ANALYSIS OF FACTORS THAT INFLUENCE PREGNANT WOMEN IN CARRYING OUT ANTENATAL CARE SERVICES IN WORK AREA OF UPTD KUPANG COMMUNITY HEALTH CENTER JETIS DISTRICT, REGENCY MOJOKERTO

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ABSTRACT

Various efforts made by the government include improving midwifery science, previously the Midwife Education Program (P2B), then D3 Midwifery, S1, Professional Education, with the hope of reducing maternal mortality and infant mortality rates. If this problem is not immediately addressed, there may be an increase in future death cases. Research objectives: this study aims to analyze the influence of knowledge, family income, parity and support from Health cadres on the utilization of Antenatal care services in the working area of the UPTD Kupang Health Center, Mojokerto Regency.

The type of research used in this study is quantitative research with a cross-sectional research design. The place of this study will be carried out in the working area of the Kupang Health Center UPTD from February to March 2024. The population is all pregnant women in the working area of the Kupang Health Center UPTD as many as 100 pregnant women and the resulting sample size is 68 respondents.

Results :p – value < 0.05, which means that there is a significant influence between the level of knowledge, parity, family support, and support from cadres for pregnant women on the utilization of Antenatal Care services, while p – value > 0.05, which means that at 5% alpha there is no significant influence between education and family income of pregnant women on the utilization of Antenatal Care services.

Conclusion and suggestions: There is an influence of knowledge, parity, family support, pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD, Jetis District.Mojokerto Regency. It is hoped that more education will be provided regarding the benefits and impacts of not providing regular antenatal care services.

INTRODUCTION

Maternal and Infant health issues are national issues that need to be given top priority, because they greatly determine the quality of Human Resources (HR) in future generations. The Maternal Mortality Rate (MMR) is one indicator of the success of a country's development, improving the quality of life of women is one of the requirements for HR development. Various efforts made by the government

include improving midwifery science, previously the Midwife Education Program (P2B), then D3 Midwifery, S1, Professional Education, with the hope of reducing maternal mortality and infant mortality. If this problem is not addressed immediately, there could be an increase in future death cases.

Coverage of K1 in Indonesia in 2020 was 71% and coverage of K4 was 88.13% in 2021. Coverage of visits of pregnant women K1 in East Java province was 100.6% while coverage of visits of pregnant women K4 was 91.2%, based on the visit data, the coverage of K4 visits is still relatively low (Public Health Journal 2022) Based on data from the Mojokerto Regency Health Office, the number of maternal deaths in Mojokerto Regency in 2021 was 67 cases and in 2022 there were 44 cases. There was a decrease in maternal death cases from 2021 to 2022. Coverage of K1 services in Mojokerto Regency in 2021 was 16,957 (96.2%) in 2022 the coverage of K1 was 16,889 (95.8%). The coverage of K4 services in Mojokerto Regency in 2021 was 15,442 (87.6%) in 2022 it was 15,284 (86.7%) (Profile of Mojokerto Regency Health Office, 2022).

Minister of Health Regulation No. 21 of 2021 concerning Health Services during Pregnancy, Childbirth and the Postpartum Period, Contraceptive Services and Sexual Health Services. Every pregnant woman must receive standard antenatal care. Standard services are services provided to pregnant women at least 6 times during their pregnancy with a schedule of 2 times in the first trimester, 1 time in the second trimester and 3 times in the third trimester carried out by Midwives, or Doctors, or Obstetricians who work in government or private health care facilities who have a Registration Certificate (STR) (Minister of Health Regulation No. 21 of 2021).

Many factors influence the utilization of Antenatal Care services, namely, predisposing factors including knowledge, education, parity, and supporting factors including family income (Sarminah, 2013). Research conducted by Hasana (2014) also shows that many factors influence the utilization of Antenatal Care services, including knowledge, education, income, parity and support from health cadres. In addition, research conducted by Annisa (2017) also shows that the level of education, level of knowledge, support from health cadres and family income have an influence on the utilization of Antenatal Care services.

Antenatal care is carried out to monitor maternal and infant health by involving health cadres as people who directly communicate with the community (Kholifah, 2017). The assistance provided can provide changes, especially in behavior, so that changes that occur in individuals can be immediately assessed (Tampubolon, 2020). Antenatal Care services with routine check-ups, providing education to pregnant women and families about the importance of conducting examinations are expected to improve the health status of mothers and babies, during the safe and secure delivery process, mothers and babies born in healthy conditions so that maternal and infant mortality rates decrease.

RESEARCH METHODS

The type of research used in this study is quantitative research with a cross-sectional research design. The place in this study will be carried out in the working area of the UPTD Kupang Health Center, Jetis District, Mojokerto Regency from February to March 2024. The population in this study were all pregnant women in the working area of the UPTD Kupang Health Center, as many as 100 pregnant women and the number of samples using cluster random sampling, namely 68 respondents. The independent variables in this study are Knowledge, Education, Income, Parity and Support from Health Cadres. The dependent variable in this study is the Utilization of Antenatal Care Services. Bivariate analysis using the chi-Square test, and multivariate analysis using the Logistic Regression test.

RESEARCH RESULT

a. Respondent Characteristics

Table 1. Frequency Distribution of Respondents Based on Age and Occupation of Pregnant Women in the Working Area of the Kupang Health Center UPTD

No	Variables	f	%
	Age		
1.	20 – 35 Years	67	94.4
2.	> 35 Years	4	5.6
	Total	71	100
	Work		
1.	Housewife	49	69.0
2.	Work	22	31.0
	Total	71	100
	Education		
1.	basic education	15	21.1
2.	Secondary Education	38	53.5
3.	higher education	18	25.4
	Total	71	100

Table 1 shows that almost all respondents are aged 20-35 years, namely 67 respondents (94.4%), more than half of the respondents work as housewives, namely 49 respondents (69.0%), and more than half have secondary education, namely 38 respondents (53.5%).

b. Univariate Analysis

Univariate analysis is used to determine the frequency distribution of each variable.

Table 2.Frequency Distribution of Pregnant Women in the Working Area of the Kupang Health Center UPTD

No	Variables	f	%	Total f	Total %
Knowledge					
1.	Not enough	14	19.7	71	100
2.	Good	57	80.3		
Education					
1.	basic education	15	21.1		
2.	Secondary Education	38	53.5	71	100
3.	higher education	18	25.4		
Income					
1.	Low	57	80.3	71	100
2.	Tall	14	19.7		
Parity					
1.	Primigravida	57	80.3	71	100
2.	Multigravida	14	19.7		
Family Support					
1.	Not enough	13	18.3	71	100
2.	Good	58	81.7		
Cadre Support					
1.	Not enough	36	49.3	71	100
2.	Good	35	50.7		
Utilization of ANC					
1.	Underutilization	16	22.5	71	100
2.	Utilise	55	77.5		

Based on table 2, it shows that the majority of respondents have good knowledge, namely 57 respondents (80.3%), more than half of the respondents have secondary education, namely 38 respondents (53.5%). The table also shows that the majority of respondents have low income, namely 57 respondents (80.3%). Based on parity, most respondents are primigravida, namely 57 respondents (80.3%). The table shows that the majority of respondents' family support gets support that isboth from the family, namely 58 respondents (81.7%). Meanwhile, for supportMore than half of the respondent cadres have good support, namely 36 respondents (50.7%). And finally, for the utilization of ANC, more than half of the respondents really utilize ANC facilities, namely 55 respondents (77.5%).

c. AnalysisBivariate

Bivariate analysis was conducted to test the hypothesis in this study, namely by observing the relationship between each independent (free) variable and the dependent (bound) variable.

Table 3. The Influence of the Level of Knowledge of Pregnant Women onUtilizationAntenatal Care Services in the Working Area of the Kupang Health Center UPTD

| Knowledge | Utilization of ANC | | | | Total | | P Value |
| | Underutilization | | Utilise | | | | |
	f	%	f	%	f	%	
Not enough	8	11.3	6	8.5	14	19.7	0.01
Good	8	11.3	49	69.0	57	80.3	
Total	16	22.5	55	77.5	71	100	

Based on table 3, the results show that pregnant women who have less knowledge and do not utilize ANC services are 8 people (11.3%), while those who have good knowledge and do not utilize ANC services are 8 people (11.3%). Based on the results of the chi-square test, the probability results (p-value) are 0.01 <0.05, which means that at alpha 5% there is a significant influence between the level of knowledge of pregnant women on the utilization of Antenatal Care services.

Table 4. The Influence of Pregnant Women's Education on the Utilization of Antenatal Care Services in the Work Area of the Kupang Health Center UPTD

| Education | Utilization of ANC | | | | Total | | P Value |
| | Underutilization | | Utilise | | | | |
	f	%	f	%	f	%	
Base	6	8.5	9	12.7	15	21.1	
Intermediate	7	9.9	31	43.7	38	53.5	0.188
Tall	3	4.2	15	21.1	18	25.4	
Total	16	22.5	55	77.5	71	100	

Based on table 4, it was found that pregnant women who had basic education and did not utilize ANC services were 6 people (8.5%), while those who had secondary education and did not utilize ANC services were 7 people (9.9%) and pregnant women who had higher education and did not utilize ANC services were 3 people (4.2%). Based on the results of the chi-square test, the probability result (p-value) was 0.188> 0.05, which means that at alpha 5% there was no significant influence between the education of pregnant women on the utilization of Antenatal Care services.

Table 5. The Influence of Pregnant Women's Family Income on the Utilization of Antenatal Care Services in the Work Area of the Kupang Health Center UPTD

Income	Utilization of ANC				Total		P Value
	Underutilization		Utilise				
	f	%	f	%	f	%	
Low	15	21.1	42	59.2	57	80.3	0.124
Tall	1	1.4	13	18.3	14	19.7	
Total	16	22.5	55	77.5	71	100	

Based on table 5, it was found that pregnant women who had low income and did not utilize ANC services were 15 people (21.1%), while those who had high income and did not utilize ANC services were 1 person (1.4%). Based on the results of the chi-square test, the probability result (p-value) was 0.124> 0.05, which means that at alpha 5% there was no significant influence between the family income of pregnant women on the utilization of Antenatal Care services.

Table 6. The Influence of Parity of Pregnant Women on the Utilization of Antenatal Care Services in the Working Area of the Kupang Health Center UPTD

Parity	Utilization of ANC				Total		P Value
	Underutilization		Utilise				
	f	%	f	%	f	%	
Primigravida	10	14.1	47	66.2	57	80.3	0.042
Multigravida	6	8.5	8	11.3	14	19.7	
	16	22.5	55	77.5	71	100	

Based on table 6, it was found that pregnant women with primigravida parity and did not utilize ANC services were 10 people (14.1%), while multigravida parity and did not utilize ANC services were 6 people (8.5%). Based on the results of the chi-square test, the probability result (p-value) was 0.042 <0.05, which means that at alpha 5% there is a significant influence between the parity of pregnant women on the utilization of Antenatal Care services.

Table 7. The Influence of Family Support of Pregnant Women on the Utilization of Antenatal Care Services in the Work Area of the Kupang Health Center UPTD

Family Support	Utilization of ANC				Total		P Value
	Underutilization		Utilise				
	f	%	f	%	f	%	
Not enough	7	9.9	6	8.5	13	18.3	0.03
Good	9	12.7	49	69	58	81.7	
Total	16	22.5	55	77.5	71	100	

Based on table 7, it was found that pregnant women with less family support and did not utilize ANC services were 7 people (9.9%), while pregnant women with good family support and did not utilize ANC services were 9 people (12.7%). Based on the results of the chi-square test, the probability result (p-value) was 0.03 <0.05, which means that at alpha 5% there is a significant influence between family support of pregnant women on the utilization of Antenatal Care services.

Table 8. The Influence of Support from Pregnant Women Cadres on the Utilization of Antenatal Care Services in the Work Area of the Kupang Health Center UPTD

Cadre Support	Utilization of ANC				Total		P Value
	Underutilization		Utilise				
	f	%	f	%	f	%	
Not enough	13	18.3	22	31.0	35	49.3	0.04
Good	3	4.2	33	46.5	36	50.7	
Total	16	22.5	55	77.5	71	100	

Based on table 8, it was found that pregnant women with less cadre support and did not utilize ANC services were 13 people (18.3%), while pregnant women with good cadre support and did not utilize ANC services were 3 people (4.2%). Based on the results of the chi-square test, the probability results (p-value) were 0.04 <0.05, which means that at alpha 5% there is a significant influence between cadre support for pregnant women on the utilization of Antenatal services.Care.

d. Multivariate Analysis

Table 9. Results of the Logistic Regression Equation Model

		B	SE	Wald	df	Sig.	Exp(B)	95% CIfor EXP(B)	
								Lower	Upper
Step 1a	Knowledge	1,771	.866	4.180	1	.041	5,876	1,076	32,085
	Education	-.154	.571	.073	1	.787	.857	.280	2.622
	Income	1,465	1,353	1.172	1	.279	4.326	.305	61,360
	Parity	-1,534	.871	3.103	1	.078	.216	.039	1.189
	Family_Support	.728	.887	.673	1	.412	2,070	.364	11,768
	Cadre_Support	1,878	.847	4.914	1	.027	6,538	1.243	34,388
	Constant	-5.152	2.655	3,765	1	.052	.006		

Based on the table above, it can be seen that respondents with good knowledge have a 5,876 times greater chance of doing ANC compared to respondents with low knowledge; and respondents who receive good cadre support will have a 6,538 times greater chance of doing ANC compared to respondents with low cadre support.

DISCUSSION

1. **The influence of the level of knowledge of pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

Based on the results of the study that most respondents already have good knowledge, the results of the cross tabulation obtained the results of respondents who have good knowledge and are willing to utilize Antenatal Care services 69.0% while respondents who have less knowledge and are willing to utilize Antenatal Care services 8.5%. These results indicate that those who are willing to utilize Antenatal Care services at the Kupang Health Center UPTD are more likely to occur in pregnant women who have good knowledge. Based on the results of the analysis, a p-value of 0.01 <0.05 was obtained, which means that there is an influence of pregnant women's knowledge on the utilization of Antenatal Care services at the Kupang Health Center UPTD.

The results of this study are in line with research conducted by(Juliati, 2019)which shows that there is a relationship or influence of pregnant women's

knowledge with the use of Antenatal Care services at the Nurlina Secanggang Clinic. Also in accordance with research conducted by(Citrawati and Laksmi, 2021)which shows that there is a significant relationship between the level of knowledge of pregnant women and antenatal care visits at the Tampaksiring II Health Center.

Knowledge is the result of knowing, and this happens after people sense a certain object. Sensing occurs through the five human senses, namely: the sense of sight, hearing, smell, taste and touch. Most human knowledge is obtained through the eyes and ears.(Rahuyu, 2022). The factors that cause pregnant women to be reluctant to have Antenatal Care are due to economic, work, lack of information for pregnant women about the benefits of Antenatal Care. Because of this lack of knowledge, it is the main trigger for pregnant women to be reluctant to have Antenatal Care examinations, resulting in mothers paying less attention to their nutritional needs, mothers not knowing the development of their health and their fetuses and lack of information on care for babies and when breastfeeding, knowing childbirth and postpartum care.(Juliati, 2019).

Based on this, it is expected that health workers will always provide information about the importance of Antenatal Care examinations in order to find out the development of the fetus in the womb.

2. **The influence of education of pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

More than half of the respondents had secondary education 53.5% and pregnant women with basic education (elementary and junior high school/equivalent) were 21.1%. Respondents who had basic education and were willing to utilize Antenatal Care services were 12.7% while respondents who had higher education and were willing to utilize ANC services were 21.1%. These results indicate that those who were willing to utilize Antenatal Care services at the Kupang Health Center UPTD were more pregnant women with secondary education. Based on the results of the analysis, a p-value of 0.188> 0.05 was obtained, which means that there is no effect of pregnant

women's education on the utilization of Antenatal Care services at the Kupang Health Center UPTD.

This statement is in line with research conducted by(Cahyani, 2020)that there is no relationship between the use of antenatal care services and education, this can be seen from the p value of 0.275 (p>0.05) which means there is no relationship. Also in line with research conducted by(Donsu, Tirtawati and Dompas, 2021)which states that there is no significant relationship between education and the use of ANC services in pregnancy check-ups. Not only that, the statement above is also relevant to research conducted by(Donsu et al., 2017)which states that there is no significant relationship between education and the use of antenatal care services for pregnant women (p value = 1,000).

The absence of a relationship between education and the utilization of Antenatal Care services at the Kupang Health Center UPTD is because pregnant women who have higher education tend to get broader knowledge and information about health service facilities, where not only service information is available at the Kupang Health Center UPTD, but also in hospitals or other health services, other social media. So that pregnant women with higher education tend to have a wide range of health service choices and have many considerations in terms of quantity and quality of service, in addition to the desire to utilize the health service itself.(Indryani, 2019).

Efforts to improve education can be in line with health promotions, especially those related to pregnant women, which can be carried out by health workers assisted by cadres or local community leaders, in order to improve the knowledge of pregnant women in utilizing antenatal care services by means of delivery by health workers who will provide education to pregnant women must be adjusted to the level of education of pregnant women, in addition, the language used by health workers must be simple and can be understood by pregnant women so that communication in providing education is not hampered.

3. **The influence of pregnant women's income on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

Most respondents have low incomes, namely 80.3% and those with high incomes are 19.7%. The results showed that respondents who have low incomes and are willing to utilize Antenatal Care services are 59.2% while respondents who have high incomes and are willing to utilize Antenatal Care services are 18.3%. These results indicate that those who are willing to utilize Antenatal Care services at the Kupang Health Center UPTD are more likely to occur in pregnant women who have low incomes. Based on the results of the analysis that has been carried out, table 4.10 also shows a p-value of 0.124> 0.05, which means that there is no effect of family income of pregnant women on the utilization of Antenatal Care services at the Kupang Health Center UPTD.

This statement is in line with research conducted by(Humokor, Rumayar and Wowor, 2019)which produces a p value of $0.582 > \alpha = 0.05$, in other words, family income and the use of antenatal care services are not related. Research conducted by(Puspitasari, Hakimi and Nurhidayati, 2018)also said that there was no significant relationship between the income of the pregnant mother's family and the use of Antenatal Care services.

Income is one of the important factors for mothers to visit ANC. Costs incurred for transportation and laboratory costs are one of the factors that inhibit the use of ANC. Economic status has a positive relationship with the benefits of ANC. Mothers with high economic status tend to get adequate ANC services compared to mothers with low economic status.(Puspitasari, Hakimi and Nurhidayati, 2018).

High-income families make less use of antenatal care services at community health centers because they prefer to get antenatal care services from specialist doctors or at a higher level, for example, private clinics from community health centers and also do not have to queue for long.

4. **The influence of parity of pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

Most respondents with primigravida parity are 80.3% and with multigravida parity are 19.7%. Respondents with primigravida parity and are willing to utilize Antenatal Care services are 66.2%. While respondents with

middle education and are willing to utilize Antenatal Care services are 43.7%, and the last respondents with multigravida parity are 19.7%.multigravida and willing to utilize ANC services by 11.3%. These results indicate that those who are willing to utilize Antenatal Care services at the UPTD Kupang Health Center are more likely to occur in pregnant women with primigravida parity. Based on the results of the analysis, a p-value of 0.042 <0.05 was obtained, which means that there is an effect of parity of pregnant women on the utilization of Antenatal Care services at the UPTD Kupang Health Center.

This is in line with research conducted by(Daryanti, 2019)which produces a correlation calculation, a significance value of 0.023 <0.05 is obtained, this indicates that there is a relationship between parity and Antenatal Care (ANC) examination at PMB Istri Utami Sleman Yogyakarta. Also in accordance with research conducted by(Hastutik, Utami and Noviani, 2023)which produces a p-value of 0.003 so that the p-value <0.05 so that it can be concluded that Ha is accepted and Ho is rejected so that there is a significant relationship between parity and the use of Antenatal Care services. Research conducted by(Zuchro et al., 2022)the results of the chi square statistical test obtained p = 0.002 which when compared with the value of $\alpha = 0.05$ then p $\leq$ 0.05 so that the null hypothesis is rejected. This means that there is a significant relationship between parity and antenatal care.

Parity is a condition in which how many children are born to a woman. Women are said to have high parity if they have >2 children and low parity if they have ≤2 children. Mothers who are experiencing pregnancy for the first time are new so they are motivated to check their pregnancy with health workers. On the other hand, mothers who have given birth to more than one child have the opinion that they are experienced so they do not have the enthusiasm to check their pregnancy. In primigravida mothers, pregnancy is the first thing for them, so indirectly they pay more attention to their pregnancy, they think that pregnancy check-ups are something new. However, in multigravida mothers, they already have experience checking their pregnancy and a history of giving birth, they think they have had experience so they are less motivated to do the next pregnancy check-up.(Daryanti, 2019).

Meanwhile, mothers with multigravida parity feel that they are experienced in their pregnancy so they neglect to check their pregnancy. However, it was also found that pregnant women with primigravida parity did not routinely check their pregnancy. Researchers assume that primigravida parity mothers do not understand the importance of antenatal care because they do not really understand about pregnancy.

5. **The influence of family support for pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

Most respondents received good family support, which was 81.7%, while those who received less support were 18.3%. And respondents with less family support and were willing to utilize Antenatal Care services were 8.5%, while respondents with good family support and were willing to utilize Antenatal Care services were (69%). These results indicate that those who are willing to utilize Antenatal Care services at the Kupang Health Center UPTD are more likely to occur in pregnant women with good family support. Based on the results of the analysis, a p-value of 0.03 <0.05 was obtained, which means that there is an influence of family support from pregnant women on the utilization of Antenatal Care services at the Kupang Health Center UPTD.

Research conducted by(Ningsih, 2020)is also relevant to this study because the results of statistical tests with Chi square analysis obtained p value = 0.029 <α 0.05. This means that H1 is accepted, which means that there is a significant relationship between family support and the use of antenatal care services. This is also in line with research conducted by(Ike and Putri, 2021)that the p value <0.05 is 0.00, which means that there is a significant correlation between family support and the use of antenatal care services.

Support or motivation is something that causes and supports a person's actions or behavior. Support refers to encouragement and efforts to satisfy a need or a goal. Support becomes a reason for someone to act in order to fulfill their life needs.(Ningsih, 2020). In general, families who expect and support pregnancy will show and provide support on all sides, with this support will increase self-confidence, and the mother will be more accepting of her

pregnancy, the support provided can be in the form of information support, emotional support, instrumental support or appreciation support which is proven in the form of providing information about pregnancy and the birth process and support before delivery.(Mamahit and Mamahit, 2020)

Family support can be provided in several ways, one example of which is by providing facilities, one of which is convenience.get transportation or financial support from the family for pregnant women to meet their needs and to undergo examinations.

6. **The influence of support from pregnant women cadres on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD**

The results of the study showed that more than half of the respondents received good support from cadres, which was (50.7%) while receiving support from cadres, while those who were lacking were (49.3%). The results showed that respondents with less cadre support and were willing to utilize Antenatal Care services were (31.0%) while respondents with good family support and were willing to utilize Antenatal Care services were (46.5%). These results indicate that those who are willing to utilize Antenatal Care services at the Kupang Health Center UPTD are more likely to occur in pregnant women with good cadre support. Based on the results of the analysis, a p-value of $0.04 < 0.05$ was obtained, which means that there is an influence of pregnant women's cadre support on the utilization of Antenatal Care services at the Kupang Health Center UPTD.

This is in line with research presented by(Rahayu and Askabulaikhah, 2020)obtained p value = $0.001 < 0.05$ so that Ho is rejected, meaning that it is concluded that there is a relationship between the Implementation of Cadre Assistance and ANC Visits of Pregnant Women Risti at the Jelakombo Health Center, Jombang Regency. Also in line with research conducted by(Kolifah, 2017)and the p-value obtained = $0.002 \leq 0.05$ means that Ha is accepted, this shows that there is a significant correlation between cadre support and the use of ANC services for pregnant women to health services.

Cadres as mediators are able to provide information needed by the family regarding the client's condition and the condition of the institution, in order to provide appropriate considerations in determining actions in the interests of the client. Health cadres as intermediaries between clients and health workers so that good communication is established. The mediator will make the relationship neutral, not forcing the will, but bringing it in a positive direction.(Rahayu and Askabulaikhah, 2020)

Health cadres who are active in the community will bring about behavioral changes in the community. Companions play an active role as agents who provide positive and directive input based on their knowledge and experience and exchange ideas with the knowledge and experience of the community they are assisting, raising public awareness, conveying information, conducting confrontations, organizing training for the community are some of the tasks related to the function of cadres as companions.

CONCLUSION

There is an influence of knowledge, parity, family support and support from pregnant women cadres, while there is no influence between education and income of pregnant women on the use of Antenatal Care services in the working area of the Kupang Health Center UPTD, Jetis District.Mojokerto Regency.

SUGGESTION

Relevant health workers are expected to increase promotion and education programs for pregnant women regarding the importance of utilizing antenatal care services so that they can increase the compliance rate of pregnant women in utilizing antenatal care services and minimize mothers from pregnancy complications and unwanted births. It is expected that the UPTD Kupang Health Center will provide education that is more focused on the benefits and impacts of not regularly providing antenatal care services so that it can create confidence in pregnant women and provide sufficient information about ANC.

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