LAMPIRAN

DAFTAR RIWAYAT HIDUP

A. Data Pribadi

Nama Lengkap	:	Selly Marlina
Tempat/Tanggal Lahir	:	Balikpapan, 10 Maret 2001
Jenis Kelamin	:	Perempuan
Agama	:	Islam
Alamat	:	Jl. Ratindo Raya Tahap 2 Blok R
Alamat Email	:	sellymrln10@gmail.com
Nama Ayah	:	Saruddin
Nama Ibu	:	Maniah

B. Riwayat Pendidikan Formal

Tahun Tamat	Sekolah/Institusi/Universitas	Jurusan
2013	SD Negeri 012 Balikpapan Selatan	-
2016	SMP Negeri 18 Balikpapan Selatan	-
2019	SMA Negeri 5 Balikpapan Selatan	IPA

Lampiran 2 Surat Telah Melaksanakan Penelitian

PEMERINTAH KABUPATEN KUTAI KARTANEGARA
UPT DINAS KESEHATAN
PUSKESMAS LOA KULU
KECAMATAN LOA KULU
Alamat : Jl. Mulyo pranoto RT. I Loh Sumber Telp : (0541) 6666680
Email : loakulupuskesmas@gmail.com Kode Pos : 75571

Nomor   : B-109/DINKES/Pusk-LK/443.33/5/2023
Lampiran   : -
Perihal   : Permohonan Izin Penelitian

Yth : Kepada
       Universitas Muhammadiyah
       Kalimantan Timur
       di –
              Samarinda

Sehubungan dengan surat dari Program Studi Kesehatan Masyarakat. Fakultas Kesehatan Masyarakat No: 498/FIK.3/B/2023 Perihal Permohonan Izin Penilitian di Puskesmas Loa Kulu. Sebagaimana perihal tersebut di atas bersama ini kami sampaikan bahwa :

Pada prinsipnya kami sebagai Kepala UPTD Puskesmas Loa Kulu tidak berkeberatan menerima mahasiswa Universitas Muhammadiyah Kalimantan Timur a/n :

Nama   : Selly Marlina
NIM   : 1911102413027

Untuk melaksanakan Penelitian sehubungan dengan Penyusunan Skripsi, dengan Judul : "Hubungan Riwayat Literasi Kesehatan Ibu Selama Kehamilan dengan Kejadian Berat Bayi Rendah (BBLR) di Kabupaten Kutai Kartanegara.

Demikian surat ini kami sampaikan untuk dapat di ketahui dan dipergunakan sebagaimana mestinya.

Loa Kulu, 25 Mei 2023
Kepala

Hidayatullah. ST. M.Kes
Nip. 19750512 199603 1 003

UMKT
Program Studi
Kesehatan Masyarakat
Fakultas Kesehatan Masyarakat

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Website http://kesmas.umkt.ac.id
email: kesmas@umkt.ac.id

Kalimantan Timur

بِسْمِ اللهِ الرَّحْمَنِ الرَّحِيْمِ

Nomor   : 497/FIK.3/C.3/B/2023
Lampiran : -
Perihal   : **Permohonan Izin Penelitian**

Yth.
Kepala Puskesmas Loa Kulu Kutai Kartanegara
di Tempat

Assalamu'alaikum Warahmatullahi Wabarakatuh

Dengan hormat teriring salam dan do'a kami haturkan semoga Bapak/Ibu selalu dalam keadaan sehat walafiat.

Sehubungan penyusunan tugas akhir Skripsi Mahasiswa Program Studi S1 Kesehatan Masyarakat, Fakultas Kesehatan Masyarakat, Universitas Muhammadiyah Kalimantan Timur, bersama ini disampaikan permohonan izin penelitian di Puskesmas Loa Kulu dengan nama mahasiswa berikut :

Nama   : Selly Marlina
NIM   : 1911102413027
Judul Penelitian : Hubungan Literasi Kesehatan Ibu Pada Riwayat Kehamilan Dengan Kejadian Berat Bayi Lahir Rendah (BBLR) di Wilayah Kerja Puskesmas Loa Kulu

Pelaksanaan waktu kegiatan disesuaikan dengan tempat Bapak/Ibu pimpin. Demikian yang dapat disampaikan, atas perhatian dan kerjasamanya kami mengucapkan terima kasih.

Wassalamu'alaikum Warahmatullahi Wabarakatuh

Samarinda, <u>03 Dzulqa'idah 1444 H</u>
23 Mei 2023 M

Ketua Prodi S1 Kesehatan Masyarakat

Nida Amalia, M.PH
NIDN. 1101119301

<u>Tembusan disampaikan kepada:</u>
1. Mahasiswa yang bersangkutan
2. Arsip

Kampus 1 : Jl. Ir. H. Juanda, No.15, Samarinda
Kampus 2 : Jl. Pelita Perona Mahakam, Samarinda

Informed Consent

Responden yang kami hormati,

Kami yang bertandatangan dibawah ini:

Nama Tim Peneliti **: 1. Lia Kurniasari M.Kes**

2. Ade Kumalasari

3. Hana Firyal

4. Muhammad Ade Riziq

5. Selly Marlina

6. Siti Rahma Sri Widyawati

adalah Tim Peneliti (Dosen dan Mahasiswa) prodi S1 Kesehatan Masyarakat   Fakultas Kesehatan Masyarakat Universitas Muhammadiyah Kalimantan Timur saat ini sedang melakukan penelitian sebagai bagian dalam proses penyelesaian studi, penelitian yang dilakukan berjudul "Determinan Kejadian BBLR di Wilayah kerja Puskesmas Loa Kulu Di Kabupaten Kutai Kartanegara Tahun 2023".

Penelitian ini bertujuan untuk mengetahui faktor yang berhubungan dengan kejadian BBLR di wilayah kerja puskesmas Loa Kulu. Untuk hal tersebut maka kami mohon partisipasi Ibu dalam penelitian ini. Tidak ada kerugian dalam partisipasi penelitian ini. Semua data yang dikumpulkan melalui lembar ini akan dirahasiakan, penulisan nama dengan inisial sehingga sangat diharapkan untuk mengisi dengan sejujurnya. Dan seluruh data hanya disajikan sebagian bentuk pengembangan ilmu. partisipasi ibu disini bersifat sukarela tanpa ada paksaan dari pihak manapun. Peserta berhak untuk ikut ataupun tidak ikut berpartisipan tanpa adanya sanksi dan konsekuensi buruk dikemudian hari, dan jika ada pertanyaan lebih lanjut dapat menghubungi salah satu perwakilan tim peneliti atas nama Ade Kumalasari di No telp /wa 082257262040.

Bila Ibu berkenan menjadi responden silahkan mengisi dan menandatangani pada bagian bawah lembar persetujuan yang telah disediakan.

 Atas perhatian Ibu, kami ucapkan terima kasih banyak.

Surat Pernyataan Persetujuan

Setelah membaca dari penjelasan diatas maka saya telah mengerti dan juga paham dengan baik, saya:

Nama   :

Alamat   :

No Telp   :

bahwa saya menyatakan setuju dengan sukarela untuk berperan sebagai subjek dalam penelitian ini yang berjudul "Determinan Kejadian BBLR di Wilayah kerja Puskesmas Loa Kulu Di Kabupaten Kutai Kartanegara Tahun 2023"

Demikian persetujuan ini saya buat dengan penuh kesadaran.

Hormat Kami,   Loa Kulu,   2023

                                        Yang Membuat Pernyataan

Tim Peneliti

Data Karakteristik Responden

Petunjuk Pengisian: (   )

Bacalah dengan teliti pertanyaan yang telah ada.

Kode Responden: (diisi oleh peneliti)

A. Identitas Responden

1) Inisial Nama   :

2) Usia saat ini   :

3) Usia Ibu saat hamil terakhir yang didata saat penelitian :

4) Pendidikan Terakhir   :

    a. Tidak Sekolah/Tidak Tamat SD

    b. Tamat SD

    c. Tamat SMP

    d. Tamat SMA

    e. Tamat S1

5) Pekerjaan Ibu   :

6) Pendapatan keluarga dalam 1 bulan   :

    a. < Rp. 3.394.513

    b. ≥ Rp. 3.394.513

B. LITERASI KESEHATAN IBU PADA RIWAYAT KEHAMILAN

Petunjuk pengisian:

1.Berilah tanda centang pada salah satu jawaban yang dianggap benar

2.Semua item pertanyaan mohon diisi

LITERASI KESEHATAN IBU PADA RIWAYAT KEHAMILAN			
MEDIA NON DIGITAL			
NO.	PERTANYAAN	YA	TIDAK
1.	Saya memperoleh informasi terkait kehamilan dari brosur		
2.	Saya memperoleh informasi terkait kehamilan dari spanduk		
3.	Saya memperoleh informasi terkait kehamilan dari x-banner		
4.	Saya memperoleh informasi terkait kehamilan dari keluarga, teman dan kenalan		

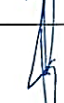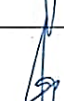| NO.	PERTANYAAN	YA	TIDAK
5.	Saya memperoleh informasi terkait kehamilan dari profesional kesehatan seperti dokter, bidan dan lainnya		
MEDIA DIGITAL			
NO.	PERTANYAAN	YA	TIDAK
6.	Saya memperoleh informasi terkait kehamilan dari e-book atau buku elektronik		
7.	Saya memperoleh informasi terkait kehamilan dari aplikasi kesehatan ibu dan anak		
8.	Saya memperoleh informasi terkait kehamilan dari website, instagram, facebook, tiktok dan youtube		

LEMBAR KONSULTASI BIMBINGAN SKRIPSI

Nama   : Selly Marlina

NIM   : 1911102413027

Judul Skripsi   : Hubungan Literasi Kesehatan Ibu Pada Riwayat Kehamilan Dengan Kejadian Berat Bayi Lahir Rendah (BBLR) di Wilayah Kerja Puskesmas Loa Kulu

Nama Pembimbing : Lia Kurniasari M.Kes

NO	TANGGAL	KONSULTASI	HASIL KONSULTASI	PARAF
1.	11 November 2022	Menentukan tema dan judul	ACC	
2.	18 Januari 2023	Konsultasi pengambilan data di Dinas Kesehatan Provinsi Kalimantan Timur dan Dinas Kesehatan Kabupaten Kutai Kartanegara	Masukan dan saran	
3.	25 Januari 2023	Pelaporan hasil pengambilan data di Dinas Kesehatan Provinsi Kalimantan Timur dan Dinas Kesehatan Kabupaten Kutai Kartanegara	Masukan dan saran	
4.	8 Februari 2023	Konsultasi BAB 1 dan BAB 2	Revisi/Perbaikan masukan dan saran	
5.	14 Februari 2023	Konsultasi mengenai studi pendahuluan di Puskesmas	Masukan dan saran	
6.	24 Februari 2023	Pelaporan hasil studi pendahuluan di Puskesmas	Masukan dan Saran	

7.	7 Maret 2023	Konsultasi penelitian	Masukan dan saran	
8.	22 Maret 2023	Konsultasi Bab 1 dan 2	ACC	
9.	6 Mei 2023	Konsultas uji validitas dan reliabilitas	Masukan dan saran	
10.	13 Mei 2023	Konsultasi hasil validitas dan reliabilitas	ACC	
11.	19 Juni 2023	Konsultasi Bab 3 dan 4	Revisi/Perbaikan masukan dan saran	
12.	23 Juni 2023	Konsultasi Bab 3 (Gambaran umum lokasi penelitian dan hasil analisis univariat)	Revisi/Perbaikan masukan dan saran	
13.	26 Juni 2023	Konsultasi Bab 3 dan 4	Revisi/Perbaikan masukan dan saran	
14.	29 Juni 2023	Konsultasi Bab 3 (Gambaran umum lokasi penelitian, hasil dan pembahasan analisis univariat serta analisis bivariat) dan Bab 4 (Kesimpuan)	ACC	

Hubungan Literasi Kesehatan Kehamilan dengan Kejadian BBLR di Kabupaten Lombok Utara

The Relation between Pregnancy Health Literacy with Low Birth Weight Outcome in North Lombok Regency

Aulia Zahro Novitasari[1], Yayi Suryo Prabandari[2], Retna Siwi Padmawati.[3]

Abstract

Background: Low birth weight (LBW) is one of the main contributor for infant mortality and is influenced by maternal pregnancy status such as pregnancy health literacy. Women with low literacy levels tend to have difficulty in learning and following new information directions, thus affecting the level of health knowledge during pregnancy to birth, and obstetric health behavior.

Objective: To analyze the relationship between pregnancy health literacy with low neonatal birth weight.

Method: This study was a secondary data analyzed of Peer Health Study Intervention in North Lombok that using a nested case control design. This study was conducted on 292 women. Cases group consisted of 73 women with LBW and control group consisted of 219 women with non-LBW. Analysis of bivariate results of the study using chi square.

Results: The results of this study indicated an association of pregnancy health literacy with LBW which measured by pregnancy care. Lesser of pregnancy care (OR: 1.8, 95% CI: 1.04-3.26) associated with the greater of LBW birth.

Conclusion: The improvement of pregnancy health literacy through health promotion for pregnant women can improve pregnancy health and prevent LBW.

Keywords: *low birth weight, health literacy, pregnancy health literacy*

[1] Universitas Gadjah Mada
[2] Universitas Gadjah Mada
[3] Universitas Gadjah Mada

FOCUS: GLOBAL HEALTH AND DEVELOPMENT

Pregnancy-Related Health Information-Seeking Behaviors Among Rural Pregnant Women in India: Validating the Wilson Model in the Indian Context

Ashavaree Das, PhD[a]*, and Madhurima Sarkar, PhD[b]

[a]Prince Sultan University, Riyadh, Saudi Arabia; [b]Nationwide Children's Hospital, Center for Innovation in Pediatric Practice, Columbus, Ohio

Objectives: Understanding health information-seeking behaviors and barriers to care and access among pregnant women can potentially moderate the consistent negative associations between poverty, low levels of literacy, and negative maternal and child health outcomes in India. Our seminal study explores health information needs, health information-seeking behaviors, and perceived information support of low-income pregnant women in rural India. **Methods**: Using the Wilson Model of health information-seeking framework, we designed a culturally tailored guided interview to assess information-seeking behaviors and barriers to information seeking among pregnant women. We used a local informant and health care worker to recruit 14 expectant women for two focus group interviews lasting 45 minutes to an hour each. Thirteen other related individuals including husbands, mothers, mothers-in-law, and health care providers were also recruited by hospital counselors for in-depth interviews regarding their pregnant wives/daughters and daughters-in-law. Interviews were transcribed and analyzed by coding the data into thematic categories. **Results**: The data were coded manually and emerging themes included pregnancy-related knowledge and misconceptions and personal, societal, and structural barriers, as well as risk perceptions and self-efficacy. Lack of access to health care and pregnancy-related health information led participants to rely heavily on information and misconceptions about pregnancy gleaned from elder women, friends, and mothers-in-law and husbands. Doctors and para-medical staff were only consulted during complications. All women faced personal, societal, and structural level barriers, including feelings of shame and embarrassment, fear of repercussion for discussing their pregnancies with their doctors, and inadequate time with their doctors. **Conclusion**: Lack of access and adequate health care information were of primary concern to pregnant women and their families. **Policy Implications**: Our study can help inform policies and multi-sectoral approaches that are being taken by the Indian government to reduce maternal and child morbidity and burdens.

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Investigating the effect of health literacy level on improving the quality of care during pregnancy in pregnant women covered by health centers

Leila Asadi[1,2], Fatemeh Amiri[3], Hadise Safinejad[4]

Abstract:

BACKGROUND: Health literacy is the capacity to acquire, process, and understand basic information and services necessary for appropriate health decisions. Given the importance of health literacy in women, the aim of the present study was to determine the effect of health literacy level on improving the quality of care during pregnancy in pregnant women.

MATERIALS AND METHODS: The present study was a cross-sectional analytical study. In this study, 130 women referred to Yazd health centers were examined. Health literacy questionnaires and a researcher-made checklist of the quality of pregnancy care were used to gather information. The researcher-made checklist of the quality of pregnancy care was in accordance with the standard protocol of the Ministry of Health and Medical Education, entitled Integrated Health Care for Pregnant Mothers, which was validated and reliable. SPSS statistical software version 19 and t-test and ANOVA statistical tests were used to analyze the data.

RESULTS: According to the findings, the average score of health literacy in pregnant women was 74.09, which showed that the level of health literacy was in the marginal or border range. People with higher health literacy received significantly more prenatal counseling than other women and had a planned pregnancy ($P = 0.04$).

CONCLUSION: The level of health literacy in pregnant women is unfavorable. Given that the high level of health literacy in women in society can lead to an increase in the quality of pregnancy care, so to increase health literacy in women, it is recommended that regular training in society by health-care providers be given more attention.

Keywords:
Health-care quality, health literacy, pregnancy

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Accepted: 23-05-2020
Published: 30-10-2020

Introduction

Literacy involves a set of complex abilities to understand and apply the basic system of a culture for personal development and social development, which is seen as a diverse set of skills needed by an adult to function and behave in society. One of these skills is health literacy, which includes a set of reading, listening, analysis, decision-making, and the ability to use these skills in health situations. Health literacy is the result of the joint efforts of social and individual factors and addresses the concerns and dimensions of literacy in the field of health. Health literacy has now been introduced as a global issue in the last century.[1] The World Health Organization has identified health literacy as one of the biggest determinants of health, advising countries around the world to establish an association to monitor and coordinate strategic activities to improve health literacy.[2]

HUBUNGAN STATUS SOSIO EKONOMI IBU DENGAN KEJADIAN BERAT BADAN LAHIR RENDAH DI PUSKESMAS LA'O

Silfia Angela N Halu

Prodi DIII Kebidanan FIKP Unika St. Paulus Ruteng. Jl. Jend. Ahmad Yani, No.10, Ruteng-Flores 86508

Email: occe.halu@gmail.com

Abstract: Relationship of Socio-economic Status and the Occurrence of Low Birth Weight at the Lao Public Health Center. This study aims to determine the relationship of socioeconomic status with the incidence of low birth weight in the Lao Public Health Center. The research was conducted at the Lao Public Health Center with 34 mothers who had babies <1 year old. The sampling technique uses total sampling. Analysis of the data used is bivariate correlation. Collecting data using questionnaires and mother's MCH handbook. The results showed low birth weight was closely related to maternal education ($p < 0.001$), maternal employment ($p = 0.010$) and family income ($p < 0.05$). Age had no effect on low birth weight ($p = 0.66$). Mother's education, mother's occupation and family income are related to the incidence of low birth weight.

Keywords: Age, education, occupation, income, birth weight

Abstrak: Hubungan Status Sosio ekonomi dengan Kejadian Berat Badan Lahir Rendah di Puskesmas Lao. Penelitian ini bertujuan untuk mengetahui hubungan status sosioekonomi dengan kejadian berat badan lahir rendah di Puskesmas Lao. Penelitian ini dilaksanakan di Puskesmas Lao dengan 34 ibu yang memiliki bayi <1 tahun. Teknik pengambilan sampel menggunakan total sampling. Analisis data yang digunakan adalah *bivariate correlation*.Pengumpulan data menggunakan kuesioner dan buku KIA ibu. *Hasil Penelitian menunjukan b*erat badan lahir rendah berhubungan erat dengan pendidikan ibu ($p < 0.001$), pekerjan ibu ($p = 0.010$) dan pendapatan keluarga ($p < 0.05$). Usia tidak berpengaruh terhadap berat badan lahir rendah ($p = 0.66$). Pendidikan ibu, pekerjaan ibu dan pendapatan keluarga berhubungan dengan kejadian berat badan lahir rendah.

Kata Kunci: Usia, pendidikan, pekerjaan, pendapatan, berat badan lahir

HUBUNGAN PERILAKU IBU SELAMA HAMIL DENGAN BERAT BADAN BAYI BARU LAHIR
The Relationship Of Maternal Behavior During Pregnancy With Neonatal Weight

Siti Aisyah[1]
[1]Dosen Akademi Kebidanan Helvetia Medan, Indonesia
Email: sitiaisyah@helvetia.ac.id.

ABSTRACT
       Background : *all pregnant women certainly crave the birth of a healthy and normal baby. One characteristic of normal birth babies is birth with a weight of 2500-4000 grams. LBW prevalence has increased from 2017 as many as 51 babies (10.6%) to 2018 in January-July as many as 25 babies (11.7%). Infants born with macrosomia also experienced an increase in prevalence from 2017 as many as 10 babies (1.97%) to 2018 in January-July as many as 5 infants (2.3%).* **Purpose :** *to determine the relationship of behavior, namely knowledge, attitudes and actions of mothers during pregnancy with neonatal weight.* **Method :** *The type of this research is analytic survey with cross sectional design. The research location was at Niar Clinic Medan. This study was conducted in september 2018. The sampling technique was accidental sampling and the research sample was 30 people. The techniques and methods of data collection was done by using a questionnaire. The data collection methods were primary and secondary data and the data were analyzed by using Chi-Square test.* **Results :** *the results of the statistical test of knowledge variables obtained value of 0.015 <α = 0.05, then Ho was rejected and Ha was accepted. The attitude variable was obtained by the value 0.000 <α = 0.05, then Ho was rejected and Ha was accepted, the action variable was 0.000 <α = 0.05 so Ho was rejected and Ha was accepted.* **Conclusion :** *there is a relationship between knowledge, attitudes and actions of a pregnant woman with neonatal weight at Niar Clinic Amplas Medan in 2018.*
Keywords: Behavior, Knowledge, Attitude, Action, Neonatal Weight
ABSTRAK
       Pendahuluan; Semua ibu hamil pastinya mendambakan kelahiran bayi yang sehat dan normal. Salah satu ciri bayi lahir normal adalah lahir dengan berat badan 2500-4000 gram. Prevelensi BBLR mengalami peningkatan dari tahun 2017 sebanyak 51 bayi (10,6%) ke tahun 2018 bulan Januari-Juli sebanyak 25 bayi (11,7%). Bayi yang lahir dengan macrosomia juga mengalami pningkatan prevelensi dari tahun 2017 sebanyak 10 bayi (1,97%) ke tahun 2018 bulan Januari-April sebanyak 5 bayi (2,3%). **Tujuan:** penelitian ini untuk mengetahui hubungan perilaku yaitu pengetahuan, sikap dan tindakan ibu selama hamil dengan berat badan bayi baru lahir. **Metode:** Jenis penelitian ini adalah survei analitik dengan desain *cross sectional*. Lokasi penelitian di klinik Niar Amplas Medan. penelitian ini dilakukan pada bulan september Tahun 2018 dan sampel penelitian sebanyak 30 orang. Teknik dan cara pengumpulan data dengan menggunakan kuesioner. Metode pengumpulan data yaitu data primer dan data sekunde dan data dianalisis dengan menggunakan uji *Chi-Square*. **Hasil:** penelitian pada uji statistik variabel pengetahuan diperoleh nilai 0,015<α=0,05, maka Ho ditolak dan Ha diterima, pada variabel sikap diperoleh nilai 0,000<α = 0,05, maka Ho ditolak dan Ha diterima, pada variabel tindakan diperoleh hasil 0,000<α = 0,05 maka Ho ditolak dan Ha diterima **Kesimpulan:** ada hubungan pengetahuan, sikap dan tindakan ibu selama hamil dengan berat badan bayi baru lahir di klinik Niar Amplas Medan tahun 2018
Kata Kunci : **Perilaku, Pengetahuan, Sikap, Tindakan, Berat Badan Bayi Baru Lahir**

PENDAHULUAN

1. Hasil Uji Normalitas dan Cut Of Point

Tests of Normality

	Kolmogorov-Smirnov[a]			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Literasi Kesehatan Ibu Pada Riwayat Kehamilan	.185	102	.000	.883	102	.000

Descriptives

			Statistic	Std. Error
Literasi Kesehatan Ibu Pada Riwayat Kehamilan	Mean		5.59	.220
	95% Confidence Interval for Mean	Lower Bound	5.15	
		Upper Bound	6.02	
	5% Trimmed Mean		5.71	
	Median		6.00	
	Variance		4.918	
	Std. Deviation		2.218	
	Minimum		1	
	Maximum		8	
	Range		7	
	Interquartile Range		4	
	Skewness		-.442	.239
	Kurtosis		-.980	.474

2. Hasil Analisis Univariat Karakteristik

Usia Ibu Saat Hamil

			Kejadian BBLR	
			BBLR	Tidak BBLR
Usia Ibu Saat Hamil	20-35 Tahun	Count	28	57
		% within Kejadian BBLR	82.4%	83.8%
	<20 Atau >35 Tahun	Count	6	11
		% within Kejadian BBLR	17.6%	16.2%
Total		Count	34	68
		% within Kejadian BBLR	100.0%	100.0%

Usia Ibu Saat Hamil

			Total
Usia Ibu Saat Hamil	20-35 Tahun	Count	85
		% within Kejadian BBLR	83.3%
	<20 Atau >35 Tahun	Count	17
		% within Kejadian BBLR	16.7%
Total		Count	102
		% within Kejadian BBLR	100.0%

Pendidikan Terakhir

			Kejadian BBLR	
			BBLR	Tidak BBLR
Pendidikan Terakhir	Pendidikan Tinggi	Count	27	51
		% within Kejadian BBLR	79.4%	75.0%
	Pendidikan Rendah	Count	7	17
		% within Kejadian BBLR	20.6%	25.0%
Total		Count	34	68
		% within Kejadian BBLR	100.0%	100.0%

Pendidikan Terakhir

			Total
Pendidikan Terakhir	Pendidikan Tinggi	Count	78
		% within Kejadian BBLR	76.5%
	Pendidikan Rendah	Count	24
		% within Kejadian BBLR	23.5%
Total		Count	102
		% within Kejadian BBLR	100.0%

Pekerjaan Ibu

			Kejadian BBLR		Total
			BBLR	Tidak BBLR	
Pekerjaan Ibu	Tidak Bekerja	Count	32	60	92
		% within Kejadian BBLR	94.1%	88.2%	90.2%
	Bekerja	Count	2	8	10

			5.9%	11.8%	9.8%
		% within Kejadian BBLR	5.9%	11.8%	9.8%
Total		Count	34	68	102
		% within Kejadian BBLR	100.0%	100.0%	100.0%

Pendapatan Keluarga

			Kejadian BBLR		
			BBLR	Tidak BBLR	Total
Pendapatan Keluarga	<UMR	Count	14	23	37
		% within Kejadian BBLR	41.2%	33.8%	36.3%
	≥UMR	Count	20	45	65
		% within Kejadian BBLR	58.8%	66.2%	63.7%
Total		Count	34	68	102
		% within Kejadian BBLR	100.0%	100.0%	100.0%

3. Hasil Analisis Univariat Variabel

Literasi Kesehatan Ibu Pada Riwayat Kehamilan

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Rendah	50	49.0	49.0	49.0
	Tinggi	52	51.0	51.0	100.0
	Total	102	100.0	100.0	

4. Hasil Analisis Univariat

Literasi Kesehatan Ibu Pada Riwayat Kehamilan * Kejadian BBLR Crosstabulation

			Kejadian BBLR		
			BBLR	Tidak BBLR	Total
Literasi Kesehatan Ibu Pada Riwayat Kehamilan	Rendah	Count	22	28	50
		% within Kejadian BBLR	64.7%	41.2%	49.0%
	Tinggi	Count	12	40	52
		% within Kejadian BBLR	35.3%	58.8%	51.0%

Total	Count	34	68	102
	% within Kejadian BBLR	100.0%	100.0%	100.0%

Chi-Square Tests

	Value	df	Asymptotic Significance (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Pearson Chi-Square	5.022[a]	1	.025		
Continuity Correction[b]	4.124	1	.042		
Likelihood Ratio	5.075	1	.024		
Fisher's Exact Test				.035	.021
Linear-by-Linear Association	4.972	1	.026		
N of Valid Cases	102				

a. 0 cells (0.0%) have expected count less than 5. The minimum expected count is 16.67.

b. Computed only for a 2x2 table

Risk Estimate

	Value	95% Confidence Interval	
		Lower	Upper
Odds Ratio for Literasi Kesehatan Ibu Pada Riwayat Kehamilan (Rendah / Tinggi)	2.619	1.116	6.147
For cohort Kejadian BBLR = BBLR	1.907	1.061	3.428
For cohort Kejadian BBLR = Tidak BBLR	.728	.546	.970
N of Valid Cases	102		

HUBUNGAN LITERASI KESEHATAN IBU PADA RIWAYAT KEHAMILAN DENGAN KEJADIAN BERAT BAYI LAHIR RENDAH (BBLR) DI WILAYAH KERJA PUSKESMAS LOA KULU

by Selly Marlina

HUBUNGAN LITERASI KESEHATAN IBU PADA RIWAYAT KEHAMILAN DENGAN KEJADIAN BERAT BAYI LAHIR RENDAH (BBLR) DI WILAYAH KERJA PUSKESMAS LOA KULU

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