agents to provide information to expectant mothers regarding prenatal care, childbirth preparation, and baby care. This motivation encourages them to continue learning and developing knowledge in order to provide accurate and useful education. Midwives' motivation is also related to the desire to contribute to efforts to prevent and treat pregnancy complications. They realize the importance of early detection and rapid treatment of maternal and infant health problems. This motivation encourages them to always be alert and proactive in detecting signs of danger. Midwives' motivation also arises from the desire to overcome challenges and obstacles that may be encountered during the birthing process. They have the skills and knowledge to deal with emergency situations, as well as the motivation to remain calm and focused in overcoming any difficult situations.

Midwives understand that the world of health continues to develop, and this motivation encourages them to follow the latest scientific and technological developments in the field of reproductive health. They realize that their role is very important in maintaining public health, and this motivation makes them feel like they have a big responsibility that must be carried out with full dedication. Midwives' motivation is also related to the desire to have a positive impact on future generations.

Identification of Compliance in Providing Informed Consent

Informed consent, or consent based on the information provided, is a critical aspect in medical practice, including emergency caesarean section (SC) or Cito. In pregnant women, compliance with informed consent becomes more complex because it involves quick decisions in emergency situations.

The results of the analysis presented in table 4.6 above show that of the total number of respondents totaling 15 pregnant women who underwent the Cito SC procedure at the Merauke Regional Hospital, 8 respondents (53.3%) of them fell into the category of complying with informed consent for the Cito SC procedure at the Regional Hospital. Merauke, while 7 (46.7%) other respondents were in the category of less compliant with informed consent in the CITO SC procedure at Merauke District Hospital.

Respondents aged 19-24 years were respondents who complied with giving informed consent to pregnant women who underwent Cito SC at Merauke District Hospital, namely there were 5 respondents (33.3%). Meanwhile, respondents aged 30-34 years were the respondents who were least compliant with giving Informed Consent to Pregnant Women who underwent Cito SC at the Merauke District Hospital, namely only 1 respondent (6.7%). Respondents who had a high school/equivalent educational background were the respondents who complied the most with giving informed consent to pregnant women who underwent Cito SC procedures at the Merauke District Hospital, namely 3 respondents (20.0%). Meanwhile, respondents with junior high school/equivalent and high school/equivalent educational backgrounds were the respondents who were the least compliant with giving informed consent to pregnant women who underwent Cito SC at the Merauke District Hospital, namely only 2 respondents each (13.3%). Respondents who have a work background as housewives are the respondents who comply the most with giving informed consent to pregnant women who carry out the Cito SC procedure at the Merauke District Hospital, namely 5 respondents (33.3%). Meanwhile, respondents with private and other work backgrounds were the respondents who were least compliant with giving Informed Consent to Pregnant Women who underwent Cito SC procedures at the Merauke District Hospital, namely only 2 respondents each (13.3%).

It should be understood that compliance with ethical and legal principles is essential in providing informed consent. The decision to take Cito SC action must be based on clear and comprehensive information.

CONCLUSION

- 1. Based on table 4.4, it can be seen that of the total number of respondents totaling 15 pregnant women who carried out the Cito SC procedure at the Merauke District Hospital, those who received support from their husbands were the largest number, namely 8 respondents (53.3%), while the remaining 7 respondents included category that lacks husband support (46.7%).
- 2. Based on table 4.5, it can be seen that of the total number of respondents totaling 15 pregnant women who carried out the Cito SC procedure at the Merauke District Hospital, 8 respondents (53.3%) felt that the midwife's motivation was in the poor category, while 7 (46, Another 7%) of respondents felt that the motivation provided by midwives was in the good category.
- 3. Based on table 4.6, it can be seen that of the total number of respondents totaling 15 pregnant women who underwent the Cito SC procedure at the Merauke Regional Hospital, 8 respondents (53.3%) of them fell into the category of complying with informed consent for the Cito SC procedure at the Merauke Regional Hospital, while 7 (46.7%) other respondents were in the category of less compliant with informed consent for the CITO SC procedure at Merauke District Hospital.
- 4. Based on the results of the Chi-square test, p-values were obtained of 0.005 and 0.019, so the role of the husband and the midwife's motivation influence the compliance with giving informed consent to pregnant women who carry out the Cito SC procedure at the Merauke District Hospital. The relationship between each of these variables is included in the moderate relationship category because the correlation coefficient values obtained are 0.591 and 0.519 which are in the interval 0.400-0.599.

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