IMPROVING THE SKILLS OF MIDWIVES IN OVERCOMING PREGNANCY DISCOMFORT WITH EARLY POSTPARTUM AND PREGNANCY EXERCISES

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

Sekolah Tinggi Ilmu Kesehatan Sint Carolus, Jakarta

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

Abstract

Pregnancy is a process that a woman looks forward to, but during pregnancy, there are various complaints that are felt due to physical and psychological changes and cause discomfort. Changes that occur due to changes in hormones and the psychology of pregnant women increasing gestational age results in increasingly diverse complaints in pregnant women, especially in the third trimester. The complaints that are often experienced are back pain caused by excessive bending, walking without rest, and lifting weights. Midwives have an important role in improving the health of pregnant and postpartum women to overcome discomfort during pregnancy, childbirth, and the early postpartum period. This community service is carried out so that midwives can reduce discomfort for pregnant women, so they need to receive training in pregnancy and early postpartum exercises to improve their skills. There were 18 participants in the course, all of whom are currently employed as midwives for the Siloam Hospital Group. The course was considered successful after receiving an improving score from all participants.

Keywords: Early Postpartum Exercise, Midwives, Pregnancy Exercise

INTRODUCTION

Pregnant women's problems vary with increasing gestational age, with back discomfort being a common complaint among them. Due to a change in the pregnant woman's body posture and center of gravity, this problem intensifies throughout the third trimester. Lifting weights, walking without stopping, and bending too much are some habits that lead to back pain (Fitriani, 2018). According to studies by Bullock et al. and Fitriani, L. 2021, 88.2% of pregnant women and roughly 62% of those who were between weeks 14 and 22 of gestation reported having low back discomfort. Amy's research also revealed that 70% of expectant mothers experienced low back pain. Mothers may find these complaints difficult, even though they are common and do not pose a threat to life (Andarwati et al., 2019).

Pregnancy exercise is one of several measures that can be taken from the beginning of
Pregnancy to ease a pregnant woman's discomfort and guarantee a painless birth and postpartum period (Susanti & Putri, 2019). One prenatal service that assists with comfort-seeking, strengthening contractions, and preserving flexibility of the muscles of the abdominal wall, ligaments, and pelvic floor is pregnancy exercise (Alita, 2020; Rahayu & Yunarsih, 2019).

Pregnant women can also benefit from pregnancy exercise, which is a type of movement therapy designed to help them physically and psychologically get ready for childbirth. At least once a week, beginning at week 22, pregnant women engage in pregnancy exercise in a hospital, maternity clinic, or under the supervision of a pregnancy exercise instructor (Andarwati et al., 2019). Exercise during pregnancy should be done in a comfortable environment with the right clothes, adequate water, and a regular schedule of three times a week. It's also important to remember to warm up and cool down, not hold your breath while exercising, and to stop if discomfort arises (Fitriani, 2018; Kamaruddin & Usma, 2019; Larasati & Wibowo, 2012).

The benefits of exercise during pregnancy have also been demonstrated by a number of studies, including one by Susanti, N. Y., & Putri, N. K. (2019), which involved 14 pregnant women in their third trimester. According to the findings, after receiving pregnancy exercise treatment three times in Sumberejo Sukorejo village, Situbondo in 2018, the majority of respondents (12) had mild pain, 0% had no discomfort, and 0% had severe pain. Fitriani, L. (2021) also found that there was a decrease in the pain scale both before and after pregnancy exercise. The study's total average decrease value was 26, and the p-value was 0.000, indicating that Ho was rejected. This suggests that there is a significant association between pregnant women who exercise and a reduction in back pain. Pregnancy exercise can help pregnant women maintain and improve their physical health, improve blood circulation, experience fewer complaints of cramps or aches, and prepare their breathing, muscles, and pelvic activity for giving birth. These benefits can be inferred from the research findings mentioned above (Cahyani Ari Lestari et al., 2023; Nyoman Sri Artina Dewi et al., 2023).

Pregnant women who exercise will see an increase in their bodies' metabolic processes. Because of this increased metabolism, more oxygen will be required for the metabolic process to occur. Therefore, it can be concluded that engaging in physical activity when pregnant will raise oxygen requirements in the body. Regular exercise tailored to the specifics of a mother's pregnancy has a positive impact not only throughout the pregnancy but also plays a major role in ensuring a smooth delivery. Pregnancy-specific exercises have the advantage of lowering physical exhaustion (Andarwati et al., 2019).

IMPLEMENTATION METHOD

In partnership with PPKC (Pusat Pengembangan Kesehatan Sint Carolus), this community service project aims to train midwives under the Siloam Hospital Group, which is dispersed across multiple regions, so they can assist and guide patients with safe, comfortable, and needs-based exercise activities. STIK Sint Carolus suggests that the following measures be taken: information on anti-corruption, planning, directing, and evaluating pregnant and early postpartum exercise; and management of the entire training activity process.

This community service incorporates both online and offline activities in light of the pandemic crisis. Zoom Cloud Meetings will be used for online activities on theoretical themes on December 6 and 7, 2021. The participants are then given a window of one to two days to
travel to the training site in Jakarta. Meanwhile, direct offline events for classical topics will be held in Siloam Training Center Karawaci, Tangerang, on December 9 and 10, 2021.

The planning meeting with stakeholders is the first step in this community service project. We put together a collection of people that will work with us to present the audience with subjects and demonstrations. The facilitators include members of the academic staff at STIK Sint Carolus, a representative from the Ikatan Bidan Indonesia professional organization for midwives, and a practitioner from St. Carolus Hospital. During this phase of planning, we determined the paperwork, supplies, assessment forms, and other items required for this undertaking.

RESULTS AND DISCUSSION

There were eighteen people present for the community service activity. The participants were midwives employed by the Hospital Group of Siloam. They are from different Indonesian cities. Each of them has completed a midwifery diploma program as a minimal educational requirement.

Since the Direktorat Peningkatan Mutu Tenaga Kesehatan Kementerian Kesehatan RI has authorized this course, the necessary amount of study hours and its content have been modified to comply with the standards. 35 hours are allotted for study in the training curriculum's program structure. There are three types of material available: foundational, central, and supplementary. Participants get a copy of the module through the participant group on WhatsApp prior to the training. This training took place at the Siloam Training Center (STC) offline on December 9–10, 2021, and online on December 6–7.

Pregnancy and Early Postpartum Exercise Instructor Training for Health Service Facilities was introduced by the Siloam Training Center team. At the start of the course, the Committee, the Master of Training (MOT), and a few facilitators were present. The virtual event did not lessen the seriousness of the opening ceremony or the participants' eagerness to take part in the training. After everyone had performed the March of IBI and the national anthem, the host led the opening prayer. The ceremony was then inaugurated by a speech from the committee. The Google Form tool is used to administer the pre-test online. Participants are notified of the connection through group WhatsApp chats and chats on the Zoom app. They have thirty minutes to spend answering the pre-test questions. Participants can view their score right away after finishing the questions and sending in their answers.
The next four days' activities were overseen by Master of Training (MOT) Baharika Suci Dwi Aningsih, M. Keb. MOT is in charge of ensuring that training sessions begin and end on schedule, supervising the delivery of curriculum-aligned information, and fostering an enjoyable and stimulating learning environment. Furthermore, MOT provides beneficial BLC content to facilitate ice-breaking. Because of their varied backgrounds, even though all the participants were midwives, a session to introduce everyone and make a commitment to studying together was necessary for the training to run well. During this session, a class leader was also selected to guide the participant group for the duration of the course. Mrs. Jehanara, S.ST., M.Keb., presented information on the policy governing prenatal and early postpartum exercise in medical facilities during the following session. Participants will gain knowledge about how a legally recognized midwife’s competence to exercise during pregnancy and in the initial weeks following delivery may be used in conjunction with other midwifery care services.

An important subject of discussion in the anti-corruption discourse is the rise in corruption cases within the healthcare sector. This topic was clarified by Mrs. Dewi Novitasari, M. Keb. Videos and real-world examples of corruption cases are used in the course. When the course first started, it seemed like the participants required a lot of guidance on learning strategies that had been drastically changed to be completed online. It is recommended that participants use the raise hand feature in the Zoom program or independently unmute themselves if they have a question or topic to discuss. However, people became actively and joyfully involved in every learning area later in the process.
On December 9–10, 2021, training will be conducted offline at the Siloam Training Center in Tangerang. In order to help participants better comprehend the topics being presented, demonstration sessions and simulations are utilized to illustrate them. The topics covered in the offline session were early postpartum exercise, pregnancy preparation, counsel, and evaluation. These three themes were presented by the team consisting of Mrs. Ni Nyoman, M.Keb, Mrs. Lorensia Panselina, S.Keb., Bd., MKM, and Ms. Julia Nova, Amd.Keb, SKMDuring the preparatory session, topics included body mechanics, the anatomy and physiology of pregnant and postpartum women, the physical changes that occur in a woman's body, and infrastructure preparedness. In contrast, during the coaching session, participants gained knowledge on the distinct features of pregnancy exercise movements and the protocols that are followed. The facilitator asks everyone to follow along after demonstrating how to instruct mothers. Regarding assessment, participants learned how to assess the exercise's outcomes and procedure.
An online post-test and an assessment of the participants' compliance with gymnastics instructions were carried out on the last day of the training. It is through a thorough set of requirements that the participants' talents are assessed. The results of the pre-test, post-test, and practical exam are as follows:

<table>
<thead>
<tr>
<th>Test type of the test</th>
<th>Score</th>
<th>Min</th>
<th>Max</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre Test</td>
<td></td>
<td>20</td>
<td>67</td>
<td>45.45</td>
</tr>
<tr>
<td>Post Test</td>
<td></td>
<td>87</td>
<td>100</td>
<td>98.67</td>
</tr>
<tr>
<td>Practical Test</td>
<td></td>
<td>76</td>
<td>100</td>
<td>84.05</td>
</tr>
</tbody>
</table>

A score of 75 is required to pass the post-test, and a score of 75 is required to pass practice. The final evaluation results for the practice and post-test scores for each of the 18 participants were all (100%) over the passing mark. In addition, the results of the first evaluation (pre test) have increased in comparison to the results of the final evaluation (post test). 53.17 is the average increase. Additionally, it is evident that the post-test findings have a minimum score of 87. The Pregnancy and Early Postpartum Exercise Instructor Training in Health Service Facilities was deemed successful based on this.

Picture 5. Best Participants
CONCLUSION

The outcomes of the facilitator, participant, and implementation evaluations show that the process went really well. In order to ensure that the teaching and learning process is always carried out in compliance with the curriculum and training objectives, the training controller has fulfilled his responsibilities in line with his job, function, and duties. Due to the training’s 100% success rate, it was deemed successful.

REFERENCES


