



Article

Student's Comprehension About Philosophy of Maternity Care "Women Centered Care" Based on the Report of Continuity of Care (COC)

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A B S T R A C T

Background: Mortality in Indonesia has significantly increased. Students' comprehension about maternity care "woman centered care" philosophy is an important thing in high quality maternity care, it is one solution to decrease the number of mortality rate. Continuity of care maternal clinic model of learning (PKK-CoC) is giving for student to learn the philosophy.

Objectives: reveals level and form of students' comprehension about maternity care "woman centered care" philosophy.

Method: Mixed method with sequential explanatory strategy. The qualitative are use analytic descriptive design, while the quantitative use case study design. Population and sample is 55 students of EstuUtomoBoyolali institute health and science who have taken PKK-CoC. Sampling use criterion and intensity.

Result: qualitatively, students overall comprehension is good. Quantitatively, students comprehension on personalized care, holistic care, collaborative care, and evidence based care is also good. Partnership care is the only aspect considered in effective.

Conclusion: continuity of care shows that client and family are in good health, zero mortality rate, client feels safe and comfortable, and client has correct and fast care. It is also found that students' confidence, skills, and comprehension about maternity care "woman centered care" philosophy are increased. It is suggested including the PKK-CoC model into curriculum of midwifery education



I. INTRODUCTION

Students' comprehension toward the maternity care "woman centered care" philosophy is an important thing in high quality maternity care, it is One solution to decrease the number of mortality rate of maternal woman is through high quality maternity care. The mortality rate of maternal woman in Indonesia, based on Indonesian health demography survey, reaches 359 / 100.000 live births on 2012. The efforts to decrease mortality rate include the provision of competent and professional midwife. This provision is preceded by building a qualified educational institution which is able to deepen the students' comprehension on midwife philosophy "women centered care" and facilitate the students in experience gathering and fulfill their duty to public.

The continuity of care in midwifery clinical practice is proven in widening the chance of the students to enhance their comprehension of maternity care philosophy. The effort to enhance students comprehension is carried by theoretical addition and practical implementation to give broad, real and comprehensive experients for the students.

Maternity care on most of the midwife education institution is still using maternity care case target (report quantity evaluation) without any preparation and experience on maternity care continuity (continuity of care) which is unrelated to the philosophy of maternity care.

Thus, a study revealing students' comprehension of maternity care philosophy using continuous maternity care (continuity of care) report is needed.

II. METHODS

Study design

This study carried under mixed method design and sequential explanatory strategy in which the quantitative data collection and analysis is applied first then followed by qualitative analysis. Quantitative aspect of this study is carried under descriptive analytics while qualitative aspect is carried under case study design .

Setting

This study divided into two stage, quantitative data collection and analysis is applied first then followed by qualitative analysis. The sample used for quantitative study is the whole population which is 55 students of 6th semester in EstuUtomoBoyolaliinstitute health and science who have done continuity of care in midwifery clinical practice. While qualitatively, the sample is 5 students from population taken using mixed sampling method (criterion and intensity sampling) according to quantitative study result.

Researche Subject

Students of 6th semester in EstuUtomoBoyolaliinstitute health and sciencewho have done continuity of care in midwifery clinical practice.

Instrument

The instrument of this study is checklist that was modifying by researchers, it has been tested the validity and reliability before by previous researchers.

Data Analysis

This study carried under univariate analysis by descriptive analytics for quantitative research and thematic analysis for qualitative research.

III. RESULT

Qualitatively, the comprehension of students on every aspect (personalized care, holistic care, partnership care, collaborative care and evidence based care) is good. The problem occurs on documentation the report of maternity care on partnership care aspect. Quantitatively, the researcher found similar problem in partnership care. The result of quantitative study can be seen on table below.

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Table 1. Categorization and Coding/Meaning on every component of *Maternity care Continuity of Care* report and Semi-Structured Interview

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
<i>Personalized care</i>	Identifying special needs of every clients	Main complaints are only found on ante-natal and post-natal care report. However, the complaints are not found in labor report. The data shows that the way to reveal clients' main complaints is through direct interview. This will reveal clients' problem in detail thus will also reveal clients' special needs. However, the interview is not conducted in labor since the client has complication.	Knowing how to reveal the client's main complaint. Knowing the function of revealing main complaint.
	Giving appropriate care according to clients' needs	The maternity care report contains procedure suitable to client's main complaint, physical examination, and diagnosis. The data shows that certain procedure is needed to point out solutions derived from subjective and objective data analysis, and secondary examination.	Comprehending the basic of procedure making Comprehending the function of procedure in maternal care
	Honoring the clients' rights to choose the form of care given.	The maternity care report contains evaluation of procedure which is chosen by the clients and its alternatives. The data shows that honoring clients' rights can be done through letting the clients know and choose the procedure. This is for ensuring clients' consent in doing the chosen procedures.	Comprehending the way to honor clients' rights to choose the form of care given. Comprehending the function of honoring the rights of clients on giving appropriate care.
<i>Holistic care</i>	Paying attention to clients' physical needs	The maternity care report should contain complete physical examination result (head to toe). The data shows that the way to give attention to clients' physical needs is by doing complete physical examination. This will reveal clients' physical problem and their physical needs.	Comprehending the way in attending to clients' physical needs. Comprehending the functions of physical needs
	Paying attention to clients' psychological needs	The maternity care report should contain psychological data consist of clients' anxiety; clients' feeling during pregnancy (graviditas), labor (partus), and puerperium; and acceptance or refusal on pregnancy (graviditas), labor (partus), and puerperium. The psychological data is obtained by interviewing the clients, and analyze their psychological state. The interview will reveal psychological needs of clients. However, the interview is not conducted in labor since the client has complication.	Comprehending the way in attending to clients' psychological needs Comprehending the importance of attending clients' psychological needs.

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
	Paying attention to clients' social needs	The maternity care report should contain data of social and economic needs, marriage history, clients' family relationships, and familial supports towards the clients. The social needs data is obtained by interview and observation. This will reveal problems in clients' social state. Knowing the problem will reveal social needs of the clients. However, the interview is not conducted in labor since the client has complication	Comprehending the way in attending to clients social needs Comprehending the importance of attending clients' social needs
	Paying attention to clients' spiritual needs	The maternity care report should contain data on spiritual activities of clients such as prayers activities, recital during pregnancy (graviditas), labor (partus), and puerperium; <i>zikir</i> recited on pregnancy (graviditas), labor (partus), and puerperium based on clients religion. Spiritual needs data is acquired by interviewing the clients. This is important to reveal and analyzed spiritual problem clients had. Knowing the problem leads to appropriate way to fulfill clients' spiritual needs. Spiritual needs are not documented during pregnancy since there is no prior example and advice from the advisor to do so.	Comprehending the way in attending to clients spiritual needs Comprehending the importance of attending clients' spiritual needs
	Paying attention to clients' cultural needs	The maternity care report should contain clients' cultural data such as traditional customs regarding pregnancy (graviditas), labor (partus), and puerperium which are believed and applied by the clients. Cultural needs data is acquired by interviewing the clients' <i>didapatkandenganmenanyakankepadaklien</i> . This is important to reveal and analyzed clients' cultural states in order to point out clients' cultural needs. However, the interview is not conducted in labor since the client has complication	Comprehending the way in attending to clients cultural needs Comprehending the importance of attending clients' cultural needs
<i>Partnership care</i>	Involving the client and her family in identifying needs on every phase (pregnancy, labor, and puerperium)	The maternity care report did not mention any familial (husband, parents, parents in-law, siblings, other family member) involvement on every reports of maternity care given to the researcher (objective, analysis, and procedure). The informan of study stated that they have been involving the family to reveal subjective data such as confirming the social data, psychological data, and family health history. However, this is not documented since the informan following the maternity care report's form. Thus, it is unknowingly by the informan to include family involvement data in the report.	Comprehending how to involve family in needs identification, however it is undocumented.
	Cooperating with the client and her family in giving care during pregnancy, labor, and puerperium.	The maternity care report did not mention any cooperation with client's family (husband, parent, parent in-law, siblings, and other family member) on the procedure given. The informan of study stated that they have been cooperating with client and her family in giving appropriate care and procedure. However, this is not documented because of several reasons such as forget, no advice given by advisor, no such documentation on prior reports, and some of the advisor did not encourage to mention the involvement of family.	Comprehending how to cooperate with client's family however it is undocumented.

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
Collaborative care	Involving the client in deciding of care given during pregnancy, labor, and puerperium	The maternity care report mentions evaluation of each steps of procedure including client's decision to do the care. The data is taken by asking the client to choose whether she is consented to do the procedure given or not.	Comprehending how to involve the client in deciding on care given to her.
	Identifying risk factors on clients and discussing with advisor	The maternity care report mentions the analysis of subjective and objective data and secondary examination. Most of them are without consultation sheets. The informan stated that the analysis is made to identify risk factors based on subjective and objective data and secondary examination. Every care given is always discussed with field and academic advisors including the result of risk factors identification to avoid mistakes. However, the consultation sheets are only attached to main reports; maternity care report did not have them.	Comprehending how to identify risk factors Comprehending that every care including analysis result should be consulted with advisors avoiding any mistakes in care giving.
	Making consultation / collaboration and referral plan according to complication of client	The maternity care report contains complete data on identification of complication and preparation of P4K (<i>program perencanaanpersalinandanpencegahankomplikasi</i> – labor planning and complication prevention). The informan stated that the P4K data is completely obtained. This data is important in handling complication and preparing the clients for referral case.	Comprehending how to prepare consultation / collaboration and referral regarding client's complication. Comprehending the function of preparing consultation/ collaboration and referral regarding client's complication.
	Accompanying the client in referral case	In referral case, the maternity care report contains the data on student involvement in referral process and also SOAP data when referral case happened. In normal case, the report contains procedure for normal case. The informan stated that on complication case and in need of referral, the midwife always accompany the client, monitoring client's state according to the procedure applied in referral place. In continuous care, a midwife should monitor and accompany the client the whole time.	Comprehending function of accompanying client in referral case. Comprehending the procedure on accompanying client in referral case
	Monitoring the state of client after referral process	In referral case, the maternity care report contains client's improvement data after referral process and also SOAP data when referral case happened. In normal case, the report contains procedure for normal case. The informan stated that in complication case with referral she monitors client's state after referral according to procedure. By monitoring clients state, midwife care can be given whenever necessary.	Comprehending the function of monitoring the state of client after referral process Comprehending the procedure of monitoring the state of client after referral process

Component	Sub Component	Coding/ Meaning	Coding/ Final Meaning
<i>Evidence Based care</i>	Using up to date literature as basis on planning and giving care for clients	The maternity care report contains up to date literature in its content and bibliography. Up to date means published after 2007. The literature is considered as the basis of theory for care given. The informan stated that the literature is chosen based on the case of clients in case overview (chapter 2). The literature published maximum within 10 years since the report is made. Every informant is able to describe the usage of literature in maternity care. The function of the literature is as the basis on giving maternity care which is written in chapter 3 and discussed on chapter 4.	Comprehending the reason in using up to date literature Comprehending the function of using up to date literature as basis on planning and giving care for clients
	Showing the rationale of the whole maternity care based on the latest evidence for efectivity of care	The rational is included in chapter 3. The informan stated that rationale is taken from references ans sources such as books and previous continuity care report (2016). Rationale is very important as basis and evidence of efectivity of every care given.	Comprehending how to get the latest basic evidence on efectivity of care. Comprehending the function of rationale of whole care given

The result of quantitative study is given in the following table.

Tabel 2. Frequency distribution table of sudents' comprehension on the philosophy of maternity care "WomenCenteredCare" in every aspects based on the Continuity of Care reports

Num.	Category	Frequency	
		N	%
1	<i>Personalized care</i>		
	Good Comprehension	51	93
2	Average comprehension	4	7
	<i>Holistic care</i>		
3	Good comprehension	47	85
	Average Comprehension	8	15
4	<i>Partnership care</i>		
	Good Comprehension	12	22
5	Average Comprehension	43	78
	<i>Collaborative care</i>		
6	Good Comprehension	55	100
	Average Comprehension	0	0
7	<i>Evidence based care</i>		
	Good Comprehension	55	100
8	Average Comprehension	0	0

From the table, the best comprehension is collaborative care and evidence based care aspect. Students' comprehension that still needs to improve is partnership care aspect. However, overall understanding of the aspects in the philosophy of maternity care "women centered care" is good.

DISCUSSION

The results of this study are in line with Anue (2011) and Gray (2012) learning model midwife clinic *Continuity of Care* (PKK-CoC). This model is proven in giving broad chances to improve students' comprehension on the philosophy of maternity care "women centered care".

Brooke (2016) and Carolan (2007) stated that the philosophy of "women centered care" consists of cares that fulfill clients' needs, attend clients' physical, psychological, psychosocial, spiritual and cultural needs, collaborate with clients, consult and collaborate with other health institution when needed, and give case based on the latest literature available. Maternity care reports of Diploma midwife students of STIKES EstuUtomoBoyolali contain every aspect of philosophy of maternity care "women centered care" and the data contained are good written and clear.

IV. CONCLUSION

The practice of midwife clinic *continuity of care* in STIKES EstuUtomoBoyolali has applied the philosophy of maternity care "women centered care".

The comprehension of students of D III Kebidanan STIKES EstuUtomoBoyolali based on maternity care *continuity of care* reports can be categorized as good. Every student has good level of comprehension, especially on *personalized, holistic care, collaborative care* and *evidence based care* aspects. However, the comprehension on *partnership care* aspect need to be improved.

The students' comprehension can be seen through their application of every aspect and their ability on describing the procedure and function of every aspect.

The quality of maternity care "Continuity of Care" in STIKES EstuUtomoBoyolali is good since the clients and their family are in good condition and there are zero mortality rates. The clients are also feel comfortable, safe and cared since they got correct and fast responses. The students then become more confidence, more skillful, and more competent.

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BIOGRAPHY

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