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Overview of Mothers Knowledge and Attitudes about Baby Spa in Independent Practice Midwife Hj. Kokom Komariah at Cipondoh Tangerang

Nurani hidayat
e-mail: fathuday@gmail.com
Sayid Sabiq Indramayu Midwifery Academy, Indramayu -Indonesia

Abstract

Spa (solus per aqua) is a treatment or treatment using water as a medium. *Baby Spa* is a body spa treatment for babies that can be done in 2 ways, namely, bathing, or swimming and massage. The aim of this study is to describe the knowledge and attitudes of mothers about baby spa in Independent Practice Midwife Hj. Kokom Komariah Cipondoh Tangerang. The author made observations in independent practice midwife Hj. Kokom Komariah Cipondoh Tangerang by conducting oral interviews with 10 mothers who have babies by asking questions about the meaning and benefits of a baby spa, and the results were 7 of which were unable to answer the meaning and benefits of a baby spa. Result shows that the of knowledge about baby spa 15 respondents have less knowledge (50%), 10 respondents (33%) have sufficient knowledge, 5 respondents (17%) have good knowledge and 10 respondents (33,3%) have a positive attitude, while 20 respondents have negative attitudes (66,7%). The conclusion shows that the knowledge about baby spa 15 respondents have less knowledge (50%) and negative attitudes (66,7%). It is suggested to increase and add research knowledge about the knowledge and attitudes of mothers about baby spa.

Keywords : Knowledge, Mother's Attitude, Baby Spa, Body Spa Treatment

Introduction

Midwifery or obstetrics is a medical science that specifically studies all matters relating to the birth of a baby. Thus, the objects of knowledge are pregnancy, childbirth, postpartum and new born babies.

Babies can be grouped into three, namely term babies, premature babies, and babies with low birth weight (LBW). Babies (Age 0 – 11 months) are a period of rapid growth and development which reaches its peak at the age of 24 months, so it is often termed a golden period as well as a period of crisis.

The current paradigm of midwifery services has experienced a shift, from conventional midwifery care to midwifery care that combines conventional and complementary midwifery services. Even though in Indonesia there is no law that specifically regulates the implementation of complementary midwifery services, the implementation of complementary medicine in general has been regulated in the Minister of Health Decree No. 1109/Menkes/Per/IX/2007 concerning alternative complementary medicine.

Based on WHO data, 80% of health practitioners in developing countries prefer alternative medicine to chemical treatment (WHO, 2012). The National Center for Health Statistics Survey (NCCAM) analyzed that in the last five years, there has been an increase in the use of complementary therapies and care from 36% to 62%. Complementary care is influenced by culture and traditions that develop in society. The aim of complementary care is to provide harmony and balance in the provision of complementary care. Complementary care is a complement to medical care.

In accordance with Minister of Health regulations, the definition of complementary and alternative medicine is non-conventional treatment aimed at improving the level of public health including promotive (Health Promotion), preventive (Prevention), curative (Treatment), and rehabilitative (recovery process) with quality, safety, and high effectiveness.

According to the World Health Organization (WHO) (2017), globally around 20-40% of babies aged 0-2 years experience delays in the development and growth process (Bhandari, 2017). The prevalence of child development and growth problems in various developed and developing countries including America is 12-16%, Argentina 22%, and Hong Kong 23% and 13-18% in Indonesia.

According to the Indonesian Ministry of Health (2013), 16% of babies and toddlers in Indonesia experience developmental disorders, both gross and fine motor development, hearing loss, reduced intelligence and speech delays. In infancy and toddlerhood, the development of language skills, creativity, social, emotional and intelligence awareness progresses very quickly and is the basis for subsequent development.

According to RI Minister of Health Regulation No. 66 (2014), for optimal child growth and development, supportive conditions are needed, including relationships between family members and a family environment that provides affection, a healthy physical, mental and social condition, access to health services, adequate food and balanced nutrition, children get the opportunity to stimulate growth and development and early education in the family and community, children have the opportunity to carry out activities and play games that stimulate development.

According to RI Minister of Health Decree No.1109/Menkes/Per/IX/2007, for many midwives and women, complementary midwifery services are an option to reduce medical intervention during pregnancy and childbirth, and based on experience this is quite helpful.

Based on the growth and development of babies and toddlers in the Banten Province Health Profile (2018), it is stated that 7.2 – 8.7% of babies experience malnutrition which then causes delays in the development process including fine motor skills, gross motor skills, language and social behavior.

Spa (solus per aqua) water treatment. Baby spa can be interpreted as treatment for babies using water, the basic elements of a spa consist of water therapy (swimming) and massage (massage). Swimming is very effective for eliminating fatigue and boredom in babies, swimming will stimulate motor movements in babies because the baby's muscles will develop very well, the body's joints will work optimally, body growth will increase and the body will become flexible.

Massage is touch therapy with a technique that uses movement of body parts (hands, muscles, nerves) which has

a stimulating, relaxing effect and improves blood circulation.

Baby spa is useful for providing a feeling of calm, comfort and freshness so that the baby will relax and sleep soundly. It can be seen that 75% of growth hormone is released when an individual sleeps. As the number of hours of sleep a baby increases, the release of growth hormone also increases.

Age 3 – 6 months is the right time for babies to start doing Baby Spa. After 3 months of age, neck control is good so that the baby's head can be upright. Babies also have a pair of reflexes that can make them swim well, namely the diving reflex (Swim Reflex). The diving reflex, also called the bradycardic response, causes babies to hold their breath and open their eyes when submerged.

Lapierre defines attitude as a pattern of behavior, tendencies, or anticipatory loneliness, a predisposition to adapt to social situations, or simply attitude is a response to conditioned social stimuli. Petty & Cacioppo's complete definition says that attitude is a general evaluation that humans make of themselves, other people, objects or issues.

The behavior of parents in wanting to give a baby spa to their baby is influenced by a person's knowledge. Knowledge is the basis for a person's actions. Having sufficient knowledge will motivate someone to give baby spa to their baby, and conversely, lacking knowledge will hinder parents' motivation to give baby spa to their baby.

Research in Australia proves that mothers who take their babies to baby spas who have good knowledge in massage therapy for babies aged around 0-12 months are around 60.7%, while 25.5% of babies are sufficiently knowledgeable in babies who are massaged by their parents, this is Proving that baby massage is still not widely

known by the public, baby massage is also useful for increasing body weight, emotional level relationships and better socialization.

The results of Erni Arifa Muniro Yanti's research regarding mothers' knowledge of baby massage behavior in the Bogor area showed that out of 36 people, almost half (41%) of the mothers had good knowledge, and (58.2%) had sufficient knowledge, so the mother's knowledge of baby massage p-value < 0.05.

The author made observations at the Independent Practicing Midwife Hj. Kokom Komariah Cipondoh Tangerang by conducting verbal interviews with 10 mothers who had babies by asking questions about the meaning and benefits of baby spas, and the results obtained were that 7 of them could not answer the meaning and benefits of baby spas.

The aim of this study is to describe the knowledge and attitudes of mothers about baby spa in Independent Practice Midwife Hj. Kokom Komariah Cipondoh Tangerang.

Method

This research is analytical with a cross sectional approach. The location used in this research was BPM Hj. Kokom Komariah Cipondoh Tangerang. The research was conducted July to September 2019. In this study the population was 30 respondents. The sample in this study was 30 mothers with babies who visited the Independent Practicing Midwife Hj. Kokom Komariah. The sampling technique in this research was total sampling. In this research, the instrument used for data collection was a questionnaire.

The data analysis used in this research is by using univariate analysis, namely analyzing each variable from the results of each study to produce a frequency distribution and percentage of

each variable. This research only wants to describe respondents' knowledge about baby spas at the Independent Practicing Midwife Hj. Kokom Komariah. To find out the mother's level of knowledge about baby spas.

Result

Table 1 Frequency Distribution of Descriptions Based on Mother's Age

No	Age	Amount	Percentage
1	17-25	1	3,3%
2	26-35	14	46,7%
3	36-45	15	50%
	Total	30	100%

The results of the analysis in the table above show that the age group of respondents 17-25 years was 1 respondent (3.3%), the age group 26-35 years was 14 respondents (46.7%), the age group 36-45 years was 15 respondents. respondents (50%). So it can be concluded that most of the respondents in this study were >30 years old.

Table 2 Frequency Distribution of Descriptions Based on Mother's Education

No	Education	Amount	Percentage
1	Rendah	2	6,7%
2	Menengah	28	93,3%
3	Tinggi	0	0%
	Total	30	100%

The results of the analysis in the table above show that 2 respondents had low education (6.7%), 28 respondents had secondary education (93.3%), 0 respondents had higher education (0%). So it can be concluded that most of the respondents in this study had a secondary education level.

Table 3 Frequency Distribution of Descriptions Based on Mother's Source of Information

No	Source of Information	Amount	Percentage
1	Health Workers	11	36,7%
2	Electronic Media	13	43,3%
3	Surrounding Environment	6	20%
	Total	30	100%

The results of the analysis of the table above show that the source of information is through health workers as many as 11 respondents (36.7%), the source of information through electronic media is 14 respondents (43.3%), the source of information is through the surrounding environment. as many as 5 respondents (20%). So it can be concluded that most of the respondents in this study knew about baby spas from electronic media.

Table 4 Frequency Distribution of Descriptions Based on Mother's Knowledge

No	Knowledge	Amount	Percentage
1	Good	5	16,7%
2	Enough	10	33,3%
3	Not enough	15	50%
	Total	30	100%

The results of the analysis of the table above show that 5 respondents (16.7%) had good knowledge, 10 respondents (33.3%) had sufficient knowledge, and 15 respondents had poor knowledge (50%). So it can be concluded that most of the respondents in this study had insufficient knowledge about baby spas.

Table 5 Frequency Distribution of Descriptions Based on Mother's Attitude

No	Attitude	Amount	Percentage
1	Positive	10	33,3%
2	Negative	20	66,7%
	Total	30	100%

The results of the analysis of the table above show that 10 respondents (33.3%)

had a positive attitude, while 20 respondents had a negative attitude (66.7%). So it can be concluded that the mothers who were respondents in this study had a negative attitude towards baby spas.

Discussion

1. Age

Based on table 1, it was found that out of 30 respondents, it showed that the majority of mothers aged 17-25 years were 1 respondent (3%), the age group of respondents was 26-35 years as many as 14 respondents (47%), the age group of respondents >36-45 years was as many as 15 respondents (50%). Age is the age that is calculated from the time of birth until the time one has one's birthday. The older one is, the level of maturity and strength a person will be in thinking and working.

The results of the analysis according to age regarding baby spas at the Mandiri Indah Practical Midwife Febriyanti Kemiri, Kebak Kramat, Karanganyar 2015, obtained 8 respondents (24.25%) in the age group <20 years, 4 respondents (12.12%) in the age group 20 – 35 and 21 respondents (63.63%) were in the age group >35 years.

2. Education

Based on table 2 obtained from 30 respondents, it shows that the majority of mothers had secondary education, 28 mothers (93%) while 2 mothers had low education (7%). The process of changing a person's behavior and attitudes in maturing humans through teaching and training.

The results of the analysis according to age regarding baby spas at the Mandiri Indah Practical Midwife Febriyanti Kemiri, Kebak Kramat, Karanganyar 2015, obtained 2 respondents (6.06%) with low education, 4 respondents

(12.2%) with medium education, and 15 respondents (45, 45%) highly educated.

3. Resources

Based on table 3 obtained from 30 respondents, it shows that the majority of mothers get sources of information through electronic media (MK) as many as 14 mothers (46.7), sources of information through health workers (TK) as many as 11 respondents (36.7%), and sources information through the surrounding environment (LS) as many as 5 respondents (16.7%). Information is a person, object, or place where the information appears, is obtained or arrives and the object that receives it will gain insight.

The results of the analysis according to information sources at the Diponegoro Faculty of Cultural Sciences in 2015 showed that 26 respondents (68.42%) used information sources in the form of textbooks, 8 respondents (21.05%) used references and 4 respondents (10.53%) used magazines.

4. Knowledge

Based on table 4 obtained from 30 respondents, it shows that 5 respondents (17%) have good knowledge, 10 respondents (33%) have sufficient knowledge, and 15 respondents have poor knowledge (50%). Knowledge is the result of human sensing, or the result of a person's knowledge of objects through their senses (eyes, nose, ears and so on). The results of the analysis according to knowledge about baby massage at the Pamulang Community Health Center in 2011 showed that 31 respondents (44.3%) had good knowledge, 21 respondents (30.0%) had sufficient knowledge and 18 respondents (25.7%) had poor knowledge.

5. Attitude

Based on table 5, 30 respondents showed that 10 respondents (33.3%) had a positive attitude, while 20 respondents had a negative attitude (66.7%). Attitudes are behavior or movements that appear or are displayed in interaction with the social environment. In this interaction there is a process of mutual response and mutual influence and mutual adjustment to the social environment. The results of the analysis according to attitudes regarding baby massage at the Pamulang Community Health Center in 2011 showed that 35 respondents (50%) had a positive attitude, while 35 respondents (50%) had a negative attitude.

Conclusion

1. Frequency distribution based on the description of the mother's age regarding baby spa based on the majority aged 36-45 years as many as 15 respondents (50%)
2. Frequency distribution based on description of mother's education regarding baby spa based on the education of the majority of mothers with secondary education as many as 28 people (93.3%),
3. Frequency distribution based on a description of mothers' sources of information about baby spas. Based on information sources, the majority of mothers get information sources through electronic media (ME) as many as 14 people (43.3%),
4. Frequency distribution based on a description of mothers' knowledge about baby spas based on knowledge of mothers with less knowledge (50%).
5. Frequency distribution based on a description of mothers' attitudes about baby spas, based on attitudes, the majority of mothers have negative attitudes (66.7%).

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