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Integrated Postpartum Care Learning Model Implementation To Create Competent Midwife To Meet The Need Of Postpartum Women in Indonesia Setiya Hartiningtiyaswati, M.Keb (Master of Midwifery), Dr. Ponpon S. Idjradinata, MD (Pediatrician, Professor)2, Dr. Farid Husin, MD (Obstetrician and Gynecologist, Lecturer)3. 1Midwifery Diploma III Program, School of Health Sciences Surabaya.

2Midwifery Postgraduate Program, Faculty of Medicine, Universitas Padjadjaran, Bandung 3Department of Child Health, Faculty of Medicine, Dr. Hasan Sadikin General Hospital, Bandung Abstract Background : Midwife competence for postpartum care in Indonesia is still not as expected. Midwife competence can be improved by start to learn midwifery education.

One solution that can be done is through a learning model that integrates the values that women need with the basic competence of postpartum care. This study aims to analyze the effect of applying an integrated postpartum care learning model on the improvement of student competence. Design : This study used quasi-experimental design in the second years of midwifery student.

Experimental group (n = 25) was given the integrated postpartum care learning model, while control group (n = 24) was given the conventional learning model (learning model that is normally used). Competency score was measured from a combination of knowledge, skill, and attitude related to postpartum. Finding : The result of the study showed that there were differences in the improvement of knowledge [control: mean (SD) = 2.19 (8.52); experimental = 5,9 (8.93)], attitude [control: mean (SD) = 18.15 (23.92); esperimental = 49.14 (20.96)], and skill [control: mean (SD) = 8.16 (19.17); experimental = 41.33 (19.53)] between control and experimental groups ($p < 0.5$).

a combination of these scores showed there were signifcant differences in the improvement of competency between control and experimental groups ($p < 0.05$). Conclusion : The integrated postpartum care learning model is better in improving student competence than the conventional learning model. Implication for practice : Integrated postpartum care learning model is a way to create a generation of competent midwives to meet the needs of women during postpartum.

This study was approved by the board of examiners of faculty of medicine, Universitas Padjadjaran, Indonesia. Key words : integrated, learning model, postpartum, competency. Introduction The increasing maternal mortality rate in Indonesia reflects the failure in achieving midwifery service quality indicators.

Several studies have shown that the community's satisfaction towards midwife competency is still low in terms of the quick response of midwives when providing services, inadequate emphaty, and suboptimum services. Bidan delima, which has been considered as meeting the service quality standards, has not been able to meet the need or to satisfy the community (Nisa', 2012).

A similar picture is presented in the 2012 maternal service quality review showing that the quality of the postpartum services provided by midwives is still low (MoH, 2012b; UNICEF, 2012; WHO, 2011b; UNFPA). Woman's need related to breastfeeding has not been met. This is proven through the breastfeeding rate, which shows that only 27% infants receive exclusive breastfeeding during the first six months of life.

When reviewed, the causes of failure are influenced by complex factors that include physical, psychological, socio-cultural, and maternal knowledge (Inayati et al., 2012; Aidam et al., 2005; Buskens and Jaffe, 2008). The presence of many issues in midwifery service in Indonesia shows that there is an issue in the midwifery education process (Day-Stirk, 2013).

Education is one of the essential pillar that influence the quality of midwives (Day-Stirk, 2013; WHO, 2011a). The current facts show that the midwifery school graduate competency quality is not as expected yet. This is reflected from the Indonesian midwife competency testing trial result of 54.42 in 2011.

A similar situation is also seen in the Indonesian Ministry of Health evaluation result stating that both the curriculum and competencies of the midwifery school graduates have not been able to achieve the minimum standard criteria (less than 70%) (MoH, 2012a) Education has to be able to produce a midwife profile that is able to meet the

complex need of the community.

However, it is observed that in the education process in Indonesia the students are not used to analyze the complex needs of women (holistically). The learning materials are given partially based on individual subjects while in reality, the woman's needs are holistic in nature, consisting of physical/biological, psychological, socio-cultural, and spiritual needs. This is in line with the preliminary study performed by our team to understand the community's need for midwives.

The results of that preliminary study shows that the community needs midwives who are able to deal with physical and psychological issues as well as having good soft skills as an integrated package. The current learning process in the midwifery education has not been able to produce midwives that meet the expectation of the community.

The learning process quality affects the students' learning outcomes (Murniati, 2010). Therefore, it is necessary that a new innovative learning model that integrate the midwifery science substances and women's need during postpartum period or an integrated postpartum care learning model is applied.

There has not been any research performed to observe the relationship between the integrated postpartum care learning model and the comprehensive competency improvement. Thus, this study is new for the midwifery education. This study aimed to analyze the effect of the application of postpartum care learning model on competency improvement of the midwifery students in D-III midwifery program.

Methods This study is a part of a research on integrated midwifery care (antenatal care, labor and delivery care, postpartum care, neonatal care, infants and under-five care, reproductive health care and family planning care in an integrated midwifery care learning model package). This is a study with quasi-experimental pretest post-test non-equivalent control group design (Harris et al.,

2006) due to the restriction raises from the subjects that prevent randomization. The study was conducted in School for Health Sciences Widya Dharma Husada, Tangerang. The inclusion criteria applied in this study were students of Diploma III midwifery program who had received pregnancy care and labor and delivery care subjects. The sample size was determined using unpaired numeric comparative analytical formula, resulting in at least 18 respondents for each group.

Sampling was performed using simple randomization in 5 classes of semester IV students (average number of students per class was 25-28). Before class randomization

was performed to define the group and treatment groups, each student was given explanations on the process of the study and choices whether they wanted to participate in the study or not. Based on the required minimum sample size, at least one class in each group was needed.

The final sample size was 49 students, consisting of 25 students in the treatment group and 24 in the control group (Fox et al., 2009). Intervention Interventions in the treatment group was performed using the trial integrated postpartum learning model which were summarized in a module that included a syllabus, learning design, and integrated postpartum practice checklists.

Meanwhile ,the control group received standardized learning model applied in the institution (conventional model). Both groups received the same postpartum care materials with only the treatment group received postpartum care materials that are integrated with religious, cultural, and psychological values as well as soft skills. The learning method applied was the student-centered learning that combined theoretical and practical learning.

Before the intervention, a pretest on postpartum care competency in the form of written and practical tests were given. The intervention was performed for 1,400 minutes (with a duration of 400 minutes/week) outside the regular learning schedule of the student. After the interventions, a posttest on postpartum care competency in the form of written and practical tests were was performed to both groups.

The intervention in the control group was performed by a lecturer who had taught the postpartum care subject for at least 2 years and owned a training certificate for student-centered learning. Meanwhile, the treatment group was taught by a teaching team consisting of the researcher as the lecturer for integrated midwifery care lecturer, religion lecturer, psychology lecturer, and culture lecturer.

The participation of the researcher in giving intervention is based on the fact that the researcher was the one who developed the model that she really understood the integrated postpartum care learning model, which was a new model in midwifery education in Indonesia. Outcome The primary outcome of this study was improved competency in postpartum care.

The competency was measured through 3 areas: knowledge, attitude, and skill in postpartum care. The students were considered as competent if the scores in the three areas are in good category (knowledge = 70, attitude = 70, and skill = 100). The students were considered incompetent if there was one or more areas with scores less

than the predetermined standard (MoH, 2006).

The evaluation on competency was performed in a single blind fashion to avoid bias in data collection. The evaluator did not aware of whether a student was in the control group or treatment group (avoiding conflict of interest) (Pannucci and Wilkins, 2010). Measurement Instruments There were three types of instruments used to measure the students' competency: Cognitive ability was measured using Case-based Multiple Choice questions. Before using the questions as a measurement tool, validity and reliability testing was performed.

The validity test consisted of 2 stages: content validity and question item analysis. The content validity was conducted by asking expert opinions from midwifery experts from Universitas Padjadjaran Bandung and education experts from Indonesia University of Education. After that, a trial was performed for the instrument and item analysis (question).

The question analysis was performed by looking at the differential index and difficulty index. At the end of the analysis, 38 questions were considered as meeting the criteria (Sugiyono, 2012). The reliability of the instrument was analyzed using the formula of Kuder Richardson 21 (KR 21). The reliability of instrument was 0.974 meaning that the measurement instrument was realiable (Sugiyono, 2013; Zurawski, 1999). Psychomotoric ability was measured using breast swelling management checklist.

Affective ability was measured using the attitude checklist reflecting postpartum care skill. The attitude was assessed through observation on how the students were able to show humanistic approach when practicing breast swelling care management. Data analysis Subjects were analyzed for uniformity using chi square (CI 95%, a = 0.05) to avoid the differences in characteristics (achievement and motivation indexes) between groups that will create bias.

Before the intervention, an initial capability uniformity analysis was performed to both group using T test (CI 95%, a = 0.05). After intervention was applied, an analysis on improvement in competency component value was performed using paired T-test. A differential analysis on the difference in competency between the control group and treatment group was conducted using Fisher test (CI 95%, a = 0.05).

Mancova test was used to understand the effect of the learning model on the three competency components by controlling covariates. Ethical Clearance This study was performed by making sure that during the process of the study the ethical, legal, social, and other non-clinical implications were attended. All subjects in this study had received

detailed information on the study procedure and had signed the informed consent for participating in the study.

Each subject was aware of their right to resign during the study process. A review was performed by the Health Research Ethics Commission of the Faculty of Medicine, Universitas Padjadjaran and an ethical approval was issued (Ethical Clearance Number 98/UN6.C2.1.2/KEPK/PN/2014).

Results In the beginning of the study, the number of subjects was 26 subjects in the treatment group and 25 subjects in the control group. At the end of the study, analysis was performed for 49 subjects, i.e. 25 subjects in treatment group and 24 subjects in control group. This sample size was bigger than the required sample size of 36 subjects.

To make the results of the study only affected by intervention, an effort to make the characteristics of the subjects uniform was performed by assessing several aspects such as GPA for semester III, motivation, and pretest score regarding postpartum care knowledge, attitude, and skill. Table 1 Uniformity in the Characteristics of Subjects Characteristics _Group _p Value* _ _ _Control (n=24) _Treatment (n=25) _ _ _ Grade Point Average (GPA) Excellent Good _ 1 (4.2%) 23 (95.8%) _ 0 (0%) 25 (100%) _0.490 _ _Motivation High Low _ 12 (50%) 12 (50%) _ 13(52%) 12 (48%) _0.889 _ _Postpartum care pretest score Knowledge Mean (SD) Median Attitude Mean (SD) Median Skill Mean (SD) Median _ 61.8 (5.3) 63.2 29.17 (17.73) 28.6 45.83 (14.88) 46.7

_ 66.8 (8.6) 67.1 36.29 (13.82) 39.3 45.20 (11.85) 46.7 _ 0.018 0.123 0.723 _ _Note : *) Chi square test for motivation, Fisher test for GPA, and T test for postpartum care pretest score Table 1 presents a uniformity in terms of GPA and motivation in both groups ($p > 0.05$), which is also true for postpartum care attitude and skill pretest ($p > 0.05$).

For the postpartum knowledge value, a difference between the control and treatment groups was seen ($p < 0.05$). The different in the initial ability of the control and treatment group can create bias. Therefore, a mancova analysis was performed to assess the effect of intervention on competency component improvement by controlling covariate, i.e.

postpartum care pretest score (CI 95%, a = 0.05) (Lashari et al., 2012; Sawono, 2013; Santoso, 2014). Table 2 Postpartum care knowledge, attitude, and skill score increase Variable _Control (n = 24) _Treatment (n = 25) _P value* _R2 Adj _ _Knowledge Me (SD) % increase Attitude Me (SD) % increase Skills Me (SD) % increase _ 2.19 (8.52) 3.6 18.15 (23.92) 62 8.61 (19.71) 18.8 _ 5.90 (8.93) 9.6 49.14 (20.96) 140.9 41.33 (19.53) 89.6

_ 0.038 < 0.001 < 0.001 _ 0.087 0.315 0.417 _ _Notes: *) Mancova Test, F Hotelling = 10.688, p value < 0.001 Table 2 shows that in multivariates, the integrated postpartum care learning model affected the delta scores of the three components (F Hotelling = 10,.88, p value < 0.001).

Without the influence of the knowledge pretest score, delta scores for postpartum care knowledge, attitude, and skill are significantly different between the control and treatment group (p<0.05). The discriminant coefficient showed that the effect of the integrated postpartum learning model on postpartum care knowledge delta score mean was weak (R2 Adjusted < 0.16). The categorization of improved competency was based on postpartum care knowledge, atttitude, and skill pretest and posttest scores.

Table 3 shows that the integrated postpartum care learning model improved the students' competency of 32% compared to the conventional learning model. The statistical analysis also shows that there was a significant difference in competency improvement between the treatment and control groups (p < 0.05). Table 3 Analysis on the effect of the integrated postpartum care learning model towards the postpartum care competency improvement Group _Competency _p value _ _ _Incompetent (%) _Competent (%) _ _ _National Assessment Standard Control (n = 24) Treatment (n = 25) _ 100 68 _ 0 32 _0,002* _ _Note : *) Fisher Test Discussion Subjects of this study were 4th semester students who had passed the postpartum care subject.

The average score for postpartum care knowledge, attitude, and skill pretest shows that there is not even one student can be considered competent. The score reflects the result of the students' competency achievement in postpartum care subject using the conventional learning model. This is in line with the result of the evaluation performed by the Indonesian Ministry of Health which stated that the curriculum and the graduate competency of midwifery education cannot achieve the minimum standard (< 70%) (MoH, 2012a).

The conventional postpartum care learning model that is usually used in education institutions has not been able to produce competent students. This condition proves that innovations in postpartum care learning process is needed to make the students able to assimilate and apply their knowledge and skills appropriately and, later, in providing service to the community (Cai and Moyer; Doraisamy and Radhakrishnan, 2013).

The integrated postpartum care learning model is one of the innovations to solve the problem in midwifery school graduates' competency. Until currently, there has not been any study that associate the integrated postpartum care learning model with the overall

competency improvement. However, there are many studies that have proven the success of integrated learning with improvement in separate areas that includes cognitive, affective, and psychomotoric areas.

The combined assessment of those areas is conducted in this study and has proven that 32% students who received the integrated postpartum care learning model experience improved competency while no student who received the conventional learning method experiences improved competency (0%). From the perspective of the midwifery education success, the improved competency achieved is not perfect yet.

Still, the result of the integrated postpartum care learning model is still much better than that of the conventional postpartum care learning model. The majority of students who fail in achieving the required competency fail in the postpartum care skill, which was mostly caused by inadequate initial counseling in breast swelling care management.

This study shows that the students' practical skills are affected by the absence of several factors including support from the lecturer/s, the opportunity to learn, and the integration between theories and practice.(Mabuda et al., 2008). This might be due to the limited time for practical learning, which was only once practical session.

This is not enough because for a person to master the counseling skill, more time is needed. Graduates' competency is not only determined by the learning model used. This has become the limitation of this study. This study only emphasizes on one part of the learning process. Some studies stated that there are 2 categories of factors that affect learning process results: internal factors of the student and external factors that are affected by the academic atmosphere.

Student input quality, learning attitude and motivation are some of the internal controls that have strong correlation with learning result achievement. The learning process iteself consists of several aspects, such as the university organization quality, transparent and accountable management, curriculum (including learning method), academic and non-academic human resource quality, and adequate education facilities and infrastructures (DGHE, 2012; Guimarães and Carnoy, 2012; Abdulghani et al., 2014; Sanaienasab et al., 2013). A study on factors influencing learning results stated that the academic atmosphere gives 15.5% influence on the learning results of medical students in Chiang Mai University (Pinyopornpanish et al., 2004).

The success of the integrated learning model is also affected by several factors, i.e. facilities-infrastructures, lecturers, and students' readiness. Researchers could not set up the study site according to the needs of the integrated postpartum care learning model

such as adequate references available in the library and adequate internet access. The learning method applied in this study is new for the students and they were not familiar yet with the setting.

The students were demanded to actively search for and dig out knowledge according to their needs. The active learning ability and readiness will very much affect the result of the students' learning (Park et al., 2010). The lecturers in this study consists of a lecturer who taught the postpartum care core material and three integrated lecturers consisting of lecturers who taught psychology, religion, and culture. Before the learning process was conducted, a socialization regarding the integrated postpartum care learning was performed.

However, the learning process was not optimum yet due to the differences in the perception towards integration among the lecturers. There is a possibility that if all lecturers have master the integrated model, the difference between the control group and the treatment group in terms of competency improvement might be bigger.

Conclusion The integrated postpartum care learning model is able to improve the competency of the students in providing postpartum care compared to the conventional learning model. Funding All funding for this study is paid by through the researchers' personal budget. The researchers paid all costs during data collection and report writing.

For the dissemination of the results, the funding is provided by the Government of Indonesia through the Directorate for Research and Community Services, Directorate General for Higher Education of Indonesia. Conflict of Interest There is no personal, professional, or organizational conflicts of interest among the researchers that will affect this study.

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References Abdulghani, H. M., Al-Drees, A. A., Khalil, M. S., Ahmad, F., Ponnamperuma, G. G. & Amin, Z. 2014. What factors determine academic achievement in high achieving undergraduate medical students? A qualitative study. Med Teach, 36 Suppl 1, S43-8. Aidam, B. A., Perez-Escamilla, R. & Lartey, A. 2005. Lactation counseling increases exclusive breast-feeding rates in Ghana. J Nutr, 135, 1691-5. Buskens, I. & Jaffe, A. 2008.

Demotivating infant feeding counselling encounters in southern Africa: do counsellors need more or different training? AIDS Care, 20, 337-45. Cai, J. & Moyer, J. C. A Conceptual Framework for Studying Curricular Effect on Students' learning : Conceptualization and Design in The Leical Project. Available: www.math.udel.edu/LIECAL/papers/Liecal_framework.pdf. Day-Stirk, F. Year. Educating for Quality Care: Midwives, Mothers, Mortality. In: Pertemuan Ilmiah Bidan II, 2013 Bandung. DGHE 2012.

Panduan Pengembangan dan Penyusunan Kurikulum Pendidikan Tinggi (KPT) Pendekatan Kurikulum Berbasis Kompetensi (KBK) dan Pendidikan Berbasis Capaian (PBC). Jakarta: Direktorat Jendral Pendidikan Tinggi. Doraisamy, R. & Radhakrishnan, S. 2013. The effectiveness of integrated teaching over traditional teaching among first year MBBS students: A preliminary Study. Medical Journal of Dr.D.Y.Patil University, 6, 139-141. Fox, N., Hunn, A. & Mathers, N. 2009. Sampling and sample size calculation.

Nottingham: The NIHR RDS for the East Midlands / Yorkshire & the Humber. Guimarães, R. R. D. M. & Carnoy, M. 2012. Does Teacher Qualification Influence Student Achievement Gains? The Case of Plano de Desenvolvimento da Escola Schools in Brazil. Available: http://s3.amazonaws.com/academia.edu.documents/30874130/POSTER_94_ABEP2012-libre.pdf?AWSAccessKeyId=AKIAJ56TQJRTWSMTNPEA&Expires=1405272014&Signature=xXw6NSmt9BnqSSI32gyS5eoLHBI%3D. Harris, A. D., Mcgregor, J. C., Perencevich, E. N., Furuno, J. P., Zhu, J., Peterson, D. E. & Finkelstein, J. 2006.

The use and interpretation of quasi-experimental studies in medical informatics. J Am Med Inform Assoc, 13, 16-23. Inayati, D. A., Scherbaum, V., Purwestri, R. C., Hormann, E., Wirawan, N. N., Suryantan, J., Hartono, S., Bloem, M. A., Pangaribuan, R. V., Biesalski, H. K., Hoffmann, V. & Bellows, A. C. 2012. Infant feeding practices among mildly wasted children: a retrospective study on Nias Island, Indonesia. Int Breastfeed J, 7, 3. MoH. 2012a.

Kualitas Pelayanan Kesehatan Ibu di Indonesia. MoH. 2012b. Pengumpulan Data dan Kajian Kualitas Pelayanan Kesehatan Ibu Pada Tingkat Pelayanan Kesehatan Dasar dan Rujukan di Indonesia Tahun 2012. Lashari, T. A., Alias, M. B., Kesot, M. J. & Akasah, Z. a. B. Year. The Effect of Integrated Affective-Cognitive Learning Approach on Classroom Behavioral Engagement of Engineering Students.

In: International Conference on Active Learning (ICAL 2012), 2012. Mabuda, B., Potgieter, E. & Alberts, U. 2008. Student Nurses' Experiences during clinical practice in the

Limpopo Province. Curationis, 31, 19-27. Murniati. 2010. Hubungan Persepsi Tentang Kualitas Proses Pembelajaran dan Minat Belajar dengan Prestasi Belajar Pada Mata Kuliah Asuhan Kebidanan Ibu III Pada Mahasiswa Reguler Semester III Di Akademi Kebidanan Harapan Mulya Ponorogo. Magister Kedokteran Keluarga, Universitas Sebelas Maret. Nisa', F. 2012.

Analisis Kinerja Bidan Delima dalam Penerapan Standar Pelayanan Nifas (Studi Kasus di Kota Surabaya). Magister, Universitas Diponegoro. Pannucci, C. J. & Wilkins, E. G. 2010. Identifying and avoiding bias in research. Plast Reconstr Surg, 126, 619-25. Park, J.-H., Lee, E. & Bae, S. H. 2010. Factors Influencing Learning Achievement of Nursing Students in E-learning. J Korean Acad Nurs, 40, 182-190. Pinyopornpanish, M., Sribanditmongkok, P.,

Boonyanaruthee, V., Chan-Ob, T., Maneetorn, N. & Uuphanthasath, R. 2004. factor Affecting Low Academic Achievement of Medical Students in the Faculty of Medicine, Chiang Mai University. Chiang Mai Med Bull 43, 15-23. Sanaienasab, Jahan, R. & Saffari 2013. Influential factors on academic achievement of university students. Iranian Quarterly of Education Strategies, 5, 243-249.

Santoso, S. 2014. Statistik Mutivariat Edisi Revisi. Jakarta: Elex Media Komputindo. Sawono, J. 2013. Model-Model Linear dan Non Linear dalam IBM SPSS 21. Jakarta: Elex Media Komputindo. Sugiyono 2012. Statistika Untuk Penelitian. Bandung: Alfabeta. Sugiyono 2013. Metode Penelitian Kuantitatif, Kualitatif, dan R&D. Bandung: Alfabeta. Unfpa. Maternal Mortality Ratio [Online]. Available: http://indonesia.unfpa.org/issues-and-challenges/maternal-mortality-ratio [Accessed]. Unicef.

2012. Ringkasan Kajian Kesehatan Ibu dan Anak. Who 2011a. Strengthening Midwifery Toolkit : Module 1 Strengthening Midwifery. www.who.int. Who. 2011b. Three-year study identifies key interventions to reduce maternal, newborn and child deaths [Online]. Available: http://www.who.int/mediacentre/news/releases/2011/reduce_maternal_deaths_20111215/en/index.html [Accessed]. Zurawski, R. M. 1999. Making the Most of Exams: Procedures for Item Analysis [Online]. Oryx Press. Available: http://faculty.mansfield.edu/lfeil/201/item-analysis-explained.htm

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