

IMPROVING MIDWIFE'S CAPACITY TO PROVIDE PREGNANCY AND EARLY POSTPARTUM EXERCISE

Ni Nyoman Sri Artina Dewi ¹, Lorensia Panselina Widowati ^{2*},
Baharika Suci Dwi Aningsih ³, Dewi Novitasari Suhaid ⁴,
Eviyani Margaretha Manungkalit ⁵, Dyah Woro Kartiko Kusumo Wardani ⁶,
Yetty Leoni Irawan ⁷, Agustina Ida ⁸

Sekolah Tinggi Ilmu Kesehatan Sint Carolus, Jakarta

¹ komangartina@gmail.com, ^{2*} lorensiapw@gmail.com, ³ baharika.suci@gmail.com,
⁴ dewinovitasarisuhaid@gmail.com, ⁵ evikalit@gmail.com, ⁶ dyahworo0@gmail.com,
⁷ yettyirawan@gmail.com, ⁸ agustinap56@gmail.com

Abstract

Low back pain is frequently reported by pregnant women. It is caused by the shifts of center of balance as the mother's weight increases and uterus expands. The inability to adjust to these changes, muscle and ligament weakness can make it more prone to pain. Midwives as a frontliner in maternal health, is supposed to be able to apply health promotion to encourage exercise for expectant mothers and new mothers in the early postpartum period. One of them is by giving women and new mothers pregnancy and early postpartum exercise. The purpose of this act of community service was to enable midwives to accompany more women during pregnancy and the first few weeks after giving birth. The method proposed is to provide information on ethics, planning, direction, and evaluation of pregnancy and early postpartum exercise, provide information on anti-corruption, and manage the process of operating this training activity from beginning to end. There were 24 participants in the course, all of them currently employed as midwives for the Siloam Hospital Group. The course was considered successful after receiving an improving score of all participants.

Keywords: Early Postpartum Exercise, Low Back Pain, Midwives, Pregnancy Exercise.

INTRODUCTION

Women prepare for motherhood during their pregnancies. Mothers frequently experience numerous physical and psychological symptoms during pregnancy. Constipation, back pain, varicose veins, dyspnea, insomnia, gingivitis and epulsion, frequent urination, pressure and discomfort in the perineum, and weakness are among the common discomforts, especially in the second and third trimesters. Furthermore, leg cramps, non-pitting edema in the ankles, mood swings, and increased anxiety are frequently occur during pregnancy (Bobak et al., 2005). The center of balance shifts as the mother's weight increases and her uterus expands, and the mother must adjust. As a result of inability to adjust to increasing body weight, muscle and ligament weakness can make more prone to pain (Romauli, 2017).

Low back pain is frequently reported by 50% of pregnant women (Renityas et al., 2017). Back pain, meanwhile, affects 45% of expectant women and rises to 69% by the 28th

week of pregnancy. This results from alterations in posture since the body's weight shifts forward and the abdomen grows larger (Yosefa, 2013). Muscle pain complaints, which pregnant women frequently report, should not be ignored. Light exercise is one approach to enhance health when pregnant. Pregnant women can engage in some easy exercise, such as walking, pilates, and yoga. However, mothers who have been active since before becoming pregnant are still permitted to engage in their normal sports activities so long as they first consult a medical practitioner. Mothers can adjust the exercise they want to do during pregnancy according to their body condition and abilities. Regular exercise may improve both the mother and fetus' health (Widianti et al., 2010). Pregnancy exercise is a type of exercise to support and maintain the flexibility of the ligaments, pelvic floor muscles, and abdominal wall muscles involved in labor and delivery. The risk of spinal injury or falling during pregnancy can be reduced by maintaining muscle flexibility and good posture (Yosefa, 2013).

After giving birth, the mother will go through the puerperium to get her body back to normal and heal. Exercise after delivering birth has the purpose of accelerating the healing process, avoiding difficulties, recovering, and strengthening the demand on the muscles after pregnancy, particularly in the muscles of the back, pelvic floor, and abdomen. By strengthening the abdominal muscles after giving birth, which contributes to the involution process that begins as soon as the placenta emerges following the involution process, postpartum exercise also helps lower the risk of postpartum hemorrhage (Hestisupriyanti et al., 2016).

Kepmenkes 320 Tahun 2020 concerning the Professional Standards of Midwives state that Professional midwives are expected to possess clinical competence (midwifery abilities), sociocultural analysis, advocacy, and empowerment skills, as well as the ability to identify problems and propose new ideas that would enhance the welfare of women, families, and communities. The foundation for comprehensive, effective, efficient, and safe delivery of midwifery services is midwife competence. These services take the form of independent, collaborative, and referred promotional, preventative, curative, and rehabilitative efforts. Health promotion and counseling is one of the area in which midwives are competent. A midwife is supposed to be able to apply health promotion and counseling techniques that are suitable for organizing a healthy pregnancy, getting ready for labor and delivery, foreseeing emergencies, and getting ready to become a parent. One of them is by giving women and new mothers pregnancy and early postpartum exercise. Thus, midwives can assist women in becoming more independent so that they can exert self-control. One of the skills a midwife should have is the ability to encourage exercise for expectant mothers and new mothers in the early postpartum period (Kementrian Kesehatan RI, 2020)(Triyanti et al., 2022)

Being a midwife does not require you to be a stale expert on outdated information that is unrelated to innovation and new understanding. The knowledge, skills, and attitudes of midwives, who are at the heart of maternity and child health services, must be enduring and developing. In order to effectively promote and prevent illness, a midwife must be flexible and creative in how she approaches problems. When treating pregnancy-related issues, professionalism is highly regarded. The organization of programs for expectant women with pregnancy exercises is one attempt to increase the level of new services that may be used in healthcare institutions (Sari & Yusniarita, 2021).

A study conducted in Semarang found that coaching in pregnancy exercise using the

demonstration technique substantially improved pregnancy exercise skills. This is because, according to the teacher from the midwife, mothers will remember more quickly and not forget easily with the demonstration approach than with simply listening and seeing. This is because direct practice in practicing pregnant exercises will make mothers remember more quickly and not forget easily (Nurhudhariani et al., 2015)). Although prospective midwives have learned about and practiced pregnancy and early postpartum exercises during the academic education phase, midwives should undergo further training and become certified as exercise facilitators in order to provide patient care. The purpose of this act of community service was to enable midwives to accompany more women during pregnancy and the first few weeks after giving birth.

IMPLEMENTATION METHOD

This Community Service activity is in collaboration with partners, namely the PPKC (Pusat Pengembangan Kesehatan Sint Carolus) which aims to train midwives under Siloam Hospital Group which spread across various regions to be able to provide assistance and guidance for exercise activities that are safe, comfortable and according to needs. The solution proposed by STIK Sint Carolus is to provide information on ethics, planning, direction, and evaluation of pregnancy and early postpartum exercise, provide information on anti-corruption, and manage the process of operating this training activity from beginning to end.

Considering the pandemic situation, online and offline activity are both involved in this community service. For theoretical topics, online activities will be conducted on August 19 and 20, 2021, using Zoom Cloud Meetings. Afterwards the participants are given a period of time of 1-2 days to go to the training location in Jakarta. Meanwhile, direct offline events for classical topics will take place on August 23 and 24, 2021 at Siloam Training Center Karawaci, Tangerang.

This community service project starts with a planning session with stakeholders. We made a group of people that will join us to present topics and demonstration to the audience. The facilitators are coming from academics of STIK Sint Carolus's lecturers, representative from professional organization of midwives (Ikatan Bidan Indonesia) and practitioner from St. Carolus Hospital. On this stage of preparation, we identified documents, materials, evaluation templates and other things needed for this project.

RESULTS AND DISCUSSION

The Community Service activity was attended by 24 participants. The participants were midwives working in Siloam Hospital Group. They come from various cities in Indonesia. All of them have a minimum educational background of midwifery diploma program. the age of the participants also varied as can be seen in table 1.

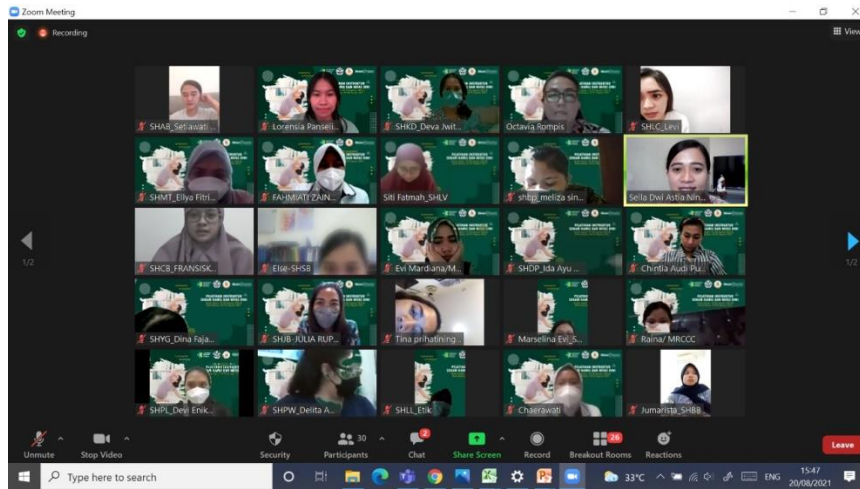
Table 1. Participant's Characteristics

Participant's Characteristic	n	%
Age		
<20	0	0
20-35	20	83.3
>35	4	16.7
Education		
Diploma	24	100
Bachelor	0	0
Length of work		
<3 years	2	8.3
≥3 years	22	91.7
Hometown		
Java island	16	66.7
Sumatra Island	4	16.7
Borneo Island	2	8.3
Maluku Island	2	8.3

This course has been approved by the Direktorat Peningkatan Mutu Tenaga Kesehatan Kementerian Kesehatan RI, so the content and the required number of study hours have been adjusted to meet the requirements. The total number of study hours in the program structure in the training curriculum is 35 hours. The material provided consists of basic material, core material, and supporting material. Before the training, participants receive a copy of the module via the WhatsApp participant group.

This course was held online on 19-20 & and offline on 23-23 August 2021 at the Siloam Training Center (STC). The Siloam Training Center team launched Pregnancy and Early Postpartum Exercise Instructor Training for Health Service Facilities. Committee, Master of Training (MOT) and a few facilitators were there for the course's opening. The solemnity of the opening ceremony and the participants' enthusiasm to participate in the training were not diminished by the online event. All participants sang the national anthem and March of IBI, then the host lead the opening prayer. Then, the committee gave a speech and opened the event.

The pre-test is administered online through the Google Form tool. Participants are informed of the connection via chat on the Zoom app and through WhatsApp group chats for participants. The pre-test questions can be worked on for 30 minutes. After completing the questions and submitting their responses, participants can immediately know their own score.



Picture 1. Online Session

An MOT (Baharika Suci Dwi Aningsih, M.Keb) directed this activities for the following four days. She is responsible for making sure the training sessions run on time, overseeing the curriculum-aligned content delivered, and creating an engaging and enjoyable learning environment. In addition, MOT offers helpful BLC content to help break the ice. Even though all the participants were midwives, a session was required to introduce everyone and establish a commitment to studying together in order for the training to go smoothly due to their diverse experiences. A class leader was also chosen during this session to direct the group of participant throughout the course.

The following session featured the presentation of information on the policy governing prenatal and early postpartum exercise in medical facilities by Mrs. Endang Sundari, S.ST. The participants will get an understanding of how exercising throughout pregnancy and the first few weeks after delivery is a midwife's competence that is legally recognized and may complement additional midwifery care services.



Picture 2. Offline Session

One of the key topics covered in the anti-corruption discussion is the increase in corruption cases in the healthcare industry. Mrs Dewi Novitasari, M.Keb clarified this subject. The class includes videos and real-world examples of corruption instances. At the start of the

course, it appeared that the participants needed a lot of direction regarding learning techniques that had been significantly altered to be performed online. If a participant has a question or topic to discuss, they are encouraged to independently unmute themselves or use the raise hand feature in the Zoom application. Later on in the learning process, however, individuals engaged in all learning areas actively and enthusiastically.



Picture 3. Demonstration and Simulation

Additionally, the training will take place offline in the Siloam Training Center in Tangerang on August 20–21, 2021. Demonstration sessions and simulations are used to illustrate the subjects discussed at this time so that participants are able to understand them better. Preparation, advice, and evaluation of pregnancy, and also early postpartum exercise, were the subjects presented during the offline session. The team of Mrs. Ni Nyoman, M.Keb, Mrs Lorensia Panselina, S.Keb., Bd., MKM and Ms Julia Nova, Amd.Keb., SKM presented these three topics. The anatomy and physiology of pregnant and postpartum women, along with the physical changes that happen to shape in a woman's body, body mechanics, and infrastructural preparation were all covered in the preparatory session. On the other hand, when it came to coaching, participants learned about specific characteristics of pregnancy exercise movements and the procedures that are taken. The facilitator provides a sample of how to train mothers before asking everyone to follow along. On the topic of evaluation, participants were taught how to evaluate the process and results of the exercise.



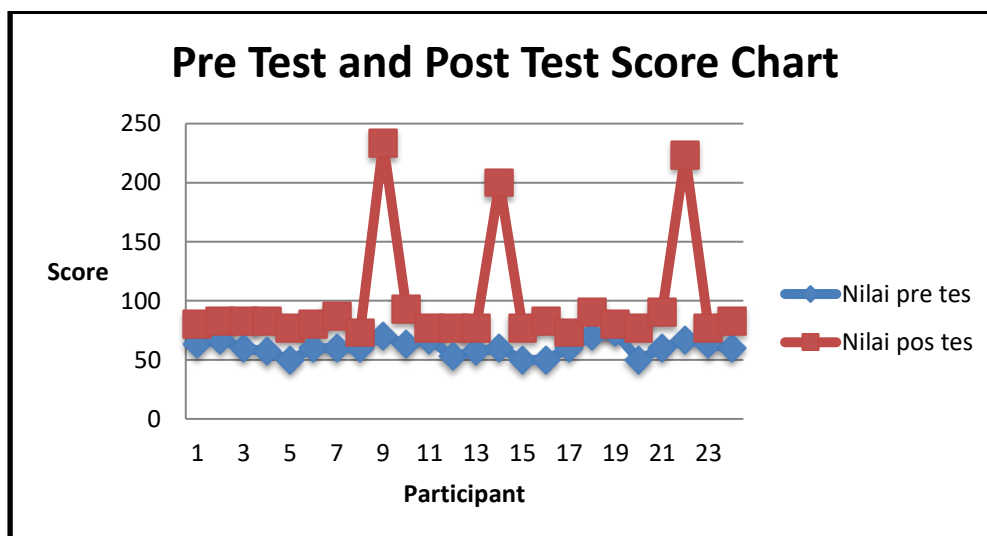
Picture 4. Facilitators and Participants

On the final day of the training, an evaluation was conducted by checking the participants' ability to comply with gymnastics directions and conducting an online post-test. After engaging in a comprehensive set of requirements, participants' abilities are evaluated in this way. The following are the scores obtained for the pre-test, post-test, and practical exam:

Table 2. Participant's Score of Pre Test, Post Test and Practical Test

Type of the test	Score		
	Min	Max	Average
Pre Test	50	73	60.42
Post Test	73	93	82.08
Practical Test	89.58	100	100

The pre test passing grade was 75, and the post-test passing grade was 70. The post-test and practice scores for the 24 participants' final evaluations were all (100%) higher than the passing grade. Additionally, it observed an improvement when comparing the findings of the preliminary evaluation (pretest) with those of the comprehensive evaluation (posttest). The average gain was 21.67 percent. The lowest score from the post-test findings, which may also be viewed, was 73. The Training for Pregnancy and Early Postpartum Exercise Instructors at this Health Service Facility was declared as SUCCESSFUL.



Picture 5. Participant's Score of Pre Test and Post Test Differences Chart

CONCLUSION

Working on community service projects with the PPKC and the Siloam Training Center is going nicely. There were 24 participants in the course, all of them currently employed as midwives for the Siloam Hospital Group. Pregnancy and Early Postpartum Exercise Instructors have received their training materials in accordance with the curriculum and modules, as well as some extra information from the facilitator. The outcomes of the participant, facilitator, and implementation evaluations all showed that the procedure

proceeded quite smoothly. The MOT has complied with their tasks, responsibilities, and obligations to control the teaching and learning process so that it always proceeds in accordance with the training objectives and curriculum. The training was considered successful after receiving 100% of the possible points from all.

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