

## The Choice of Antenatal Care and Delivery Place in Surabaya (Based on Preferences and Choice Theory)

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**Abstract:-** Person's desire to do a pregnancy examination is determined by the service place that suits the tastes and facilities owned by it. Until now, the utilization of antenatal care by pregnant women is still low (Mardiana, 2014). The purpose of the study is to analyze factors affecting the utilization of antenatal care and delivery place in Surabaya city based on the preferences and choice theory.

Type of survey research is cross sectional approach, the population is mothers who have children aged 1-12 months in Surabaya. The large sample of 250 mothers who have children aged 1-12 months in 2013 is taken by simple random sampling technique. Variables of the research are the preference elements and steps, choice elements and steps, utilization of antenatal care and delivery place. Data were collected through questionnaires and secondary data were then analyzed with descriptive statistics in the form of a frequency distribution, shown by the schematic diagram.

The result showed that the preference elements and steps showed almost half (42.9%) desire to give birth in a health care because of information got from someone else, while the choice element and step shows the bulk (57.1%) of the criteria of delivery place chosen is a safe, comfortable and cheap delivery place, the labor place which is the main choice most (57.1%) is cheap, comfortable, close.

Conclusion of the research based on the preferences and choice theory can be found three (3) new theories, they are preferences become choice, preferences do not become choice, choice is preceded by preferences.

**Keywords:-** Preferences, Choice, health care

### I. INTRODUCTION

Health care place is one of the factors that play a great role in improving health care. Health centers that provide services to the patient's satisfaction show that the health service is in accordance with the patient's choice.

Pregnant woman as a customer when she comes to health care places such as health center, hospital, Private Practice Midwives (CPM), she does not only get the desired service but she has needs and expectations of health care received (Health, 2001).

Pregnant woman as a health care customer in achieving customer's satisfaction has the right to the services received. Seven (7) rights received by pregnant woman as a customer of health service, they are; 1) getting information, 2) easy access in service, 3) clarity of information, 4) obtaining safe care, 5) obtaining award, 6) comfort in arguing, 7) continuity of health care (Yanuarua, 2013).

Choice of delivery place or pregnancy examination is determined by the economy condition. Higher income so the percentage of health problems is greater. Poor mothers are more likely to choose indigenous medical practitioner of labor compared to health workers (Tann, 2007).

Until now, the utilization of antenatal care to the pregnant women is still low. In Indonesia, the utilization of antenatal care by health care is only 66% and the rate is decreasing during the delivery, where mothers checkup their pregnancy at health facilities is 46% (Statistik, 2008). Low coverage of antenatal care is due to some other health care facilities that are competitors so communities have plenty of choice and utilize health services (Supriyanto, 2011).

### II. RESEARCH METHODS

Type of the survey research is cross sectional approach. The population is mothers who have children aged 1-12 months in Surabaya and Midwives in Private Practice (BPS). The large sample of 250 mothers who have children under the age of 1-12 months in 2013 and 25 BPS is taken by simple random sampling technique. The independent variable is the element of preference and choice, the dependent variable is the utilization of antenatal care and place of delivery. Data were collected through questionnaires and secondary data were then analyzed with descriptive statistics in the form of a frequency distribution, shown by the schematic diagram.

Stage of research:

Stage I:

Measurement of preferences variable to the mothers with children aged 1-12 months through:  
a. Preferences elements include:

**1) The need to search for information:**

The need to obtain information about health care desired by individual is not similar, there is a need in accordance with the health services that has been desired, there is a need of information just curious about an institution that is a place of health services (Pyndyck, 2003).

**2) The desire to do a pregnancy examination:**

The desire is the desire for a particular satisfier of a need (Tjiptono, 2004)

**b. Step preferences include:**

- 1) Looking for information about the health care place of pregnant women: pregnant women who want to check up on the health service are actively looking for information include; health service reputation, location, facility and costs.
- 2) Factors considered in choosing a maternal health services: the importance to get health care varies according to the needs and desires of every pregnant woman.
- 3) Alternative choice of a place for a pregnant women healthcare: Pregnant women are always developing the brand image of the health services in accordance with the expectations and needs.

Stage II:

Measurement of choice variable on private practice midwives,

**a. element of choice includes:**

- 1) The level of preferences: the high and low desire of mothers to check pregnancy and labor is very influential on the health care place.
- 2) Type of the desired health care: type of health care chosen by the pregnant women is accordance with the expectations and needs.
- 3) Considerations in deciding the choice of health care: the economic status of a person affects pregnant women in deciding health care choice.

**b. Steps of choice include:**

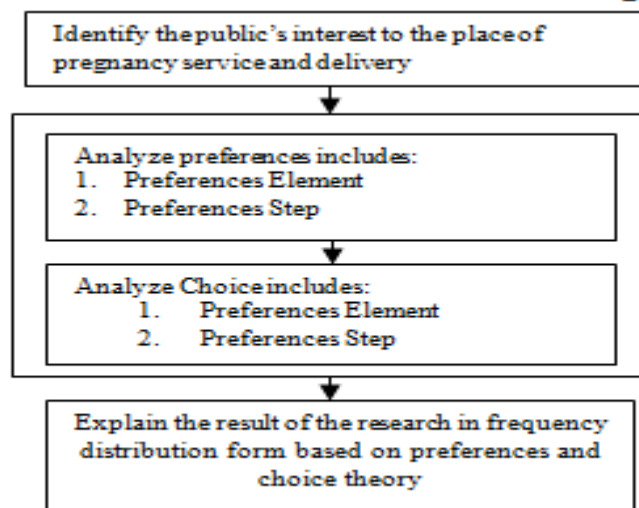
- 1) Consider options

The conditions of health services were assessed by pregnant mothers as an alternative choice (Engel, 2001).

- 2) Evaluation to the choice: Before determining the choice of the delivery service, pregnant women have alternative choices which have been made (Engel, 2001).

- 3) Make a decision: The pregnant women make decisions about delivery service after selecting the alternative health care place.

Stages of the research described in terms of figure 1 below;



**Figure 1 Stages of Research**

### **III. RESULTS AND DISCUSSION**

In the aspect of characteristics respondents, almost all aged 26-39 years was 76.4%, almost entirely first child pregnancy was 67.8% and almost entirely 82.4% do not have a risk of pregnancy. The level of respondents' education is 52% mostly senior high school and the majority of housewives is 53%.

The respondents' interest to health care place is a small portion of 9.72% who has reason for convenient, safe and hygienic health service. Based on the theory of preferences, there are elements of preferences based on the research results is obtained that entirely (100%) need information about delivery

service place and nearly half (42.9%) desire to in a health care because they get the information from other people.

In preferences step showed that pregnant women are entirely active looking for information about the delivery of health services and information resources that are used almost entirely (71.4%) is a private source, a factor which determines the place of delivery to be considered almost entirely (62.3% ) stated cheap and comfortable.

In the theory of choice, the element of choice is obtained include: criteria of delivery place chosen the bulk (57.1%) is the delivery which is safe, comfortable and cheap, while the delivery place which is the main choice most (57.1%) is close to home . Choice steps include: consideration to decide the place of delivery in the health services most (57.1%) is a very good ability of health workers, decision-making determines the delivery place majority (57.1%) is parents. The decision to choose the delivery place in health care in nearly all (75.4%) is safe, cheap, convenient and close to home.

Based on these results, researchers used theory (Gaspers, 2003) with the systematic of request concept stated that;  $Q_{dx} = f(P_x, I, P_r, P_e, I_e, P_{ae}, T, N, A, F, O) \Delta Q_x / \Delta T > 0$ , means that the effect of changes in consumer preferences variables (T) to the quantity of demand or pregnant women who delivered in a health service provider ( $Q_{dx}$ ) is positive. If the preferences of consumers towards the delivery of health care is up or down, then the quantity of labor demand in the health services will rise or fall (ceteris paribus = assuming the value of the other variables in the constant demand function).

Referring to the theory (Gaspers, 2003) can be understood that the high of public preferences towards the delivery in health service cause the public's demand to the place of delivery in the public health service to be high.

Society will make a choice on health care delivery in line with the pull and push theory states that people, especially pregnant women will tend to choose a place of delivery in health care that have a different appeal, although a delivery place in the health care has a similar characteristics and the decision to determine the place of delivery in the health services is very determined by the parents.

#### **IV. CONCLUSIONS AND SUGGESTIONS**

##### **CONCLUSION**

The results of the study concluded that:

1. There are two (2) interests in filling a desire to do the delivery:
  - 1) interest to health service
  - 2) interest to non-health services.
2. Based on the preferences and choice theory can be found three (3) new theories, namely:
  - 1) Preferences become a choice
  - 2) Preferences do not become choice
  - 3) Choice is preceded by preferences

##### **SUGGESTION**

1. It can be done a further research.
2. Health care staffs, especially relate to delivery and pregnancy, are able to pay attention and follow up the improvement of health services, especially to the pregnant women.

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