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Analysis Of The Role Of The Midwife In Hospital In Stunting Prevention Effort In Rsu Aulia, Jakarta Selatan

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ABSTRACT

Stunting is a problem of particular concern in Indonesia and the world. Midwives as implementers and managers of health services must be able to utilize their resources effectively and efficiently in improving the health status of mothers and children so that they can contribute to stunting prevention efforts. This study aims to analyze the role of midwives in stunting prevention efforts at Aulia General Hospital, South Jakarta. This study uses an analytical survey design with a cross sectional approach. The sample, namely midwives who work at the Aulia General Hospital, South Jakarta, amounted to 112 people. The sampling technique used was purposive sampling. The instrument uses a google form questionnaire. Bivariate analysis using chi square test. The results of the study from 112 midwives who worked at RSU Aulia, South Jakarta, obtained 72.3% of midwives performed their role well in stunting prevention efforts. Bivariate analysis obtained all variables of education (p value 0.032), motivation (p value 0.000), knowledge (p value 0.001), training (p value 0.019), health facilities (p value 0.023), and SOP guidance (p value 0.025) < 0.05 was significantly related to the role of midwives in stunting prevention efforts. It is recommended that midwives improve their professional work through education to a higher level and increase competence through training or seminars on 1000 HPK. training (p value 0.019), health facilities (p value 0.023), and SOP guidelines (p value 0.025) < 0.05 were significantly related to the role of midwives in stunting prevention efforts. It is recommended that midwives improve their professional work through education to a higher level and increase competence through training or seminars on 1000 HPK. training (p value 0.019), health facilities (p value 0.023), and SOP guidelines (p value 0.025) < 0.05 were significantly related to the role of midwives in stunting prevention efforts. It is recommended that midwives improve their professional work through education to a higher level and increase competence through training or seminars on 1000 HPK.

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1. Introduction

Fostering quality families and ensuring quality human resources are important factors for the country's development and shaping the golden generation of 2045[1]. Physical fitness, strong mental, health, and cognitive abilities are determined by nutritional status since the early stages of growth starting from the first 1000 days of life[2]. The problems that are the main concern in Indonesia are health and nutrition problems in toddlers[3]. Nutritional needs that have not been fulfilled since in the womb until the baby is born can cause various health problems, one of which is

stunting or short stature due to chronic malnutrition.[4].

The incidence of stunting in children under the age of five is the highest when compared to other forms of malnutrition. A total of 155 million (22.9%) children under the age of five are stunted worldwide, while 41 million infants (6%) are overweight, and 52 million infants (7.2%) are underweight.[5]. There are 83.6 million stunted children under the age of five in Asia, the highest percentage is from South Asia (58.7%) and the lowest is from Central Asia (0.9%)[5]. According to the United Nations Development Program (UNDP), the prevalence of stunting under the age of five in ASEAN countries is higher in Indonesia (37%) than in Malaysia (17%) and Singapore (4%). Indonesia ranks 5th with the highest burden of stunting children (27.67%) after Pakistan (45%), Congo (43%) and India (39%) and Ethiopia (38%)[3].

Based on the results of the 2015 Nutritional Status Monitoring (PSG), the prevalence of stunting in Indonesia is 29%. In 2016 the prevalence of stunting fell to 27.5% and in 2017 it increased again to 29.6%. There continued to be an increase of 30.8% in 2018. Then there was a decrease in 2019 to 27.67%[6]. The Indonesian Nutrition Status Survey (SSGI) in 2021 conducted by the Indonesian Ministry of Health shows that the stunting prevalence rate in Indonesia in 2021 is 24.4% or 5.33 million children under five. Even though its prevalence is decreasing, stunting is still considered a serious problem because the Indonesian government's target in 2024 is that the prevalence of stunting continues to fall to 14% to achieve the WHO target of below 20%.[7].

Jakarta are being carried out in earnest, as evidenced by stunting cases in South Jakarta having a lower prevalence compared to other regencies or cities. The prevalence in 2018 in South Jakarta was 0.1% short toddlers, in 2019 it was 0.3% short toddlers, and continues to increase in 2020 as much as 4.5% short toddlers. Meanwhile, in 2021 out of 46,282 children under five, there were 307 short toddlers and 139 very short toddlers[7].

Efforts to accelerate stunting prevention are still constrained by limited capacity and quality of program implementation and the lack of advocacy, campaigns, and dissemination related to stunting.[3]. One way to prevent stunting is to fulfill nutrition and health services to pregnant women. This requires the need for a maximum role of health workers, including midwives. Factors that can increase the role of midwives are the level of education, motivation, knowledge, training, health facilities, and standard operating procedures (SOPs).[8].

Literature Review, StuntingBeing a growth failure problem experienced by infants under five years of age who are malnourished from the womb until the baby is born, stunting itself begins to appear when the baby is two years old.[7]. In accordance with what was stated by Schmidt that stunting is a problem of malnutrition with a long enough period so that height growth disorders appear in children who are lower or shorter (short) than the standard age.[9].

Based on Presidential Regulation Number 42 of 2013 concerning the National Movement for the Acceleration of Nutrition Improvement with a focus on the first 1000 days of life (HPK), which puts forward joint efforts between the government and the community through raising participation and concern to improve the lives of Indonesian children in the future. In reducing the prevalence of stunting through the role of midwives, specific nutrition interventions and sensitive nutrition interventions are carried out[6].

Midwives as professionals who have obtained permission to carry out midwifery practice who have duties and obligations as partners of women to provide support, care, and advice during the pre-pregnancy, pregnancy, maternity, postpartum, and intermediate periods as well as facilitate and lead normal deliveries on their own responsibility. take responsibility for themselves and provide care for mother and baby[10]. The higher the level of education of the midwife in the scientific field, the higher the understanding and competence of the scientific field[11]. Midwife education has an effect on the role of midwives and is related to the attitude of acceptance of new knowledge and competencies. Likewise, the higher the education level of the midwife, the wiser in absorbing knowledge, including attitudes in preventing stunting[12].

Midwives who have high motivation will work well, have a sense of responsibility for the tasks given and always try to produce achievements at work[13]. The more dominant the influence of midwives' motivation on education about stunting, the better their role in stunting prevention.

Knowledge is a result of knowing from humans on the combination or cooperation between a subject who knows and an object that is known[14]. There is a relationship between knowledge and the role of the midwife, the better the knowledge, the better the performance[15]. Likewise with pKnowledge of a good midwife will affect the mindset and behavior in this case is an effort to prevent stunting.

Training is a learning process that involves acquiring skills, concepts, rules, or attitudes to improve performance[16]. Training has a great influence on performance. Health training is also included in the form of maintenance or development of the performance of health workers. The more frequent training is held to develop the skills of health workers, the more positive results will be for health institutions and health workers[17].

Health facilities or health service facilities are tools or places used to carry out health service efforts, both in terms of promotive, preventive, curative, and also rehabilitative.[18]. There is a relationship between the availability of facilities and facilities to performance, where the availability of adequate facilities and facilities will improve performance[19].

Standard operating procedures(SOP) is a set of standardized written instructions regarding the various processes of organizing organizational activities, how and when to do it, where and by whom to do it.[20]. The application of standard operating procedures (SOPs) has a relationship with the implementation of work carried out in a neat, orderly and systematic manner from beginning to end, so that the targets to be achieved are realized to the fullest.[21].

2. Method

The research design in this study was an analytic survey with a cross sectional approach. The population of this study were all midwives who worked at RSU Aulia, South Jakarta. While the sample in this study were 112 midwives who worked at Aulia General Hospital, South Jakarta. The sampling technique in this study used purposive sampling. The instrument in this study used a google form questionnaire. Univariate data analysis with presentation formula and bivariate using SPSS software with Chi-square test with 95% confidence degree ($\alpha=0.05$).

3. Result and Discussion

3.1 Univariate Analysis Results

Table 1

Frequency Distribution of Research Variables

| Variable | Amount | % |
|----------------------------|--------|-------|
| Midwife's Role | | |
| Well | 81 | 72.3% |
| Not enough | 31 | 27.7% |
| Education | | |
| DIV/SI | 47 | 42% |
| DIII | 65 | 58% |
| Motivation | | |
| Tall | 72 | 64.3% |
| Low | 40 | 35.7% |
| Knowledge | | |
| Well | 88 | 78.6% |
| Not enough | 24 | 21.4% |
| Training | | |
| Follow | 37 | 33% |
| Do not follow | 75 | 67% |
| Facility | | |
| Complete | 91 | 81.3% |
| Less complete | 21 | 18.8% |
| Midwife's Guide/SOP | | |
| Complete | 85 | 75.9% |
| Incomplete | 27 | 24.1% |

Source of data: processed by researchers

Based on table 1 above, there were 112 midwives working at RSU Aulia, South Jakarta, as many as 81 midwives (72.3%) showed a good role in stunting prevention efforts. Of the 112 midwives who work at RSU Aulia, South Jakarta, as many as 65 midwives (58%) have D III education, 72 midwives (64.3%) have high motivation, 88 midwives (78.6%) have good knowledge, 75 midwives (67 %) had not attended training, 91 midwives (81.3%) had complete facilities, and 85 midwives (75.9%) had complete SOPs.

3.2 Bivariate Analysis Results

Table 2
The Relationship of Independent Variables with the Role of
Midwives in Stunting Prevention Efforts

| Variable | P value | OR (95%CI) |
|------------|---------|------------|
| Education | 0.032 | 2,670 |
| Motivation | 0.000 | 8,556 |
| Knowledge | 0.001 | 4,596 |
| Training | 0.019 | 3,396 |
| Facility | 0.023 | 3,030 |
| SOUP | 0.025 | 2,779 |

Based on Table 2 above, it can be seen that:

- There is a significant relationship between education and the role of midwives in stunting prevention efforts, with a p value of $0.032 < (0.05)$.
- There is a significant relationship between motivation and the role of midwives in stunting prevention efforts, with a p value of $0.000 < (0.05)$.
- There is a significant relationship between knowledge and the role of midwives in stunting prevention efforts, with a p value of $0.001 < (0.05)$.
- There is a significant relationship between training and the role of midwives in stunting prevention efforts, with a p value of $0.019 < (0.05)$.
- There is a significant relationship between facilities and the role of midwives in stunting prevention efforts, with a p value of $0.023 < (0.05)$.
- There is a significant relationship between guidelines/SOPs and the role of midwives in stunting prevention efforts, with a p value of $0.025 < (0.05)$.

3.3 Discussion

a. The Relationship between Education and the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta, have a Diploma in Midwifery education. There is a significant relationship between the level of education of midwives and the role of midwives in stunting prevention efforts. Midwives with D IV/S1 education have three times better chance of carrying out their roles than those with D III education.

The results of this study are in accordance with the research of Telaumbanua and Absah stating that there is a significant influence of education on performance through the competence of midwives in the working area of UPTD Puskesmas Gunungsitoli District[12]. The level of education affects the midwife in her role. The relationship between the role of midwives as educators can provide optimal health education and counseling to individuals, families, groups, and communities about overcoming health problems, especially those related to maternal and child health.[22].

Most of the midwives who work at RSU Aulia South Jakarta are still educated at DIII, scientifically all midwives at RSU Aulia South Jakarta already have education in accordance with the Regulation of the Minister of Health No. 1464/Menkes/PER/X/2010 concerning Permits and Implementation of Midwifery Practices, to be able to practice as a midwife, a minimum education of D III Midwifery. Well-educated midwives play a role in determining their ability to provide input, monitoring, and evaluating comprehensive aspects of maternal and child health.

b. The Relationship between Motivation and the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta are highly motivated. There is a significant relationship between motivation and the role of midwives in stunting prevention efforts. Midwives who are highly motivated have 9 times better chance of carrying out their role in preventing edits than those with low motivation. The results of this study are in accordance with the research of Mariyana and Kusyogo which states that the motivation of the village midwives is in the good category and there is a significant relationship between motivation and the performance of village midwives in poskesdes services.[23].

Motivation is the most dominant factor influencing the performance of midwives. Motivation as a driver for midwives in carrying out their roles can be seen from the willingness and ability of midwives to adapt to problems and provide health services in accordance with their duties and

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functions. The midwife must be a motivator who provides psychological motivational support since the pregnant woman first came to the midwife.[24]. Midwives are the spearhead of health development that is directly related to mothers as a supporting factor for the success of the goals in the 1000 HPK program[25]. The role of the midwife as a motivator must be able to communicate and change behavior that encourages social change related to the health of pregnant women and their babies[26].

Most of the midwives at RSU Aulia, South Jakarta, have high motivation and are very important for their role because motivation can encourage work enthusiasm, so they are willing to work hard by providing all the knowledge and abilities to realize stunting prevention efforts in the national movement program in saving 1000 HPK in South Jakarta.

c. Relationship between Knowledge and the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta have good knowledge. There is a significant relationship between knowledge and the role of midwives in stunting prevention efforts. Midwives who have good knowledge have a 6 times better chance of carrying out their roles compared to those who have less knowledge. The results of this study are in accordance with Lasut and Donsu's research stating that there is a relationship between knowledge and the performance of midwives in the application of the 10 T standard of antenatal care. Midwives who have good knowledge will show good performance.[27]. The better the knowledge possessed by midwives, the more expertise they have and the higher the performance that will be shown[12].

Without good knowledge working as a midwife profession can be said to be a tough job. Most of the midwives at RSU Aulia, South Jakarta have good knowledge because they are based on a good education. Midwives must continue to improve their knowledge in order to optimize health services carried out in the effort to prevent stunting in South Jakarta.

d. The Relationship between Training and the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta have not attended training. There is a significant relationship between training and the role of midwives in stunting prevention efforts. Midwives who have attended training have three times better chance of carrying out their roles than those who have not attended training. The results of this study are in accordance with the research of Risnah et al., which states that cross-professional collaboration training in handling malnutrition has an effect on changes in knowledge of health workers. The training that midwives participate in will increase their knowledge and improve their performance[28].

The implementation of midwife training can be carried out in the workplace or outside the workplace both formally and informally so that midwives have mastery of various skills and work implementation techniques according to the needs of midwifery services.[29]. In accordance with the research, Setiawati and Ani stated that the training carried out had a significant effect on the knowledge and skills of midwives[30]. The role of midwives in implementing stunting prevention is as educators and drivers of women's empowerment[31]. The role of midwives as educators has the duty to provide health education to women and the community so that unhealthy knowledge, attitudes and behaviors can change for the better.[32].

Most of the midwives at RSU Aulia, South Jakarta, have not attended training. Whereas training is part of a very important characteristic to optimize the role of midwives in stunting prevention efforts. Training for midwives is needed to improve competence in good communication towards health service targets, especially efforts to prevent stunting in South Jakarta.

e. Relationship of Facilities to the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta have complete health facilities. There is a significant relationship between health facilities and the role of midwives in stunting prevention efforts. Midwives who have complete health facilities have complete health facilities are three times more likely to carry out their roles than those with less complete health facilities. The performance of midwives in the village is related to work facilities. Most of the facilities are good but there are also some village midwives with less facilities and this causes the midwife's performance to be less good[33].

Health facilities are one of the supporting tools for midwives in carrying out their roles. Good

facilities are any conditions or facilities and infrastructure that are fairly complete to use so that they can facilitate the work process[10]. Without good health facilities, midwives cannot work optimally. Midwives who are supported by the availability of adequate facilities have a greater percentage in carrying out their roles[34]. The role of midwives in stunting prevention efforts is as a facilitator through providing information, socializing, facilitating, and mobilizing families to support the fulfillment of the welfare of mothers and their toddlers.[35]. The role of the midwife as a facilitator is to provide input, monitoring and evaluation in all aspects of health[36].

Most of the midwives at Aulia General Hospital in South Jakarta have complete health facilities and support the role of midwives in stunting prevention efforts. Midwives acting as facilitators need to make the most of the available facilities. Health facilities must still be improved to support the role of midwives to take actions to prevent stunting in South Jakarta.

f. Relationship between SOPs and the Role of Midwives in Stunting Prevention Efforts

Based on the results of the analysis, most of the midwives who work at RSU Aulia, South Jakarta have a complete SOP. There is a significant relationship between SOPs and the role of midwives in stunting prevention efforts. Midwives whose SOPs are complete have three times better chance of carrying out their roles than those whose SOPs are incomplete.

The results of this study are in accordance with the research of Sumiyati et al., which states that there is an effect of implementing work procedures on improving the performance of village midwives in midwifery services.[37]. Standard operating procedures (SOPs) can create standard performance measures that will provide the apparatus with concrete improvements in performance and help evaluate the efforts that have been made. The SOP set at the hospital aims to provide patient safety to get optimal health services and services[38].

Standard operating procedures(SOP) for the midwife profession is a guideline that must be used by the midwife as a guide in carrying out her profession properly. Professional standards, especially for midwives, are useful in applying the level of performance norms needed to achieve the desired results and are functioned to protect the public or patients from irresponsible services and protect midwives as service providers.[10].

Midwives can improve health services for mothers and children by paying attention to quality service aspects so that they can contribute to stunting prevention[39]. Midwives play an important role in health services who are required to have knowledge, expertise and skills that determine competence in stunting prevention efforts. Midwives are expected to be able to support efforts to improve the health status of pregnant women and children according to the quality of health services[40].

Standard operating procedures(SOP) is a guideline or reference for midwives to carry out work tasks in accordance with work procedures, procedures, and systems that they follow. Most of the midwives at RSU Aulia, South Jakarta have complete SOPs. With a complete SOP, the role of the midwife can run well and various forms of deviation can be avoided.

4. Conclusion

Based on the results of the analysis, 112 midwives at RSU Aulia, South Jakarta, most of the midwives carried out their roles well, were highly motivated, well-informed, supported by complete health facilities, and had complete SOPs. However, most of the midwives at RSU Aulia, South Jakarta, have D III education and have not attended training/seminars on 1000 HPK/stunting in the last 1 year. It is recommended to improve work professionals through education to a higher level and increase competence through 1000 HPK training or seminars.

References

- [1] S. Hadi,Achievements, Challenges and Opportunities for Implementing the National Strategy for the Acceleration of Stunting Prevention in 2018 - 2024. Jakarta: Secretariat of the Vice President of the Republic of Indonesia, 2021.
- [2] A. Graceet al., Textbook of Nutrition for the First 1000 Days of Life. Yogyakarta: CV Mine, 2018.
- [3] Khairani,Stunting Situation in Indonesia. Jakarta: Health Information Data Center of the Ministry of Health of the Republic of Indonesia, 2020.
- [4] E. Satriawan,National Strategy for Accelerating Stunting Prevention 2018-2024. Jakarta: National Team for the Acceleration of Poverty Reduction, 2018.

- [5] WHO, Levels and Trends In Child Malnutrition. New Zealand: WHO and the World Bank Group, 2018.
- [6] Ministry of Health, Indonesia Health Profile 2020. Jakarta: Ministry of Health of the Republic of Indonesia, 2020.
- [7] Ministry of Health, Results of the Study on Nutritional Status of Indonesia at the National, Provincial, Regency/City levels in 2021. Jakarta: Ministry of Health of the Republic of Indonesia, 2021.
- [8] T. Indrayani and M. Syafar, Health Promotion for Midwives. Serang City: CV. Aa Rizky, 2020.
- [9] I. Kuswanti and SK Azzahra, "The Relationship of Mother's Knowledge of Fulfillment of Balanced Nutrition with Stunting Prevention Behavior in Toddlers," *J. Midwifery Indonesia*, vol. 13, no. 1, pp. 15–22, 2022.
- [10] M. Aniet al., Introduction to Midwifery. Medan: Our Writing Foundation, 2021.
- [11] SS Saadah, "Study of Socio-Economic Conditions and Education Levels of Coastal Communities in Bintaro Village, Ampenan District, Mataram City," Mataram, 2020.
- [12] AS Telaumbanua and Y. Absah, "The Influence of Education and Training on Performance Through Midwife Competence: A Quantitative Study," *J. Researcher. Education, Psychology. and Health.*, vol. 2, no. 2, pp. 142–147, 2021.
- [13] Z. Mustika and N. Syamsuddin, "The Influence of Work Motivation and Job Satisfaction on Teacher Performance at Public Elementary Schools in Banda Aceh," *J. Educator.*, vol. 11, no. 2, pp. 39–53, 2022.
- [14] M. Pakpahanet al., Health Promotion and Health Behavior. Medan: Our Writing Foundation, 2021.
- [15] L. Rantalaen, V. Pratiwi, and NM Rosiyana, "The Relationship of Knowledge with Midwife Compliance in the Use of Partographs in the Maternity Room at Undata Hospital Palu," *J. Smart Midwife*, vol. 2, no. 2, pp. 59–64, 2019.
- [16] DP Dewi and Harjoyo, Human Resource Management. South Tangerang: UNPAM Press, 2019.
- [17] A. Yuliani and U. Mansur, "The Role of Training in Improving HR Performance During COVID 19: Literature Review," *SENMABIS*, vol. 1, no. 1, pp. 1–8, 2022.
- [18] WC Rachmawati, Health Promotion and Behavioral Science. Malang: Wineka Media, 2019.
- [19] AG Yani, "The Influence of Facilities and Work Environment on Employee Performance at Bank Syariah Indonesia KCP Muara Bulian," Jambi, 2021.
- [20] H. Santono, "Preparation of Standard Operating Procedures (SOP) at the Bengkayang Regency Education Office in the Context of Improving the Quality of Organizational Management," *J. Educator. and Kebud.*, vol. 10, no. 3, pp. 263–268, 2020.
- [21] A. Rospianti, A. Kadir, and BB Suriyani, "Analysis of the Implementation of Standard Operating Procedures for Public Service Passport Making (Study at the Immigration Office Class I TPI Kendari)," *J. Adm. State, Politics. Government. and Hubs. int.*, vol. 5, no. 3, pp. 38–48, 2019.
- [22] SR Handayani and S. Mulyati, Midwifery Documentation. Jakarta: Ministry of Health of the Republic of Indonesia, 2017.
- [23] W. Mariyana and Kusyogo, "The Relationship between Motivation and Workload on the Performance of Village Midwives in Village Health Post Services (Poskesdes) in the Work Area of the Boja Kendal Health Center," *J. Obstetrics*, vol. 8, no. 1, pp. 1–5, 2021.
- [24] ER Astuti and LL Sari, "The Role of Midwives as Motivators in Health Promotion for Pregnant Women," *J. Mother and Child Care*, vol. 5, no. 2, pp. 19–24, 2020.
- [25] N. Nefy, NI Lipoeto, and Edison, "Implementation of the First 1000 Days of Life Movement in Pasaman Regency 2017," *Indonesian Nutrition Media*, vol. 14, no. 2, pp. 186–196, 2019.
- [26] SP Devi, F. Anshari, and RAW Kaligis, "The Role of Midwives as AgentsChanges in Tele-CTG Socialization for Maternal Health," *J. Strateg. Commun.*, vol. 12, no. 2, pp. 108–121, 2022.
- [27] FC Lasut and A. Donsu, "The Relationship of Knowledge with Midwives' Performance in the Application of 10 T Antenatal Care Service Standards," *J. Ilm. Midwife*, vol. 6, no. 1, pp. 25–30, 2019.
- [28] Risnah, Rosmah, Mustamine, and I. Sofingi, "The Effect of Training on Knowledge about Malnutrition and Interprofessional Collaboration of Health Center Officers," *J. Health.*, vol. 11, no. 1, pp. 61–71, 2018.
- [29] A. Triana, "Dominant Factors in the Performance of Midwives in Providing Sustainable Midwifery Services at PMB," *J. Malahayati Midwifery*, vol. 7, no. 3, pp. 398–403, 2021.

- [30] Y. Setiawati and N. Ani, "The Relationship between APN Training and Midwives Knowledge and Skills in Childbirth Aid,"*J. Health.*, vol. 11, no. 1, pp. 74–79, 2019.
- [31] F. Handayani, "Strengthening the Role of Midwives in Empowering Women to Support the Sustainable Development Goal's Program,"*J. Ilm. Midwife*, vol. 2, no. 2, pp. 13–18, 2017.
- [32] SR Handayani and S. Mulyati, *Midwifery Documentation*. Jakarta: Ministry of Health of the Republic of Indonesia, 2017.
- [33] DM Riskiah and N. Qamarya, "The Relationship of Work Facilities with the Performance of Village Midwives in Antenatal Care Services Referring to Midwifery Care Standards,"*J. Midwifery and Health.*, vol. 5, no. 2, pp. 1–4, 2018.
- [34] Widyawati, "Performance of Midwives in Providing Antenatal Care Services and Influencing Factors,"*J. Health Sciences. Masy.*, vol. 7, no. 1, pp. 15–24, 2018.
- [35] P. Andanawarih and I. Baroroh, "The Role of Midwives as Facilitators for the Implementation of the Delivery Planning and Complications Prevention (P4K) Program in the District Health Center Pekalongan,"*J. CYCLUS*, vol. 7, no. 1, pp. 252–256, 2018.
- [36] H. Wulandari and I. Kusumastuti, "Role of Midwives, Role of Cadres, Family Support and Mother's Motivation on Maternal Behavior in Stunting Prevention,"*J. Ilm. health.*, vol. 19, no. 2, pp. 73–80, 2020.
- [37] L. Sumiatiet al., "The Effect of Implementing Work Procedures on Improving the Performance of Village Midwives in Midwifery Services in Sukabumi District (An Intervention Study of Village Midwife Work Procedures)," *IJEMC*, vol. 1, no. 32, p. 40, 1AD.
- [38] AR Taufiq, "Implementation of Standard Operating Procedures (SOP) and Hospital Performance Accountability," *Communal Profit. science. Account. and Taxes.*, vol. 12, no. 1, pp. 56–66, 2019.
- [39] F. Hindratni, Y. Sartika, and SIP Sari, *Midwifery Module Role of Posyandu in Stunting Prevention*. Riau: Natika Pekanbaru, 2021.
- [40] SL Ningsih, AS Widanti, and S. Sawandi, "The Role of Midwives in the Implementation of Minister of Health Regulation Number 53 of 2014 concerning Neonatal Health Services for Newborns at Kaleroang Health Center, Central Sulawesi,"*J. Huk. health.*, vol. 4, no. 1, pp. 73–94, 2018.