

Limitations of Rural Health Services and Assessment Pregnant Mothers in the Pandemic Covid-19 of the Papua Province Indonesian

Semuel Piter Irab

Faculty of Public Health,
Cenderawasih University Jayapura

Arius Togodly

Faculty of Public Health,
Cenderawasih University Jayapura

ABSTRACT

Background: Pandemic infectious diseases cause morbidity and deaths to increase over time globally. Corona virus disease-19 (Covid-19) is an infectious disease found in China in Wuhan City, and spread very quickly to Indonesia and Papua Province. The purpose of this study was to determine limitations of the rural health services, and assessment of the pregnant mothers in the pandemic covid-19 Papua Province of Indonesian. **Methods:** The cross sectional study design, is a type of research to see the relationship between the limitations of rural health services, according to the assessment pregnant mothers in the pandemic covid-19 Papua Province. Jayapura City and Jayapura Regency research sites, which represents all Cities/Regencies in Papua Province. The population is all pregnant mothers in Jayapura City and Jayapura Regency. The samples was 89 pregnant mothers living in rural areas. Data analysis using the Chi-Square test (χ^2). **Results:** The limitation of integrated health service post was very less 38,2% and very good 22,5%. The community health center is very less 41,6% and good 22,5%. Hospitals are very less 31,5% and very good 25,8%. The practice of doctors / midwife is less 30,3% and very good 31,5%. The limitations of antenatal care were very less 38,2% and good 22,5%. The limitation treatment of the sick pregnant mothers was 39,3% and good 22,5%. The prevalence covid-19 rural is very high 40,4% and low 20,2%. **Assessment of the significant pregnant mothers with prevalence covid-19 of rural,** the limitations of integrated health service posts, community health centers, hospitals, doctor/midwife practices, limitations in pregnant mothers, and limitations of treatment for sick pregnant mothers. **Conclusion:** The adverse effects of the pandemic covid-19 are increasing day by day, the provincial government of Papua implements health protocols to protect the public, in other parts of pregnant mothers who don't suffer from corona virus, but suffering from other illnesses and wanting to visit a health service unit is limited.

Keywords: Limitations of rural health services, assessment pregnant mothers

BACKGROUND

December 2019, Mysterious pneumonia cases were first discovered in Wuhan city, Hubei Province of China. According to reports from China that the transmission of mysterious diseases comes from markets fish and animals[1]. From 18 to 29 December 2019, there were five patients suffering from mysterious illnesses. Strange symptoms caused by a respiratory disorder called Acute Respiratory Distress Syndrome (ARDS) [2].

In January 2020 the prevalence of respiratory disorders increased, or spread very quickly from Hubei Province, China, Japan, Korea, Thailand, Singapore, Indonesia, Europe, America, Africa, Australia, and become a serious problem in the world[3]. Based on the first World Health Organization research, this mysterious disease, called the novel 2019 coronavirus (2019-nCov). On February 11, 2020, World Health Organization announced the official name of this mysterious disease is Corona Virus Disease-19[2].

Pandemic infectious diseases cause morbidity and death to increase over time globally. Corona virus disease-19 (Covid-19) was infectious disease found in China in Wuhan City, and spread very quickly to Indonesia and Papua Province. Up to June 16, 2020 the prevalence of covid-19 in Papua Province increased.

Data source for Papua Province Covid-19 Control, Prevention and Handling Task Force (16 June 2020). Peoples in Monitoring 52,9%, Patients in Monitoring 6,0%, patients positive 20,5%, and treated 12,3%, while 8,0% patients recovered and 0,2% died. Province Papua of positive patients increased 19 while those who recovered and died were lower than in March - June 2020. This causes a very large influence covid-19 on socioeconomic status in the Regencies/City in Papua Province of Indonesia[4].

Covid-19 has a big influence globally, December 2019 - June 2020. The impact of covid-19 limits health services to the community, which is not positive covid-19. However, peoples who have other diseases do not get maximum health services in the health service unit. However, peoples who have other diseases do not get maximum health services in the health service unit. Such as integrated health service posts, community health centers, hospitals, doctor/ midwife practices, weighing toddlers, antenatal care, toddlers and pregnant mothers sick is limited treatment to the health service unit[5].

The health protocol is made by the government, to protect its peoples from covid-19 transmission. Thus the community stays at home, works at home, does not carry out social activities in general or in groups, not gather in large numbers in public places, public places are closed or restricted. This is bad for pregnant mother, breastfeeding mothers, infants, and toddlers who are sick or not sick. So that those who visit the health service unit, do not get maximum health services[6].

Large-scale social restrictions on society globally, causing the mother and child morbidity to increase, even though the mother and toddlers are not sufferers covid-19[7]. All health services for the general public were restricted, the government only focuses on health services for covid-19 patients. The impact of covid-19 caused world-class health services, very low quality of health services, to the community from December 2019 to June 2020[8].

The quality of health services to the community is low, an important part of this research, to see the limitations of health services for pregnant women, breastfeeding mothers, infants and toddlers in the Indonesian Papua Province.

METHODS

A cross sectional study design, is a type of research to see the relationship of the impact of the pandemic covid-19, and limited health services for rural pregnant mothers in Papua Province[9]. The covid-19 impact caused restrictions on human activities and transportation, so that rural pregnant mothers health services decline. Thus pregnant mothers in rural areas lack the maximum health services, before the pandemic covid-19 in Papua Province.

The Jayapura City and Jayapura Regency research sites represent all the Cities and Regencies in Papua Province. The population is all pregnant mothers living in Papua Province, while the samples were 89 pregnant mothers living in rural areas. Data analysis using the Chi-Square test (χ^2).

RESULTS

Emergency alert status by applying the rules Lock down, physical distancing, social distancing, promotive, preventif, Insider Monitoring, Patients in Monitoring [10]. So that the adverse impact on public health services, thus the community who are not sufferers covid-19, but peoples suffering from other diseases are limited, to carry out checks in the health service unit. This causes many sick peoples who do not go to the health service unit. Such as hospitals, community health centers, integrated health service posts, doctor/midwife practices[11].

Covid-19 has a big influence globally. Much damage to the economies of countries in the world. So many peoples do not work, do not have money, it is difficult to get food, and state income falls[12]. Covid-19 is one of the diseases that limits all the activities of state governments in the world, causing unemployment to increase, peoples losing their jobs, and poverty increasing, health services are restricted to the general public, and the community stays at home[13].

Covid-19 pandemic in Papua Province March - June 2020. The government applies lock down, social distancing, physical distancing, works from home, regional quarantine, large-scale social restrictions, go outside using a mask, personal hygiene, hygiene and sanitation at home. The health protocol, developed by the Papua Provincial government, causes differences in health services between urban and rural areas. So that health services integrated health service posts, community health centers, hospitals, doctor/midwife practices, antenatal care, and sick pregnant mothers, do not get maximum health services in Papua Province.

Limitations of rural health services in the pandemic covid-19, integrated health service post very less 38,2% and very good 22,5%. Community health centers were very less 41,6% and good 22,5%. Hospitals were very less 31,5% and very good 25,8%. Doctor/midwife practice is very less 30,3% and very good 31,5%. Antenatal care is less 38,2% and good 22,5%. Treatment of sick pregnant mothers is very less 39,3% and good 21,3%. The prevalence covid-19 of rural is very high 40,4% and low 20,2%.

Table 1. Distribution of Limitations of Rural Pregnant Mothers Health Services, in the Pandemic Covid-19 Papua Province Indonesia

Limitation Rural Health Services	Very less		Less		Good		Very good	
	n	%	n	%	n	%	n	%
- Integrated post health service	34	38,2	17	19,1	18	20,2	20	22,5
- Community helth centers	37	41,6	17	19,1	20	22,5	15	16,9
- Hospital	28	31,5	16	18,0	22	24,7	23	25,8
- Doktor/midwife practice	27	30,3	15	16,9	19	21,3	28	31,5
- Antenatal care	34	38,2	17	19,1	20	22,5	18	20,2
- Treatment of sick pregnant mothers	35	39,3	22	24,7	19	21,3	13	14,6
Pandemic	Very high		High		Low		Very low	
	n	%	n	%	n	%	n	%
- Prevalance covid-19 of rural	36	40,4	19	21,3	18	20,2	16	18,0

Explanation : Pandemic covid-19 Papua Province, which causes the limitations of rural health services

Health protocol from the government in social restrictions on the community with lock down, social distancing, physical distancing, work from home, large-scale restrictions on society, and regional quarantine, have a negative impact on the limitations of pregnant mothers health services in Papua Province.

Based on the Government of the Republic of Indonesia Regulation, number 21 of 2020 regarding large scale social restrictions, in the context of accelerating the handling of corona virus disease 2019 (Covid-19). Pandemic covid-19 with the number of cases and/number of deaths has increased and spread across regions and across countries. Impacts on the political, economic, social, cultural, defense and security aspects, as well as the welfare of the peoples in Indonesia[14].

Table 2. Relationship between the Limitation of Rural Health Services and the Assessment Pregnant Mothers in the Pandemic Covid-19 Province Papua of Indonesian

	Assessment Pregnant Mothers Rural				Likelihood Ratio			
Limited Health Services	Less		Good				95 CI	
	n	%	n	%	Sig	RP	Lower	Upper
Prevalance covid-19 of rural					**			
- High	35	64,8	19	35,2	0,041	2,456	1,027	5,873
- Low	15	42,9	20	57,1				
Integrated post health service					***			
- Less	39	76,5	12	23,5	0,000	7,977	3,073	20,710
- Good	11	28,9	27	71,1				
Community health centers					***			
- Less	39	72,2	15	27,8	0,000	5,673	2,239	14,370
- Good	11	31,4	24	68,6				
Hospital					***			
- Less	36	81,8	8	18,2	0,000	9,964	3,693	26,885
- Good	14	31,1	31	68,9				
Doktor/midwife practice					**			
- Less	31	73,8	11	26,2	0,001	4,153	1,686	10,229
- Good	19	40,4	28	59,6				
Antenatal care					***			
- Less	33	78,6	9	21,4	0,000	6,471	2,509	16,685
- Good	17	36,2	30	63,8				
Treatment of sick pregnant mothers					**			
- Less	36	65,5	19	34,5	0,025	2,707	1,122	6,529
- Good	14	41,2	20	58,8				

Explanation : 1. Assessment of rural pregnant mothers (a. Lack: Different health services before the pandemic covid-19, b. Good: Health services were not different before the pandemic covid-19) 2. Chi-Square Statistical test (χ^2) 3. Significan (*** < 0,00, ** < 0,05, dan * < 0,1)

The relationship between the limitations of rural health services and the assessment pregnant mothers in the pandemic covid-19 Papua Province of Indonesia. Assessment of the rural pregnant mothers was significant with the prevalence of the covid-19, limitations of integrated health service posts, community health centers, hospitals, doctor/midwife practices, antenatal care, and treatment of sick pregnant mothers. Health services are the primary needs of the community, so that peoples can live healthy. The impact covid-19 was very bad in the province of Papua, resulting in limited health services to pregnanat mothers in the rural areas, thus the health status of pregnant mothers is not controlled by health workers, in the health service unit.

Health promotion and prevention of corona virus are very important, to provide health protection to the community. Health promotion is very important in changing people's behavior, from bad health behavior, to good health behavior. Changes in behavior become an important part in preventing infectious diseases. However transmission of infectious diseases can be limited by the community implementing health protocols[15].

Health, politics and health policy services are a unity in health services. But the role of government is very large in preparing the planning, implementation, and evaluation of health programs. To assess success in the development of national health[16]. Human Resources for health, is a very

important element and influences the improvement of all aspects, such as the health service system for all levels of society. Implementing health insurance policies are health service units, starting from the basic level to the advanced level[17].

Quality service will result in a high level of patient satisfaction. Conversely low quality service, will result in a low level of patient satisfaction. The attitude of health workers plays an important role in achieving quality health services, so consumers are satisfied with health services[18].

Strengthening quality primary health care efforts is one of the health policy directions in the 2015-2019 RPJMN. However, access and quality of basic health services at this time still does not reach the entire population, especially disadvantaged, remote, and archipelago areas. Basic health services are needed to achieve the MDG,s targets that have not been achieved, Sustainable Development Goals (SDGs) 2030 and Minimum Service Standards(MSS). The success of promotive and preventive health services, will increase more and more healthy peoples, thus the greater the coverage of successful health programs in the country [19].

Basic health services are also called basic health services, consisting of several types of health services that are considered essential, to maintain a person's health, family, community, so that they can live productively socially and economically[20].

Public health is an important part of the strength of the country in European countries. Like the European Public Health Association (EUPHA), the Association of Schools of Public Health in the European Region (ASPHER) and the European Observatory on Health Systems and Policies. This institution is an institution and structure of the Association of public health services in Europe, which provides health services, health system, and health policy to the community. Through these institutions and health association structures, ensuring the quality life peoples in Europe[21].

Based on 194 WHO members who are Region of the American, African Region, European Region, Eastern Mediterranean Region, South-East Asia Region, and Western Pacific Region. The world health organization (WHO) is to builds a better and healthier future for peoples throughout the world. WHO has work offices in more than 150 countries, and Secretariat staff. WHO works side by side with the government and other partners for the benefit of everyone's health. Together with WHO and countries in the world, fighting infectious diseases. Such as providing polio immunization to children, prevention of yaws, nutritious food, reduce the percentage of obese children, develop mental health of children, and build a good public health system in the world[22].

Prevention of corona virus disease-19 (civid-19) infection in Indonesia. Based on the Government of the Republic of Indonesia Regulation, number 21 of 2020 regarding large scale social restrictions, in the context of accelerating the handling of corona virus disease 2019 (Covid-19). Pandemic covid-19 with the number of cases and/number of deaths has increased and spread across regions and across countries. Impacts on the political, economic, social, cultural, defense and security aspects, as well as the welfare of the peoples in Indonesia[14].

Impact of Covid-19 in other fields. As in agriculture and global food security. In the agriculture sector, employment declined from 40,2% to 26,8%. Counting 60,4% are families with low income[23]. But the impact covid-19 on the European workforce has decreased drastically, due to

the closing of employment in hundreds thousands of seasonal workers. This happened in France, Germany, Italy, Spain and Poland. Thus, many peoples do not work, do not have income, and do not have sufficient food supplies[24].

The impact of covid-19 on the limitation community food ingredients, where peoples have difficulty getting enough foods, to improve nutritional status. One of the main factors in society is the socio-cultural relations of society and community behavior, utilizing food ingredients. This relates to how to provide food for the family, and how to prevent infectious diseases in the culture of the community[25].

Increasing body immunity, is closely related to nutritious foods. In addition nutritious foods provide immunity against infectious diseases, such as corona virus disease-19 (covid-19). Low immune system, which is obtained from foods low in nutrients, makes it easy for someone to be infected with covid-19, whose transmission is already global.

Pathogenesis of malnutrition consists of 5 stages. First, the inadequacy of nutrients lasts for a long time. Second, the nutrient reserves in the tissues are used to meet inadequacy. This situation lasts a long time, will be a deterioration of tissue, which was characterized by weight loss. Third, there was biochemical change that can be detected by laboratory examination. The fourth was occurrence of changes in bodily functions in the presence of distinctive signs. The fifth is the occurrence of anatomic changes, which can be seen from the appearance of classical signs, so that it has an impact on malnutrition[26].

CONCLUSION

Impact of the pandemic covid-19 from Marth to June 2020 on the Regencies/ City of Papua Province and the limitations of rural health services. Assessment pregnant mothers rural is significant with the prevalence covid-19, limitations of integrated health service posts, community health centers, hospitals, doctor/midwife practices, antenatal care, and limitations on Treatment of sick pregnant mothers.

The bad impact of the pandemic covid-19 is increasing day by day, the Papua Provincial government is implementing health protocols to protect the public, in other parts of pregnant mothers who don't have corona virus, but suffering from other illnesses and wanting to visit health service unit is limited.

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