

Analysis of The Quality of *Antenatal care* (ANC) Services for Pregnant Women at Welahan I Health Center, Jepara Regency

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ABSTRACT

Introduction: Maternal Mortality Rate (MMR) is still a problem in Indonesia. An important way to reduce maternal mortality is to improve the quality of antenatal care (ANC) services. Good service quality will make patients feel satisfied with the services provided. This study aims to analyze the perception of the quality of ANC services and the expectations of pregnant women regarding the improvement of ANC services at Welahan I Health Center, Jepara Regency. **Methods:** This type of research is descriptive qualitative research with a case study approach. The research sample was 8 pregnant women with a minimum requirement of trimester 2 and had visited at least 2 times as well as 1 midwife and midwife coordinator each. **Results:** The results showed that the quality of service at the Welahan I Health Center in the aspects of reliability, responsiveness, and empathy was in accordance with the expectations of pregnant women. Another finding was found in the aspect of reliability, namely pregnant women felt happy when given an explanation in every action so that it could increase satisfaction for pregnant women. However, there are several aspects that need to be added, namely assurance such as providing clearer information and tangibles, namely the presence of ultrasound equipment. **Conclusion:** The quality of service at the Welahan I Health Center is in accordance with the expectations of pregnant women in several aspects. The health center can improve the provision of explanations in every action, clear information and the provision of ultrasound equipment at the health center.

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INTRODUCTION

Maternal Mortality Rate (MMR) is still a problem in Indonesia. In 2017, approximately 810 mothers died every day due to childbirth and 94% of all maternal deaths occurred in low- and lower-middle-income countries. The World Health Organization (WHO) reports that the direct cause of maternal deaths occurs during and after childbirth,

then 75% of maternal deaths are caused by bleeding, infection, or high blood pressure during pregnancy. The number of maternal deaths collected from the records of the family health program at the Ministry of Health increases every year.

In 2021, there were 7,389 deaths in Indonesia which increased compared to 2020 (Kementerian Kesehatan Republik Indonesia, 2021). In Central Java, the maternal mortality rate was seen to decrease during the 2017-2019 period but in 2020 it began to rise again and in 2021 it has reached 199 per 100,000 live births (Dinkes Jateng, 2021). The MMR data for Jepara Regency in 2021 shows the number of maternal deaths was 19 cases compared to Rembang, Karanganyar and other districts (Dinkes Jateng, 2021). From the data obtained at the Dinkes Jepara, it shows that the highest number of maternal deaths occurred in Welahan I District with 5 cases (Dinkes Jepara, 2021).

Indicators of the quality of maternal health service achievements can be assessed by the coverage of maternal visits (K4). K4 coverage describes the number of pregnant women who have obtained antenatal care in accordance with the standard at least six times according to the recommended schedule in each trimester (Kementerian Kesehatan Republik Indonesia, 2021). Another important thing in MCH services is the quality of service in determining patient satisfaction. When patients are satisfied with the services provided, it can make patients to visit regularly come to health services. If the quality of service provided is poor, it can cause patients to go to other service facilities or even make patients go to non health workers. This is supported by (Maulana, 2017) research which states that one of the indirect causes of the high maternal mortality rate, because if the patient feels the quality provided is poor, it is likely that the patient will go to a non-health worker so that it can lead to complications in the patient due to the undetected high risk in the patient.

According to Tjiptono (2011), patient assessment of quality is determined by two things, namely patient expectations of quality (expected quality) and patient perceptions of quality (perceived quality). The level of service quality can be seen based on 5 dimensions, namely reliability, responsiveness, assurance, empathy and tangibles.

Based on research in the Indonesian region shows that the quality of ANC services is not perfect, there are still shortcomings regarding the quality of ANC services in Indonesia. This is supported by (Maulana, 2017) research conducted by about the quality of antenatal care in Tangerang shows that there are deficiencies in the quality of service from the tangibles dimension, namely aspects of infrastructure, reliability, namely the ability to perform service actions, responsiveness which is still lacking, assurance, namely the attitude in providing services and dimensions of empathy such as communication in providing services. Existing research on service quality shows about perceptions and expectations regarding the quality of the dimensions of tangibles, reliability, responsiveness, assurance, and empathy. However, the research conducted by this used a quantitative approach so the researcher wanted to replicate this research using a qualitative approach to explore expectations that could be an improvement on previous research to improve the quality of the ANC program.

Based on the background above, it shows that previous studies used quantitative methods and still showed that the quality of service at the previous research site was still lacking. So that researchers are interested in knowing the description of the quality of ANC services for pregnant women at the Welahan I Health Center, using qualitative methods.

LITERATURE REVIEW

The World Health Organization (WHO) reports that the direct cause of maternal deaths occurs during and after childbirth, and 75% of maternal deaths are caused by

bleeding, infection, or high blood pressure during pregnancy. The number of maternal deaths collected from the Ministry of Health's family health program records increases every year. It is important to reduce maternal mortality by improving the quality of antenatal care (ANC) services.

Improving the health status of the community can also be done through increasing access to health services that use strategic interventions in the four pillars of Safe Motherhood, namely family planning, antenatal care, clean and safe delivery and essential obstetric services. In the MCH program, comprehensive activities are carried out starting with the search/finding of pregnant women, examination of pregnant women, delivery assistance, and handling neonatal and infants (Oruh, 2021). Health Center officers intervene with pregnant women by monitoring, examining, and starting to be detected until delivery.

Indicators of the quality of maternal health service achievements can be assessed by the coverage of maternal visits (K4). K4 coverage describes the number of pregnant women who have received antenatal care according to the standard at least six times according to the recommended schedule in each trimester (Kementerian Kesehatan Republik Indonesia, 2021).

METHOD

The research method used is descriptive qualitative research with a case study approach. This research was conducted from January to November 2023. The main informants in this study were 8 pregnant women who checked at the Welahan I Health Center, Jepara. The main informant criteria in this study are pregnant women who check at the Welahan I Health Center, Jepara with a minimum requirement of trimester 2 and have made ANC visits at least 2 times at the health center. Researchers used source triangulation to increase research confidence. Triangulation was conducted with 1 midwife and 1 midwife coordinator.

Data collection using the interview method was used to dig deeper into the expectations and perceptions of pregnant women regarding the desired service quality. The data collection technique was a semi-structured interview using an interview guide. The interview guide was prepared based on theory and tested on 5 pregnant women. The analysis in this study used content analysis.

The results of the interviews were then transcribed interviews which were then reduced and coded and categorized and then determined the theme. The results showed 2 themes, namely the perceptions of pregnant women and the expectations of pregnant women, then processed into verbal form and presented in narrative form. Furthermore, conclusions are drawn in the form of a description or description and answer about the quality of ANC services for pregnant women at the Welahan I Health Center.

Researchers have received ethical approval from the Health Research Ethics Commission (KEPK) FK UMS No. 4792/B.1/KEPK-FKUMS/V/2023, before data were collected. Researchers have also received permission from the Jepara Regency Research and Development Agency, the government agency responsible for research, the Head of the Jepara Regency Health Office, and the Welahan I Health Center.

RESULT AND DISCUSSION

There are two things in the study, namely the perception of pregnant women regarding the quality of antenatal care services and the expectations of pregnant women regarding the improvement of ANC services. In service quality there are several aspects, namely reliability, responsiveness, assurance, empathy, and tangibles.

A. Pregnant women's perceptions of the quality of antenatal care services

a. Reliability

In the aspect of reliability, it can be seen from the reliability of health workers in conducting examinations of pregnant women. Based on the results of the interviews, the informants stated that they received a complete 10 T examination including weight weighing and height measurement, blood pressure measurement, upper arm circumference measurement, measurement of the height of the top of the uterus (fundus uteri), determination of tetanus immunization status and administration of tetanus immunization, administration of blood supplement tablets, determination of fetal presentation and fetal heart rate, conducting meetings, laboratory test services, and case management according to indications which indicate that the reliability of health workers in conducting examinations of pregnant women. This is shown as follows:

"...went to the MCH room and was examined. I was told to weigh myself, measure my tb, blood pressure, and circumference and asked about any complaints I was having. After that, they were told to check laboratories such as Hb, blood sugar, blood type and then there was more but I forgot what it was called." (IU-3)

"... was immunized during the first pregnancy..." (IU-1)

"... was given blood tablets because my Hb was low at that time, so I had to diligently take blood tablets..." (IU-2)

"...checked my fetus and pulse, at that time I also heard it..." (IU-5)

"...at that time my Hb was low, so I was asked to take blood supplement tablets and eat nutritious foods and also increase vegetables..." (IU-2)

"... I was also measured using a meter that is used to measure the size of the clothes, ma'am. They said it was to find out the size of the fetus according to the age of my pregnancy or not." (IU-1)

b. Responsiveness

In the analysis results in terms of service time, there are 2 aspects, namely fast and precise and timely service. The results showed that the service received by informants was not too long, appropriate, and also on time. This is indicated by the informant's statement that

"...go to the registration to take a number and then wait to be called. I also waited not too long." (IU-6)

"...hmm about 5 minutes because it was still morning and there were not many patients yet but yes, it was still on time mba" (IU-3).

However, 1 out of 8 informants said that there were differences in waiting. The informant said that there was a difference between the first and subsequent examinations. During the first examination, there was a laboratory examination which resulted in a long wait during the laboratory examination. However, the pregnancy examination was relatively fast. This is because when laboratory examinations are served not only pregnant women but from all patients. The following are the words of the informant

"...if you wait for the examination, it's fast. The longest time when you first check is quite long when waiting for the laboratory for about an hour..." (IU-2)

This is in accordance with the standard antenatal care service that there is a laboratory examination at the beginning of the examination. Laboratory examination is only done at least once. Pregnant women will get another laboratory examination if it shows that Hb deficiency.

Then on the aspect of complaints during counseling shows how responsive health workers are in dealing with complaints during counseling. Based on the

informant's statement obtained from the results of the interview, it was said that health workers responded well to complaints, such as when the informant got a complaint of nausea and nausea, then the midwife gave a solution that the symptoms felt by pregnant women were normal and given medicine. The following is evidence of the informant's words

"...asked about the complaint and I answered that I felt nauseous. At that time, I still felt nauseous and then the midwife told me that it might be a normal symptom felt by pregnant women and was given medicine so ma'am... the midwife responded well to my complaint." (IU-1)

c. Assurance

In the aspect of assurance, pregnant women feel that health workers have the ability, knowledge, and skills in carrying out their duties. It can be shown by informants that health workers explain about the care of pregnant women from their food and how to treat anemia by taking blood supplement tablets. This is shown by the informant's words as follows

"... provide information on how to care for pregnant women, from eating, you have to eat protein, vegetables, fruit must be a lot, then you can't stress the fetus, then diligently take blood supplement tablets because the Hb is low, eat fish so mbaa." (IU-2)

In the aspect of delivering clear information, informants said that in delivering information, health workers had explained well and clearly and were easy to accept. This is evidenced by

"... the midwife explained clearly and was easy to accept. At that time, I was told what to do." (IU-7)

However, one informant said that health workers can provide clear information about the exercises for pregnant women because according to the informant, it is still not clear. Informants felt that they were usually only told without being shown how to do it correctly. In addition, the informant still felt that there was a lack of information about pregnant women's classes. Here is the evidence:

"... maybe clearer information about pregnant women's exercises. Usually I'm just told, oh this is how pregnant women exercise. But maybe in my opinion, there is less explanation on how to do the right exercises for pregnant women." (IU-2)

"...I still don't know the schedule of pregnant women's classes, so I haven't participated, maybe I wasn't given enough information..." (IU-1)

d. Empathy

In the empathy aspect, it shows that pregnant women get services from health workers politely, friendly, honest, and trustworthy and pregnant women feel that they get full attention by health workers.

In the aspect of pregnant women getting services from health workers in a polite, friendly, honest, and trustworthy manner shows that informants have received these services. From the results of the interviews, informants said that health workers were very friendly, kind, polite and also explained well. In addition, pregnant women also get motivation that shows full attention by health workers. This is evidenced as follows.

"... very friendly, kind, polite, and thorough in examining mba. The midwife also gave a very clear explanation..." (IU- 1)

"...eat protein, vegetables, fruit must be a lot, then you can't stress the fetus, diligently checkup, especially those like me, whose Hb is low so you have to diligently take blood supplement tablets too, eat fish like that." (IU-2)

e. Tangibles

In the aspect of tangibles, it shows that pregnant women get comfortable facilities, pregnant women feel comfortable while waiting in the waiting room, and pregnant women feel that the KIA room looks clean and neat. This is shown by the informant's statement as follows:

"... the facilities are enough, it also looks like a new room, so it looks clean, and the waiting room is also big. So it's comfortable, not cramped when waiting in line. So the facilities have improved from the previous room. It's good enough..." (IU-2)

"The facilities here in my opinion are sufficient, the room inside is also clean and tidy so that it makes you comfortable. The waiting room is also large so it makes it comfortable" (IU-7).

However, 2 out of 8 informants said that the facilities here are still lacking and need to be added, namely the ultrasound tool. Informants feel that tools such as ultrasound need to be added so that they can check here and do not need to go to other services. This is shown by the informants' statements as follows.

"The facilities here in my opinion are still lacking mba. The problem is that there is no ultrasound. If there was an ultrasound, I could have a check-up here instead of having to go to a hospital or obstetrician." (IU-6)

"In my opinion, the facilities here are still lacking because there is no ultrasound hihi. If there is an ultrasound, I can see my child's movements, can see whether my fetus is healthy or not directly." (IU-1)

This is because the informant feels that if there is no ultrasound here, he has to go to another service and pay again, not to mention the queue. This is supported by the informant's statement as follows.

"... there is no ultrasound here so I have to go to an obstetrician who has ultrasound, I have to pay for it myself again. Not to mention waiting for the queue is quite a lot ma'am and it has to be in the morning. Sometimes there is no one to bring me" (IU-1).

B. Expectations of Pregnant Women

a. Reliability

Based on the results of the informants, the informants have received an examination that is in accordance with their expectations. The informant did not state any shortcomings in the examination of pregnant women, so it was appropriate. This is in accordance with the informant's statement below

"...The service is good enough and needs to be maintained..." (IU-1)

"...it's enough in my opinion, nothing else should be added..." (IU-7)

It was also found that there were several aspects that could increase the informants' sense of emotion or pleasure when they could get an explanation at each examination and could also listen to the baby's heartbeat. The following is the informant's statement below

"...and what I like is when the midwife explains while checking my child's heart rate and I can hear it..." (IU-1)

This is supported by the statement of the triangulation informant who said that the examination provided was in accordance with service standards. This is evidenced by the triangulation informant's statement as follows

"...we perform services according to the SOP, such as SOP ANC, tension checks, djj and many more mbak. So that we conduct examinations of pregnant women in accordance with these ..." (IT-1)

"... yes, the examination is according to the SOP such as tension, measuring the lila, weighing, and height..." (IT-2)

So that what is given by midwives is in accordance with the expectations of pregnant women, namely the provision of examinations in accordance with the services that should be provided during antenatal care, namely the 10 T's.

b. Responsiveness

Based on the results of informant interviews, it shows that informants say that the services provided in the responsiveness aspect have met the expectations of pregnant women both from fast and precise services, on time, complaints during counseling, and delivery of information in accordance with procedures and can be received properly. The following is the informant's statement

"...it's good enough here in my opinion ..." (IU-4)

This is also supported by the statement of the triangulation informant that the services that have been provided are in accordance with the standards.

"... if for the service, God willing, it is good mbak, we also respond well to complaints and provide suggestions..." (IT-1)

"... the services we provide are good, in accordance with the SOP standards as well." (IT-2)

c. Assurance

Based on the results of the interviews, 6 out of 8 informants stated that the services provided were in accordance with the expectations of pregnant women in the aspect of pregnant women feeling that health workers have the ability, knowledge, and skills in carrying out their duties and in conveying information can be easily understood and very clear.

However, there was one informant who said that the Health Center could provide clearer information about pregnant women. In addition, there were pregnant women who did not know the information on pregnant women's classes. The following is an informant's quote:

"... maybe clearer information about pregnant women's exercises. Usually I'm just told, oh this is what pregnant women's exercise is like. But maybe in my opinion, there is less explanation on how to do the right exercises for pregnant women." (IU-2)

"...I still don't know the schedule of pregnant women's classes, so I haven't participated, maybe I wasn't given enough information..." (IU-1)

This is also supported by the statements of triangulation informants that midwives feel that their services are still lacking in providing more detailed information so that health workers want to improve innovations such as educational services so that they can provide input to health center in improving the information provided. Here is the evidence

"...in my opinion, innovations can be added such as educational services to reduce the pain of pregnant women or healthy eating that is more clear not just suggested. However, it can be recommended to open youtube examples of recommended pregnant women so that patients here are more extensive. That can be improved again." (IT-2)

d. Empathy

Based on the results of the interview, it shows that the informants said that the services provided in the empathy aspect were quite good and in accordance with what the informants expected. The following is the informant's statement

"...if here it is enough mba, so just maintain it in providing services..." (IU-4)

This is supported by the statement of the triangulation informant that the services provided here are in accordance with the SOP and always prioritize patient comfort. So that it is possible to reduce the arrival of complaints by providing good, friendly service. The following is a triangulation informant statement

"...the attitude of service here I think my friends are good and friendly, we always prioritize patient comfort. In providing services we have followed the existing standards (according to the SOP). Alhamdulillah, so far there have been no complaints, so we consider the possibility of good service...." (IT-1).

In addition, in terms of information, it shows that the services provided in empathy are quite good and in accordance with what the informant expects. Informants feel that they are given motivation or messages that can support their health. This is also supported by the statement of the triangulation informant that we always give attention and messages and also provide information for pregnant women to maintain their health.

"... we always give attention and messages when pregnant women check, so they can maintain their health..." (IT-1)

"...Already, yes I think it's enough to provide information too..." (IT-2)

e. **Tangibles**

Based on the statements of several informants, it shows that the facilities here are more than before and are in accordance with the expectations of pregnant women. The statements of some informants are supported by triangulation informants that the facilities here are better than before. Both in terms of the room is more spacious and the tools are relatively complete. The following is the statement of the triangulation informant below

"... The condition of the room in my opinion is sufficient, yesterday because I moved from the front room (the room that was previously used as the KIA room). yes, the room is wider and wider. And I think the room is also close to the desired suitability." (IT-1)

"The condition of the room is now more spacious than the old one, because we just moved...and the room now has close access to the laboratory, nutrition consultation, dental room so that patients do not need to walk far if they want to get these services." (IT-2)

In addition, based on the results of interviews by triangulation informants said that the tools here are complete such as tensimeters, scales, metlin, microtoise, fetal detection devices (dopler). If something is damaged, it will be followed up immediately. The following is the statement of the triangulation informant.

"...The tools for antenatal care here are complete. There is a tensimeter, metlen scales, there is a microtoise, there is also a fetal detection device (dopler). The condition is also still good and also still suitable for use. For damaged tools, we immediately follow up with the proposal of new tools, our tools are also calibrated..." (IT-1)

"...The tools are also quite complete and the condition is still good..." (IT-2)

However, there are informants who feel the need to add tools, namely ultrasound equipment. So that informants have hopes for an ultrasound device to be added. This is supported by the informant's statement as below

"Yes, the hope is that there will be an ultrasound device added, so that it can be done" (IU-1).

This is also supported by triangulation informants who said that there is a need for an ultrasound device because there are doctors who have participated in training but do not yet have the equipment. The following is a statement from a triangulation informant.

"...Yes, in my opinion, what is missing is the ultrasound equipment. The problem is that there are doctors here who have attended training, but we don't have the tools yet. So it is unfortunate that the knowledge cannot be used, but we are also working on getting an ultrasound device..." (IT-2)

From the results of the above research, it shows that the perception of the quality of antenatal care services at the Welahan I Health Center is good in several aspects such as aspects of reliability, responsiveness, and empathy. This is in line with research in other areas conducted by Khoeriah (2021) on the quality of ANC services for pregnant women, which shows that in antenatal care services pregnant women feel satisfied in the aspects of reliability, responsiveness, and empathy. In addition, research conducted by Fadliani (2022) on the quality of ANC services on the satisfaction of pregnant women at the Padang Panyang Health Center also shows that the aspects of reliability, responsiveness, and empathy are good. However, there are still expectations that informants want in several aspects such as assurance and tangibles.

The assurance aspect shows that some informants already feel sufficient. This is indicated by informants who feel satisfied when health workers provide explanations about the care of pregnant women. The assurance aspect must provide comfort during pregnancy checks so that antenatal services are of higher quality and more pregnant women check their pregnancies at health services (Rahayu, Lina Dwi Puji, Dyah Fajarsari, 2015). The same thing was also found that pregnant women who conducted examinations at the Bahu Health Center were satisfied with the services of medical staff, namely the midwives were skilled in providing services and were able to answer the questions of pregnant women, which meant that the midwives had good knowledge in accordance with their field of work (Sampouw, 2018).

However, there are still some informants who say that there is still a lack of information provided clearly such as information about the correct exercises for pregnant women or the existence of pregnant women's classes. Information is an important thing to show the satisfaction of pregnant women. If the information provided to pregnant women is still lacking, it will reduce the satisfaction of pregnant women. Medical personnel, especially midwives, play an important role in providing counseling and counseling such as forming pregnant women's classes so that pregnant women gain knowledge not only about pregnancy checks, but also obtain contraceptive and postpartum information and it is hoped that the knowledge of pregnant women will increase (Agustiarini & Sundayani, 2020). So, it is advisable for health workers to increase the provision of information more clearly, both information about pregnant women's exercises or the existence of pregnant women's classes. So, informants can follow programs that can support the health of the pregnancy itself.

The tangibles aspect shows that the facilities provided are appropriate. However, there are still expectations that informants want, namely the availability of an ultrasound device because there is no ultrasound device at the Welahan I Health Center. Based on the Ministry of Health regulations, it shows that every health center must have an ultrasound device to reduce maternal mortality (Kemenkes, 2023). However, there are still many health centers that do not have an ultrasound not only based on research findings, other health centers also tend not to have an ultrasound. The absence of integrated ANC service tools related to ultrasound examination and for pregnant women is an obstacle in establishing a diagnosis and referral system for early detection of pregnancy cases at Sananwetan, Kepanjenkidul, and Sukorejo Health Center (Mikrajab & Rachmawati, 2016). This study is also in line with research (Calista et al., 2021) showing that integrated antenatal care at Tlogosari Wetan Health Center is not yet equipped with an ultrasound device to detect and screen the fetus in the mother's womb so that it can hamper antenatal care.

However, there are several health care facilities that already have ultrasound at the health center. This is shown by the Slawe Health Center, which already has an ultrasound for examining pregnant women, making it easier to conduct early detection and also as a

prevention of death (Mawarni et al., 2021). In addition, health center in Malang District also have ultrasound equipment (Dinkes Kab Malang, 2023). Based on the results of the study, the presence of ultrasound can be done early detection of the fetus so that an early referral can be made to the hospital (Kemenkes, 2023). With the presence of ultrasound equipment, it can add access to pregnant women in conducting their examinations. According to research (Sari et al., 2017), supporting facilities and infrastructure are significantly related to the interest of pregnant women to make repeat visits to the Health center. Therefore, the provision of ultrasound equipment is an important thing that needs to be done at the health center.

Other findings in this study indicate that in the aspect of reliability in addition to the reliability of midwives in providing 10 T services, there are also things that must be done and are important, namely explaining information for each activity action carried out. This can increase satisfaction so that pregnant women can show pleasure when being examined. Pregnant women feel that the information provided is not only based on information that must be done by pregnant women. However, there is also an explanation in every action taken for pregnant women who have never undergone an examination so that if the explanation given is still lacking, it will affect the mother's perception of the quality of the midwife (Kurniati, 2020). This is in line with research (Budiwan & Efendi, 2016) that patients want service providers who have high performance so as to create a sense of confidence. Reliability is very important to determine the success of midwives in improving the quality of antenatal care services so that midwives have competence in carrying out antenatal services Fitriyani (2019). Therefore, it is hoped that health workers can improve the quality of delivering explanations of each action taken so that this can increase patient satisfaction.

The responsiveness aspect is also important in increasing the satisfaction of pregnant women. This study shows that the responsiveness aspect is in accordance with the expectations of pregnant women. Informants feel that they get fast and precise service and get a good response when asking for complaints. This is in line with research (Budiwan & Efendi, 2016) that the ease of patients getting health services without having to wait too long because service providers are responsive and do not have complicated procedures.

In this study, the empathy aspect is also very important to increase the satisfaction of pregnant women. The empathy aspect can increase the motivation of pregnant women to diligently control or maintain their pregnancy. This is shown that pregnant women will feel happy and excited when given motivation. This is in line with research (Budiwan & Efendi, 2016) that says that patients need psychological encouragement where service providers become partners who understand patients. Service providers are not only required to cure patients but also to provide services with good communication. The interpersonal relationship that occurs between patients and service providers is also an important factor.

CONCLUSION

The study finding shows that the quality of service at Welahan I Health Center, Jepara in several aspects such as aspects of reliability, responsiveness, and empathy is in accordance with the expectations of pregnant women. However, there are still expectations that informants want in several aspects such as aspects of assurance and tangibles. In the aspect of assurance, informants feel that they are still lacking in providing clearer information. While in the aspect of tangibles, it shows that informants still have hopes for the presence of ultrasound equipment to make it easier for informants to check. So that for Health Center Welahan I, Jepara can improve the quality of antenatal care services in the

aspect of assurance, such as increasing the provision of information about pregnant women's classes or pregnant women's gymnastics more clearly. In addition, in the aspect of tangibles Health Center Welahan can improve infrastructure such as ultrasound equipment so as to maximize the provision of antenatal care services.

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REFERENCES

- Abbas, F., Malik, T., & Tinggi Ilmu Ekonomi AMKOP, S. (2023). Quality Of Service, Patient Safety, and Patient Trust in Patient Loyalty Student of Doctoral Program at Sekolah Tinggi Ilmu Ekonomi AMKOP, Makassar, Indonesia 2,3. *Journal of Indonesian Scholars for Social Research Copyright*, 3(1), 8-17.
- Agustiarini, A., & Sundayani, L. (2020). Pengaruh Sikap dan Perilaku Bidan Terhadap Pengetahuan Ibu Hamil Saat Pelaksanaan ANC di Wilayah Kerja Puskesmas Kuripan. *Jurnal Midwifery Update (MU)*, 2(2), 115-121. <http://jurnalmu.poltekkes-mataram.ac.id/index.php/jurnalmu>
- Aziz Ali, S., Ahmed Dero, A., Aziz Ali, S., & Bano Ali, G. (2018). Factors Affecting The Utilization Of Antenatal care Among Pregnant Women: A Literature Review. *Journal of Pregnancy and Neonatal Medicine*, 02(02). <https://doi.org/10.35841/neonatal-medicine.2.2.41-45>
- Budiwan, V., & Efendi. (2016). The Understanding of Indonesian Patients of Hospital Service Quality in Singapore. *Procedia - Social and Behavioral Sciences*, 224, 176-183. <https://doi.org/10.1016/j.sbspro.2016.05.436>
- Calista, S., Astuti, R. S., & Kristanto, D. (2021). *Analisis Daya Dukung Pelayanan Antenatal Terpadu Di Puskesmas Tlogosari Wetan Kota Semarang*. <http://fisip.undip.ac.id>
- Chemir, F., Alemseged, F., & Workneh, D. (2014). Satisfaction With Focused Antenatal care Service and Associated Factors Among Pregnant Women Attending Focused Antenatal care At Health Centers In Jimma Town, Jimma Zone, South West Ethiopia; A Facility Based Cross-Sectional Study Triangulated With Qualitative Study. *BMC Research Notes*, 7(1). <https://doi.org/10.1186/1756-0500-7-164>
- Dinkes Jateng. (2021). Profil Kesehatan Jateng 2021. In 2021.
- Dinkes Jepara. (2021). Profil Kesehatan Jepara.
- Elvira, D., Defrin, & Erwani. (2019). Studi Kualitatif Analisis Implementasi Standar Pelayanan Antenatal care 10 Terpadu Pada Ibu Hamil di Puskesmas Bungus Kota Padang Tahun 2019. *Jurnal Kesehatan Masyarakat*, 5(2), 151-172.
- Fadliani, R., & Fera, D. (2022). Hubungan Kualitas Pelayanan Antenatal care (ANC) dengan Tingkat Kepuasan Ibu Hamil di Puskesmas Padang Panyang. *Jurnal Biology Education*, 10.
- Fatkhiyah, N., & Izzatul, A. (2019). Keteraturan Kunjungan Antenatal care di Wilayah Kerja Puskesmas Slawi Kabupaten Tegal. *Ayu Izzatul / Indonesia Jurnal Kebidanan*, 3(1), 18-23.
- Hendarwan, H., Lestary, H., Friskarini, K., & Hananto, M. (2018). Kualitas Pelayanan Pemeriksaan Antenatal oleh Bidan di Puskesmas. *Buletin Penelitian Kesehatan*, 46(2), 97-108. <https://doi.org/10.22435/bpk.v46i2.307>

- Indrayani, T., & Sari, R. P. (2020). Analisis Kualitas Pelayanan Terhadap Cakupan *Antenatal care* (ANC) di Puskesmas Jatijajar Kota Depok Tahun 2019. *Jurnal Ilmu Dan Budaya*, 41(66), 7853–7868.
- Kementerian Kesehatan Republik Indonesia. (2021). *Profil Kesehatan Indonesia*.
- Kementerian Kesehatan Republik Indonesia. (2020). *Pedoman Pelayanan Antenatal Terpadu*.
- Khoeriah, Y., Dinengsih, S., & Choerunnisa, R. (2021). Analisis Kualitas Pelayanan *Antenatal care* (ANC) Terhadap Tingkat Kepuasan Ibu Hamil di Poli Kebidanan. *JKM (Jurnal Kebidanan Malahayati)*, 7(4), 620–625. <http://ejournalmalahayati.ac.id/index.php/kebidanan>
- Kurniati, C. H. (2020). Hubungan Antara Kualitas Bidan dalam Pelayanan Antenatal Care Terhadap Persepsi Ibu Hamil. *INFOKES: Jurnal Ilmiah Rekam Medis Dan Informatika Kesehatan*, 10(1), 36–40.
- Maulana, A. F. (2017). *Gambaran Kualitas Pelayanan Antenatal pada Ibu Hamil di Puskesmas Pagedangan Kabupaten Tangerang Tahun 2017*.
- Mawarni, D., Sulistyani, R., & Adi, S. (2021). Faktor-Faktor yang Mempengaruhi Pelayanan Antenatal di Daerah Perdesaan: Studi Kualitatif di Dua Puskesmas Kabupaten Trenggalek. *IKESMA*, 17(1), 6. <https://doi.org/10.19184/ikesma.v17i1.22444>
- Mikrajab, M. A., & Rachmawati, T. (2016). Analisis Kebijakan Implementasi *Antenatal care* Terpadu Puskesmas di Kota Blitar. *Buletin Penelitian Sistem Kesehatan*, 1, 41–53.
- Oktavianisya, N. (2016). Pengaruh Kualitas ANC dan Riwayat Morbiditas Maternal Terhadap Morbiditas Maternal di Kabupaten Sidoarjo. *Jurnal Kesehatan "Wiraraja Medika."*
- Oruh, S. (2021). Literatur Review: Kebijakan dan Strategi Pemberdayaan Masyarakat Dalam Menurunkan Angka Kematian Ibu dan Bayi. *Preventif: Jurnal Kesehatan Masyarakat*, 12(1), 135–148. <https://doi.org/10.22487/preventif.v12i1.297>
- Salma, Oktaviyana, C., & Nazari, N. (2021). Hubungan Kualitas Pelayanan *Antenatal care* dengan Tingkat Kepuasan Ibu Hamil di Puskesmas Kuta Alam Kota Banda Aceh. *Jurnal Ilmu Keperawatan*, 9(2).
- Sampouw, N. L. (2018). Hubungan Kualitas Pelayanan Antenatal care Dengan Kepuasan Ibu Hamil. *Jurnal Skolastik Keperawatan*, 2(4), 32.
- Sari, P. R., Arso, S. P., & Wigati, P. A. (2017). Hubungan Persepsi Ibu Hamil Tentang Mutu Pelayanan Antenatal dengan Minat Kunjungan Ulang di Puskesmas Tlogosari Kulon Kota Semarang. *Jurnal Kesehatan Masyarakat (e-Journal)*, 5(4), 2356–3346. <http://ejournal3.undip.ac.id/index.php/jkm>
- Sintiya, K. V. (2015). *Gambaran Kualitas Pelayanan ANC pada Ibu Hamil di Puskesmas Depok III Sleman Yogyakarta*.
- World Health Organization (WHO). (2017). *Angka Penyebab Kematian Ibu dan Anak*.