

Analisis Perilaku Kesiapan Kesehatan Prakonsepsi Calon Pengantin Berdasarkan Health Belief Model (HBM) di KUA Tapos Kota Depok

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Abstrak

<div style="text-align: justify;">Kesiapan kesehatan prakonsepsi merupakan aspek penting dalam pencegahan komplikasi kehamilan serta peningkatan keselamatan ibu dan bayi. Penelitian ini bertujuan menganalisis perilaku kesiapan kesehatan prakonsepsi calon pengantin berdasarkan konstruk Health Belief Model (HBM), meliputi persepsi kerentanan, keseriusan, manfaat, hambatan, isyarat untuk bertindak, dan efikasi diri. Penelitian ini menggunakan desain kualitatif dengan pendekatan fenomenologi. Informan terdiri atas delapan calon pengantin (empat perempuan dan empat laki-laki) sebagai informan utama serta lima informan kunci yang meliputi penyuluh Kantor Urusan Agama (KUA), tenaga kesehatan puskesmas (dokter dan bidan), dan pejabat Kementerian Agama Kota Depok. Data dikumpulkan melalui wawancara mendalam dan dianalisis menggunakan metode analisis isi. Hasil penelitian menunjukkan bahwa calon pengantin menyadari adanya kerentanan terhadap risiko komplikasi kehamilan, seperti anemia, penyakit keturunan, dan gangguan kesehatan pada anak, serta memandang risiko tersebut sebagai kondisi yang serius dan memerlukan persiapan sejak sebelum kehamilan. Pemeriksaan kesehatan pranikah dipersepsikan memberikan manfaat berupa deteksi dini dan peningkatan kesiapan fisik maupun psikologis. Namun demikian, berbagai hambatan masih ditemukan, terutama keterbatasan informasi yang aplikatif, faktor psikologis seperti rasa malu dan ketakutan terhadap hasil pemeriksaan, serta keterlambatan waktu pemeriksaan yang dilakukan mendekati hari pernikahan. Isyarat untuk bertindak dalam mempersiapkan kesehatan prakonsepsi muncul melalui dorongan pasangan, edukasi tenaga kesehatan, bimbingan perkawinan oleh penyuluh KUA, serta pengalaman keluarga. Tingkat efikasi diri calon pengantin bervariasi dan dipengaruhi oleh motivasi pribadi, dukungan pasangan, serta lingkungan layanan kesehatan. Penelitian ini menegaskan bahwa meskipun calon pengantin telah memahami manfaat persiapan kesehatan prakonsepsi, masih terdapat kesenjangan antara pemahaman dan penerapan praktis di tingkat layanan. Oleh karena itu, diperlukan penguatan edukasi dan pendampingan prakonsepsi yang terintegrasi antara KUA dan puskesmas agar kesiapan kesehatan prakonsepsi calon pengantin dapat terwujud secara lebih optimal.</div><hr /><div style="text-align: justify;">

Preconception health readiness is a crucial component in preventing pregnancy complications and improving maternal and neonatal safety. This study aimed to analyze preconception health readiness behaviors among prospective brides and grooms using the Health Belief Model (HBM), including perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy. A qualitative study with a phenomenological approach was conducted. Participants consisted of eight prospective couples (four women and four men) as primary informants and five key informants, including marriage counselors from the Office of Religious Affairs (KUA), primary healthcare providers (a doctor and a midwife), and officials from the Ministry of Religious Affairs of Depok City. Data were collected through in-depth interviews and analyzed using content analysis. The findings show that prospective couples are aware of their susceptibility to pregnancy-related risks, such as anemia, hereditary conditions, and health problems in children, and perceive these risks as serious and

requiring preparation before pregnancy. Premarital health examinations were perceived as beneficial for early detection and improving physical and psychological readiness. However, several barriers were identified, including limited access to practical health information, psychological factors such as embarrassment and fear of examination results, and delays in undergoing health examinations close to the wedding date. Cues to action emerged from partner encouragement, health education provided by healthcare professionals, premarital counseling conducted by KUA counselors, and family experiences. Levels of self-efficacy varied among prospective couples and were influenced by personal motivation, partner support, and the healthcare environment. This study highlights that although prospective couples generally understand the benefits of preconception health preparation, a gap remains between knowledge and practical implementation at the service level. Strengthening integrated preconception education and continuous support between the KUA and primary healthcare centers is needed to optimize preconception health readiness among prospective couples.</div>