

Analysis of Factors Influencing the Behavior of Mothers in Choosing Childbirth Helpers During the Covid-19 Pandemic in the Region Work of the Gunung Tua Health Center in 2021

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ABSTRACT

The current situation of the Covid-19 pandemic in Indonesia has also greatly affected the access of pregnant women to health services. This study aimed to analyze the factors that influence the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. This research is a mixed method research with the Researcx explanatory design. The research was conducted in the working area of the Gunung Tua Health Center in October-November 2021. There were 54 samples and 15 informants, namely those who gave birth in August - September 2021. Quantitative data analysis was carried out with Chi-square test and logistic regression test. While qualitative analysis is carried out with interactive analysis. The univariate analysis was that of 54 respondents, most of them were aged 36-45 years, namely 21 (38.9%) respondents, had a high school education level of 30 (55.6%) respondents, had an IRT job, which was 29 (53.7%) respondents. Bivariate results show that knowledge ($p=0.040$), attitude ($p=0.006$), trust ($p=0.000$), availability of access ($p=0.000$), family support ($p=0.000$), health worker information ($p=0.000$) affect the mother's behavior in choosing a birth aid during the Covid-19 pandemic. The most influential factor is the availability of access. Conclusion : A safe maternity place during the covid 19 pandemic is home, The maternal childbirth ratio is second and third, mothers feel worried about giving birth during the pandemic and the way for mothers to think positively is to encourage themselves, get closer to god by praying diligently. It is recommended that pregnant women can increase their knowledge in choosing childbirth helpers by actively following counseling carried out by health workers.

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INTRODUCTION

Maternal Mortality Rate (MMR) is one of the indicators of health degrees. The problem of maternal death and pain in Indonesia is still a big problem, so maternal health services are a top priority in health development in Indonesia.

Based on data from *World Health Organization* (WHO) in 2018, it is known that, in 2015, around 289,000 women in the world died due to unsafe childbirth. In 2016, about 303,000 women died from pregnancy problems and unsafe childbirth. Almost all of these deaths occurred in underdeveloped and developing countries, which was 99% (WHO, 2018).

WHO also noted that the MMR in Indonesia is still high compared to other ASEAN countries. When compared to Singapore and Malaysia, the number of maternal mortality in Indonesia is still very large. Singapore in 2015 had an MMR of 7 (seven) births per 100 thousand, and Malaysia at 24 (twenty empat) per 100 thousand. The number of maternal deaths dropped from 33,278 in 2015 to 32,007 in 2016, and in 2017 in the first trimester there were 10,294 cases. Similarly, the maternal mortality rate fell in Indonesia from 4,999 in 2015 to 4,912 in 2016 and in 2017 as many as 1712 cases (RI KK, 2018).

Factors causing pregnancy and childbirth complications are caused by determinant variable factors between including the health status of pregnant women, reproductive status, access to health services and maternal behavior in using health services, while determinants far include the status of mothers in the family and society, family status in society and community status.

Based on *Risikesdas* Data from 1990-2020, nationally the percentage of childbirth assisted by trained health workers increased from 40.7% in 1990, increased to 41.6% in 2007, again increased in 2010, namely 56.8% and continued to increase to 70.4% in 2013, and in 2018 it increased to reach 79.3% but in 2020 it again experienced a decline of only 60, 31 %. Similarly, the number of deliveries in health facilities increased from 55.4 percent in 2010 to 66.7 percent in 2013 and in 2019 the percentage of childbirth in health care facilities (PF) reached 81.18% of the target of 87% or the percentage of performance achievement of 93.31%, while in 2020 it experienced a drastic decrease to 81.18% (Pusdatin, 2018).

However, the number of births assisted by herbalists/families and without help in some provinces is still high. Nationally, the rate of childbirth by herbalists in 2018 was 10.9%, family/other 3.0% and without help 1.1%, in 2019 it was 11.2% and without help was 1.1%, while in 2020 it increased to 3.6%.

One of the areas in the health work area of the North Sumatra Provincial Office that has a high MMR is the North Padang Oldas Regency. This area is an area that contributes to maternal deaths in North Sumatra with the number of maternal deaths reaching 26 cases. Padang Lamaas Utara Regency has 1 Regional General Hospital, 3 Maternity Clinics and 17 health centers that provide maternal and child health services and of the 17 Puskesmas, Gunung Tua Health Center has the highest MMR mortality rate, namely 7 people consisting of 4 postpartum mothers, 2 maternity mothers and 1 pregnant woman, of these seven people, 2 of them have been confirmed with *Covid-19*. Therefore, in this study, researchers are interested in conducting research at the Gunung Tua Health Center (Mujiati, 2018).

The number of maternity mothers at the Gunung Tua Clinic in 2018-2021 is known that the number of maternity mothers at the Harapan bunda clinic in 2018 reached 231 people, and increased in 2019, namely 244 people, but since the *Covid-19* pandemic in 2020 the number of maternity mothers has decreased drastically and only reached 207 people and in 2021 per June reached 149 people. At the Saima Midwife clinic in 2018 it reached 93 people, and increased in 2019 by 97 people, but since the *Covid-19* pandemic in 2020 the number of maternity mothers has decreased and only reached 56 people and in 2021 per June reached 31 people. At the Sidabalok Midwife clinic in 2018 it reached 81 people, and decreased in 2019 by 69 people, in 2020 the number of maternity mothers only reached 23 people and in 2021 per June only reached 17 people.

Based on researchers' investigations with several health workers at the Gunung Tua Health Center, it is known that the Puskesmas has carried out health efforts for maternity mothers. Childbirth assistance is carried out from the time I to the iv time of delivery. The achievement of maternal health efforts is measured through indicators of the percentage of childbirth assisted by trained health workers (Pn coverage). This indicator shows the level of ability of puskesmas to

provide quality delivery services that are assisted by trained health workers. However, mothers are still found who give birth with the help of people who are not from medical personnel.

Traditional birth attendants as unsafe birth attendants usually cause many problems, including high maternal and perinatal mortality and morbidity. Unsafe delivery assistance can result in fetal death in utero, uterine rupture, postpartum hemorrhage, severe infection, asphyxia and birth trauma. This will be exacerbated if the dukun beranak is not trained, who generally provide assistance without paying attention to the three cleans, namely: cleaning the tools, cleaning the place, and cleaning the helper, as well as carrying out treatment that still uses plants (Kemenkes RI, 2018).

If there is a mother who is going to give birth but has an income below the UMP, then you can use BPJS Kesehatan. BPJS Kesehatan will guarantee all types of childbirth, both normal (both with difficulties and without difficulties) and caesarean, including services for newborns and their mothers. However, if the baby needs special services or resources, it is regulated in the Regulation of the Director of Health Service Insurance Number 3 concerning Guarantee of Delivery Services with Healthy Birth Babies, health facilities can collect claims outside the delivery package. However, it only applies to the birth of the first child and the second child, then for the birth of the third child and so on, it is no longer covered by BPJS. And the last is the information of health workers, how a health worker gives an understanding of the helper of safe and unsafe childbirth, as well as informs the risk of unsafe delivery (Sumaryanto, 2014).

Based on the aforementioned exposure, researchers are interested in analyzing in depth the behavior of mothers in choosing childbirth helpers by conducting a study entitled "Analysis of Factors that affect maternal behavior in choosing childbirth helpers during the *Covid-19* pandemic in the work area of the Gunung Tua Health Center in 2021".

RESEARCH METHOD

This research is *research explanatory* research, which uses a *mix method* research, which is a research approach that combines or associates quantitative and then qualitative forms. This approach involves philosophical assumptions, the application of qualitative and quantitative approaches, and the *mixing* of the two approaches in one study. This approach is more complex than simply collecting and analyzing two types of data; it also involves the function of the two research approaches collectively so that the strength of this research as a whole. This study aims to analyze the behavior of mothers in choosing childbirth helpers during the *Covid-19* pandemic (Walyani, 2017).

This research was conducted in the working area of the Gunung Tua Health Center in 2021. The selection of the study site was based on considerations because it found unsafe childbirth in the region. This research was carried out from October to November 2021.

Population is a whole subject or object that is the focus of the study by paying attention to several characteristics that are in accordance with the research being carried out. The population in this study was all puerperal mothers in the work area of the Gunung Tua Health Center as many as 54 people who gave birth in October-November 2021 (Lawrwnce, 2017). This study uses the total population formula because in sampling, the number must be representative so that the results of the study can be generalized and the calculation does not require a table of the number of samples, but can be done with so the samples in this study are all puerperal mothers, namely as many as 54 puskesmas gunung tua work area.

The data analysis used in this study is univariate, bivariate, and multivariate analysis. Univariate analysis describes the frequency distribution of each of the free variables and bound variables, so as to get a picture of the research variables. This analysis aims to see the relationship between dependent variables and independent variables. The test used in this bivariate analysis is the *chi-square* test using a 95% degree of confidence. The *chi-Square* test can be used to see the influence. In this study, for independent variables, there were five *variables of numeric / continuous* type, while the dependent variables were categorical types. Based on this, the right multivariate analysis to analyze the data is to use a *logistic regression* test (Sumaryanto,201).

RESULT AND DISCUSSION

Result

Table 1. Distribution Of Respondents In The Working Area Of The Gunung Tua Health Center In 2021

No.	Characteristic	f	%
1	Age Group		
	26-35 Years	14	25,9
	36-45 Years	21	38,9
2	Education Level		
	Junior	13	24,1
	Sma	30	55,6
3	Work		
	IRT	29	53,7
	Farmer	14	25,9
	Civil servants	11	20,4
	Sum	54	100

Table 1 above shows that of the 54 respondents, most of the respondents were aged 36-45 years, namely 21 (38.9%) respondents, while the other respondents were aged 26-35 years as many as 14 (25.9%), aged 46-55 years as many as 19 (35.2%). Of the 54 respondents, it was known that most respondents had a high school education level of 30 (55.6%) respondents, other respondents had a junior high school education level of 13 (24.1%), and respondents who had a pt education level of 11 (20.4%). Of the 54 respondents, it was known that most of the respondents had IRT jobs, namely 29 (53.7%) respondents, 14 other respondents had farmer jobs (25.9%), and 11 (20.4%) respondents had civil servant jobs.

Table 2. Distribution Of Knowledge In The Working Area Of The Gunung Tua Health Center In 2021

Characteristic	f	%
Knowledge		
Less	33	61,1
Good	21	38,9
Attitude		
Negative	28	51,9
Positive	26	48,1
Belief		
Negative	33	61,1
Positive	21	38,9
Access Availability		
Not available	31	57,4
Available	23	42,6
Family Support		
Negative	34	63,0
Positive	20	37,0
Healthcare Officer Information		
Not available	30	55,6
Available	24	44,4
Childbirth Helper		
Insecure	28	51,9
Safe	26	48,1
Sum	54	100

Based on table 2 above, it is known that out of 54 respondents, most of the respondents have less knowledge, namely 33 (61.1%) respondents, while other respondents have good knowledge,

namely 21 (38.9%). Of the 54 respondents, most of the respondents had a negative attitude as many as 28 (51.9%) respondents, while the other respondents had a positive attitude as many as 26 (48.1%) respondents. Of the 54 respondents, most of the respondents had negative beliefs, namely 33 (61.1%) respondents, while other respondents had positive beliefs, namely 21 (38.9%) respondents. Of the 54 respondents, most of the respondents stated that there was no access, namely 31 (57.4%) respondents, while the other respondents stated that there was 23 (42.6%) respondents. Of the 54 respondents, most of the respondents had negative family support as many as 34 (63.0%) respondents, while other respondents had positive family support as many as 20 (37.0%) respondents. Of the 54 respondents, most of the respondents stated that there was no health information available, as many as 30 (55.6%) respondents, while the respondents stated that there were 24 (44.4%) respondents. Of the 54 respondents, most of the respondents had unsafe birth attendants as many as 28 (51.9%) respondents, while the other respondents had safe birth attendants as many as 26 (48.1%) respondents.

Table 3. The Influence of Knowledge, Attitudes, Trust, Availability of Access, Family Support, Officer Information on Mothers' Behavior in Choosing Childbirth Helpers During the *Covid-19* Pandemic in the Gunung Tua Health Center Work Area in 2021

Variable	Exclusive Breastfeeding				Sum		P Value
	Not done		Not done		f	%	
	f	%	f	%			
Belief							
Negative	24	44,4	9	16,7	33	61,1	0,000
Positive	4	7,5	17	31,5	21	38,9	
Access Availability							
Not Available	25	46,3	6	11,1	31	57,4	0,000
Available	3	5,6	20	37,0	23	42,6	
Family Support							
Negative	26	48,2	8	14,8	34	63,0	0,000
Positive	2	3,7	18	33,3	20	37,0	
Officer Information							
Not Available	24	44,4	6	11,1	30	55,6	0,000
Available	4	7,5	20	37,0	24	44,4	
Total	28	51,9	26	48,1	54	100	

Of the 54 respondents studied, most respondents had negative beliefs as many as 33 (61.1%) respondents. There were 24 (44.4%) respondents having negative trust and unsafe childbirth, as many as 9 (16.7%) respondents had negative trust and safe childbirth. Based on the calculation results above, it is known that the results of the statistical test obtained a *p significance* value of $0.000 < 0.05$. So it can be concluded that there is an influence of trust on the behavior of mothers in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021.

Of the 54 respondents studied, most respondents stated that access was not available as many as 31 (57.4%) respondents. There were 25 (46.3%) stating that access was not available and childbirth was not safe, as many as 6 (11.1%) respondents stated that there was no access and safe delivery was available. Based on the calculation results above, it is known that the results of the statistical test obtained a *p significance* value of $0.000 < 0.05$. So it can be concluded that there is an influence on the availability of access to maternal behavior in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021.

Of the 54 respondents studied, most respondents had negative family support as many as 34 (63.0%) respondents. There were 26 (48.2%) respondents having negative family support and unsafe childbirth, as many as 8 (14.8%) respondents had negative family support and safe delivery. Based on the calculation results above, it is known that the results of the statistical test obtained a *p*

significancy value of $0.000 < 0.05$. So it can be concluded that there is an influence of family support on the behavior of mothers in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021.

Of the 54 respondents studied, most respondents had no health worker information available as many as 30 (55.6%) respondents. There were 24 (44.4%) respondents who did not have information on health workers and unsafe childbirth, as many as 6 (11.1%) respondents were available information on health workers and safe delivery. Based on the calculation results above, it is known that the results of the statistical test obtained a *p significancy* value of $0.000 < 0.05$. So it can be concluded that there is an influence of health workers' information on maternal behavior in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021.

Table 4.

Selection of Variables That Are Model Candidates In Multiple Linear Regression Tests Based On Bivariate Analysis

Variable	p value	Information
Belief	0,000	Candidate
Availability of access	0,000	Candidate
Family support	0,000	Candidate
Health worker information	0,000	Candidate

Based on the table above, it can be seen that all variables, namely six variables, are candidate models in the logistic regression test where *the p value* < 0.25 . The results of the logistic regression analysis can be seen in the following table.

Table 5. Results of the First Stage of Logistic Regression Analysis

Variable	B	p value	Exp(B)OR	95%CI for Exp(B)
Belief	1,339	0,242	3,815	0,406-35,878
Availability of access	2,740	0,038	15,481	1,167-205,305
Family support	3,233	0,012	25,358	2,054-313,038
Health worker information	1,086	0,406	2,962	0,228-38,456

Based on the table above, it can be seen that there are three multiple linear regression analyses that are included in the analysis to see which variables are more dominant in affecting maternal behavior in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021. The results of the final stage multiple linear regression analysis can be seen in the following table: Old Mountain in 2021. The results of the final stage multiple linear regression analysis can be seen in the following table:

Table 6. Final Stage Results of Logistic Regression Analysis Analysis

Variable	B	p value	Exp(B)OR	95%CI for Exp(B)
Belief	1,666	0,103	5,293	0,714-39,268
Availability of access	3,147	0,002	23,255	3,138-172,345
Family support	3,365	0,003	28,947	3,200-261,859

Based on the table above, it can be seen that there are three multiple linear regression analyses that are included in the analysis to see which variables are more dominant in affecting maternal behavior in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021. The results of the final stage multiple linear regression analysis can be seen in the following table:

Table 7. Final Stage Results of Logistic Regression Analysis Analysis

Variable	B	p value	Exp(B)OR	95%CI for Exp(B)
Availability of access	2,146	0,001	25,254	3,538-172,324
Family support	2,355	0,002	29,946	3,400-261,848

Based on the table above, it can be seen that the logistic regression analysis produced 1 (one) variable that most dominantly influenced the mother's behavior in choosing childbirth helpers during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021, namely the variable of availability of access *p value* 0.001 (*p value* <0.05), OR = 25.254 (95% CI = 3.538-172.324) means that respondents who are not available for access have a chance of 25,254 times not having unsafe childbirth compared to respondents who are available access with a coefficient value of B, which is 3,538 positive value, the more respondents who are not available access, the more respondents who do unsafe childbirth during the *Covid-19* pandemic in the Gunung Tua Health Center Work Area in 2021.

Discussion

The Influence of Access Availability on Mother's Behavior in Choosing Birth Attendants During the Covid-19 Pandemic in the Working Area of the Gunung Tua Health Center in 2021

Transportation is one of the reasons for postpartum mothers to choose birth attendants. Because the average postpartum mother does not have an adequate vehicle to carry her when she is about to give birth. So that postpartum mothers prefer to give birth at home by calling the birth attendant for assistance. Postpartum mothers do not have vehicles that can support or take them to health workers for delivery. Because the postpartum mother only has a motorbike which she feels can't be used to go to the health worker's place with a considerable distance with the condition of the stomach being contracted. Even if there are neighbors who have cars, postpartum mothers don't want to bother other people when giving birth.

Likewise with mothers in the working area of the Gunung Tua Health Center, facilities and infrastructure are one of the reasons for postpartum mothers in choosing a birth attendant in the Gunung Tua working area. Based on table 4.12, it is known that of the 54 respondents studied, most of the respondents stated that there was no access as many as 31 (57.4%) respondents. There were as many as 25 (346.3%) stated that there was no access and unsafe delivery, as many as 6 (11.1%) respondents stated that there was no access and safe delivery.

Based on the results of the above calculations, it is known that the statistical test results obtained a *p*-significance value of 0.000 <0.05. So it can be concluded that there is an influence on the availability of access to the behavior of mothers in choosing birth attendants during the COVID-19 pandemic in the Gunung Tua Health Center Work Area in 2021.

Based on the explanation above, it can be concluded that distance is one of the reasons for postpartum mothers to choose their birth attendant. Because the birthing shaman's house is closer than the health center from the mother's house, postpartum mothers prefer the closest assistance, namely the birth attendant. The distance that must be traveled to the place of health workers is quite far. According to the perception of postpartum mothers, the distance from their home to the puskesmas is 10 KM. Therefore it takes longer than the distance to the birthing shaman's house. With urgent circumstances such as giving birth, postpartum mothers tend to seek delivery assistance closest to their home. Because according to him, if he had to go to a health worker with such a long distance, he was afraid that the baby would be born during the trip.

In addition, the physical condition of the road to Gunung Tua Health Center is still not good. Where postpartum mothers have to pass through the road in the middle of the rice fields with slightly damaged road conditions and can only be passed by two-wheeled vehicles (motorcycles). Therefore, distance is one of the reasons for choosing birth attendants in health workers for women giving birth.

Therefore, postpartum mothers prefer to give birth at home with the help of a birth attendant rather than having to go to health workers using a motorbike or having to bother other people to borrow a car.

The Effect of Family Support on Mother's Behavior in Choosing Birth Attendants During the Covid-19 Pandemic in the Gunung Tua Health Center Working Area in 2021

Husband's support is one of the reasons for postpartum mothers in choosing a birth attendant. The husband supports postpartum mothers to give birth at non-health workers because the husband wants to please his wife by following the wife's will to give birth with the help of the birth attendant. Based on the results of data analysis, it is known that of the 54 respondents studied, most of the respondents had negative family support as many as 34 (63.0%) respondents. There are as many as 26 (48.1%) respondents have negative family support and unsafe delivery, as many as 8 (14.8%) respondents have negative family support and safe delivery.

Based on the results of the above calculations, it is known that the statistical test results obtained a p-significancy value of $0.000 < 0.05$. So it can be concluded that there is an influence of family support on the behavior of mothers in choosing birth attendants during the COVID-19 pandemic in the Gunung Tua Health Center Work Area in 2021.

Moreover, if they follow their parents' advice, if something bad happens, then the whole family and especially the parents will be held accountable. Therefore, when parents suggest choosing a shaman, they will choose a shaman or vice versa. This is somewhat different from women who are more mature in age. In addition, family support is also inseparable from the very large cultural influence of Aceh Bireuen on the selection of birth attendants, considering that there are still some isolated areas and relatively difficult to reach by health facilities and health workers, it will open up more opportunities for traditional birth attendants to take medical action, especially childbirth assistance, and will further foster a permanent and entrenched thought for the community to use traditional birth attendants as birth attendants.

Forms of family support in childbirth include: continuous presence of a companion during the delivery process; relaxation and breathing exercises; changes in position and movement; touch and massage to provide a sense of comfort and reduce pain such as counterpressure, squeezing both hips, pressing on the knee; warm compresses/hydrotherapy; physical comfort; a more private environment; providing nutrition and hydration as well as an explanation of the progress of labor and procedures performed.

If the mother or mother-in-law provides the right support (advising the child to give birth at a health worker), it is very likely that the postpartum mother will choose a health worker as a birth attendant. But this was not done by the mother/mother-in-law, instead she resigned herself to leaving all decisions to the postpartum mother, which was important for the safety of the mother and baby.

The Effect of Health Officer Information on Mother's Behavior in Choosing Birth Attendants During the Covid-19 Pandemic Period in the Working Area of the Gunung Tua Health Center in 2021

Competence of health workers is one of the reasons for postpartum mothers to choose birth attendants. Postpartum mothers understand that health workers have competence in helping childbirth, but postpartum mothers are reluctant to give birth with health workers. Mothers giving birth even prefer to give birth at non-health workers or birth attendants. Health workers in this study were health center midwives. Where the midwives at the puskesmas are midwives who are competent in their fields with an educational background of D4 Midwifery. This health worker (midwife) also has long experience in the field of pregnancy and childbirth.

Based on the results of the study, it is known that of the 54 respondents studied, most of the respondents had no information on health workers as many as 30 (55.6%) respondents. There were

as many as 24 (44.4%) respondents who did not have information on health workers and unsafe deliveries, as many as 6 (11.1%) respondents provided information on health workers and safe deliveries.

Based on the results of the above calculations, it is known that the statistical test results obtained a p-significance value of $0.000 < 0.05$. So it can be concluded that there is an influence of health worker information on the behavior of mothers in choosing birth attendants during the COVID-19 pandemic in the Gunung Tua Health Center Work Area in 2021.

It is different with the birth attendants who get knowledge to help with childbirth through training for a month at the puskesmas, but there are also birth attendants who, according to their narrative, have the knowledge to help with childbirth without training but have been there since birth. So if there are parents who have the knowledge to help with childbirth, then automatically the offspring will have that knowledge from generation to generation.

CONCLUSION

Based on the results of research that has been carried out by researchers, this study produces several conclusions as follows: Quantitative Conclusion, 1) There is an influence of knowledge on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. 2) There is an influence of attitude on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. 3) There is an influence of trust on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. 4) There is an influence on the availability of access to the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. 5) There is an influence of family support on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021. 6) There is an influence of information from health workers on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the working area of the Gunung Tua Health Center in 2021. 7) The most influential factor on the behavior of mothers in choosing birth attendants during the Covid-19 pandemic in the work area of the Gunung Tua Health Center in 2021 is the availability of access.

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