

## The Influence of Social Awareness and Social Skills on the Quality of Midwife Partnerships in Postnatal Care Services

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### KEYWORDS

Social Competence, Social Awareness, Social Skills, Partnership, Midwife, Postnatal Care

### ABSTRACT

Postpartum maternal deaths have always been more than 50% of total maternal deaths from 2016-2021, and the realization of visits by postpartum mothers at Community Health Centers has also not met the target. The low number of visits is due to the fact that postpartum mothers still need strong encouragement and motivation. Midwives have the role of providing information, education and monitoring the condition of postpartum mothers, so midwives need support from social competence and good partnerships with various parties. This research aims to analyze the influence of social competence, which includes social awareness and social skills, on midwife partnerships in postnatal care services. The research design is observational analytic with a cross-sectional time approach. The research location was carried out at 63 Community Health Centers, Surabaya City, Indonesia with a sample of 100 midwives taken using Proportional Stratified Random Sampling. The variables measured are social awareness, social skills and partnerships through distributing questionnaires. Data were analyzed using the chi-square test. This research has gone through an ethical review with number 085/HRECC.FODM/III/2022. The research results showed that the social awareness competency and social skills of midwives related to postnatal care services had a good percentage rating (93%, 81%, 98%). The quality of midwife partnerships in providing postnatal care services is influenced by social awareness ( $p=0.04$  &  $PR=0.714x$ ), but not influenced by social skills ( $p=0.345$ ). If midwives' social awareness is better, the quality of midwife partnerships will be better. Therefore, midwives must be able to establish good relationships and be more open in communicating with colleagues or other work units when serving postpartum mothers.

## 1. Introduction

Maternal Mortality Rate is the number of maternal deaths divided into maternal deaths during pregnancy, childbirth and postpartum. Mothers need good care during these three periods so that they are always in good health (Hutahean, 2013). Maternal mortality and morbidity are the biggest problems in developing countries. According to WHO, as many as 810 mothers die every day due to disease or complications (WHO, 2019). Based on regions in the Province of East Java-Indonesia, the city of Surabaya is ranked fifth as the contributor to the highest number of maternal deaths in 2019, and has the highest proportion of postpartum maternal deaths (76.0%) compared to other regions (East Java Provincial Health Service, 2016; 2017; 2018; 2019; 2020) (Hulloli et al., 2021). Meanwhile, maternal deaths in the city of Surabaya during 2016-2021 were dominated by postpartum maternal deaths and amounted to more than 50.00% of the total number of maternal deaths each year (Surabaya City Health Service, 2017; 2018; 2019; 2020). Maternal deaths occur due to complications during and post pregnancy. The highest causes are bleeding (28%), infection (11%), abortion complications (5%) and obstructed labor (5%). Aminah (2017) added that around 60% of maternal deaths occur immediately after birth, with 50% of deaths occurring within the first 24 hours after birth. More than 65% need to undergo examination and treatment as well as provide education to the mother and her family so that postnatal complications do not occur (Ilango et al., 2023). Good postpartum services can prevent the death of postpartum mothers (Akhenan & Puspitasari, 2011). Postpartum services aim to assess the status of the mother and newborn as well as prevent, detect and treat problems that occur. Midwives have an important role in providing information, education, as well as monitoring and supervising the condition of postpartum mothers. Postpartum mothers must be able to access higher quality health services (Sasaki, 2012). Based on the Pareto principle, the percentage of postpartum visits at Puskesmas

during 2017-2021 did not reach the target, meaning there were obstacles in postpartum services. This can have an impact on hampering monitoring, supervision and examination of the mother's condition after giving birth. Generally, the reason for the low number of visits during the postpartum phase is because the mother does not exercise control. Postnatal care coverage depends on the circumstances and characteristics of the mother. There are many factors that influence mothers in utilizing postnatal care services, such as low level of education, lack of knowledge, distance from home to health service locations and postpartum mothers not realizing the importance of postnatal care services (Titaley, *et al.*, 2009; Dhakal, *et al.*, 2007; Purnamasari, 2018; Prihanti, *et al.*, 2019; Akhenan & Puspitasari, 2011).

Postpartum mothers do not have health checks because they think their condition is normal, or it could also be due to a lack of understanding and information regarding what to do during the postpartum period. Rosmiyati (2016) stated that education is needed so that postpartum mothers understand that postnatal care examinations are beneficial for the mother's health after giving birth and prevent problems from occurring early. Poor delivery of information by midwives results in a lack of encouragement and motivation for postpartum mothers to carry out health checks (Aydin *et al.*, 2021). Midwives have an important role in communicating, providing information and education as well as understanding to postpartum mothers (Ministry of Health of the Republic of Indonesia., 2019). If midwives pay less attention to postpartum mothers' understanding of their health conditions, this can cause postpartum mothers to be less compliant in carrying out health checks at health services. Therefore, midwives must have expertise in influencing postpartum mothers to comply with health checks. The ability to influence postpartum mothers needs to be supported by good social competence (Wahyuni, *et al.*, 2014). Midwives must also be able to establish partnerships with various parties to ensure postnatal mothers utilize postnatal care services (Krisnanto & Pratomo, 2017; Khoiroh, 2018; Matsumara & Gubhaju, 2001; Rahmawati, 2015). Partnerships need to be carried out by midwives with related parties such as colleagues, field cadres, postpartum mothers' families and postpartum mothers' husbands. Based on the background that has been described, this research aims to analyze the influence of social competence (including social awareness and social skills) on the quality of midwife partnerships in providing postnatal care services at Community Health Service Centers.

## **2. Materials and methods**

The design of this research is observational analytic with a cross-sectional time approach. The population in this study were all midwives who served in 63 Community Health Centers in the Surabaya City area with a sample size of 100 midwives. The sampling technique used Proportional Stratified Random Sampling from a number of Community Health Centers representing two strata, namely the Community Health Center strata with postnatal care visits that met the target and those that did not meet the target (Wawan dan Dewi, 2010). Midwives are selected randomly with the number proportionally adjusted to what is needed at each Community Health Center. The selected midwives were then measured regarding social awareness, social skills and partnerships using a questionnaire. The questionnaire is structured in a pattern of positive and negative questions and meets the assumptions of validity and reliability. Data analysis was carried out using the chi-square test to analyze the influence of social awareness and social skills on midwife partnerships in providing postnatal care services. This research has passed the research ethics test at Universitas Airlangga, Dental Health Research Ethical Clearance Commission, Faculty of Dentistry with Number: 085/HRECC.FODM/III/2022.

## **3. Results and Discussion**

### ***Characteristics of Midwives***

An overview of the characteristics of midwives in this study is presented in detail in figure below.

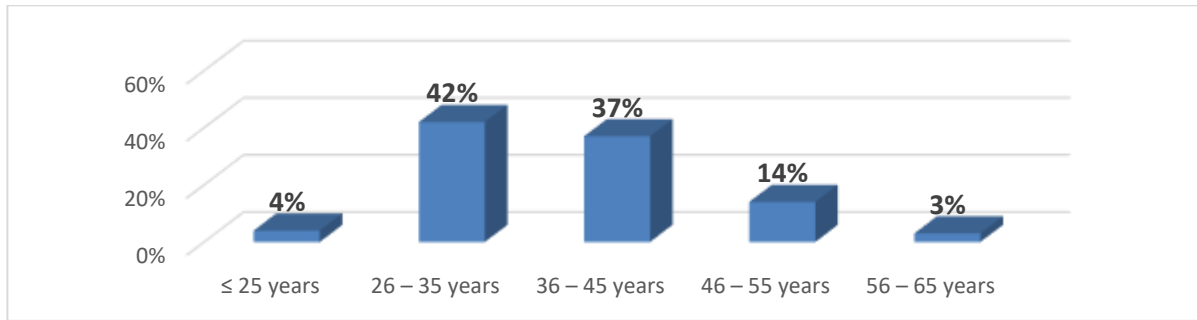


Figure 1. Midwife's Age

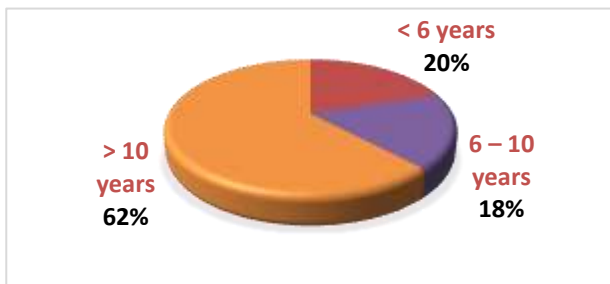


Figure 2. Length of Work

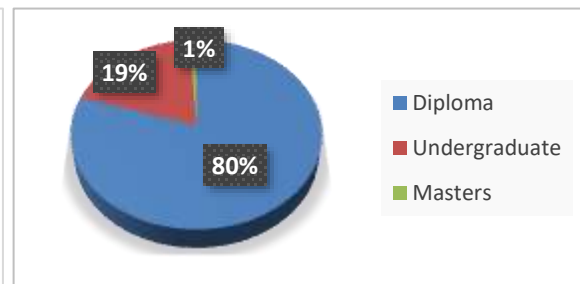


Figure 3. Educational Background

The research results showed that the majority (42.0%) of midwife respondents who provided postnatal care services to postpartum mothers were in the 26-35 year age category (Figure 1). This indicates that midwives are a group of workers whose age is relatively still very productive, so they are expected to continue to provide the best postnatal care services, providing motivation to postnatal mothers. The more midwives aged 26-35 years, it is hoped that they will be able to provide better services to postpartum mothers and improve the health status of postpartum mothers. Nitisemito (2000) states that younger employees tend to be physically strong, so they are expected to work harder. When midwives enter old age, the Puskesmas management must begin to arrange work positions and divide the workload according to the midwives' abilities so that the postnatal care services provided to postnatal mothers can run well and the quality is maintained. Figure 2 provides information that the majority of midwife respondents (62.00%) are officers who have a lot of work experience in serving postpartum mothers at community health centers, especially in postnatal care services. Most of the midwives in this study had worked for more than 10 years providing postnatal care services. Length of work can describe a person's experience in mastering their field of work. It is hoped that the longer the midwife works in providing postnatal care services, the more experienced the midwife will be in providing services to postnatal mothers. According to Ranupendjaja & Saud (2002), the longer someone works in an organization, the more experienced that person is, so their work skills are better. In addition, Figure 3 provides information that the majority of midwife respondents (80.0%) have a Diploma in Midwifery educational background. This level of education requires midwives to have advantages in terms of practice and implementation, good insight, ability and expertise in serving postpartum mothers at the Community Health Center. This is because Diploma graduates generally emphasize field practice. The more skilled the midwife is in carrying out her duties, the more midwives are expected to be able to provide the best form of service to postpartum mothers. Hariandja (2002) states that an employee's level of education can improve performance. A midwife who has a better level of education will be able to improve and improve her performance in providing the best service to postpartum

mothers.

### **Midwives' Social Awareness**

Social awareness consists of three indicators, namely empathy, organizational awareness and service orientation. The following is a complete description of the social awareness that midwives have in research related to postnatal care services that have been carried out.

Table 1. Midwives' Social Awareness and Indicators

No.	Indicators of Social Awareness		Poor	Good	Total
1.	Empathy	n %	21 (21,0%)	79 (79,0%)	100 (100,0%)
2.	Organizational Awareness	n %	11 (11,0%)	89 (89,0%)	100 (100,0%)
3.	Service Orientation	n %	19 (19,0%)	81 (81,0%)	100 (100,0%)
Aggregate Valuation					
Midwives' Social Awareness			Frequency		Percentage
	1. Poor		7		7,0
	2. Good		93		93,0
	Total		100		100,0

Social awareness is the ability to recognize and feel the emotions of other people (Goleman, 1998); (Goleman, 2006);(Boyatzis, et al., 1999). Based on the data presented in table 1, information was obtained that the majority (93.00%) of midwives' social awareness was good. Based on the indicators that make up midwives' social awareness, the organizational awareness indicator has a better rating than other indicators. Empathy is an important tool for measuring social awareness (Goleman, 1998). Empathy is the ability to understand other people's feelings and provide active attention to other people's problems (Boyatzis, et al., 1999). Based on the research results, the majority (79.00%) of midwives have good empathy competence. Midwives can understand the condition of postpartum mothers well, give full attention to postpartum mothers, and be good listeners when postpartum mothers share their complaints. Midwives with good empathetic competence care for postpartum mothers and are accompanied by fulfilling all the needs of postpartum mothers in preventing risks, complications and other problems that may arise in the future by providing the best service. By using empathy skills, employees can produce better performance (Shahzad, et al., 2011). This can result in better interpersonal relationships (Butler & Chinowsky, 2006); (Barbuto & Burbach, 2006). Service orientation is being able to anticipate, recognize and fulfill other people's needs well (Boyatzis, et al., 1999). Based on the presentation of research results, the majority (81.00%) of midwives have good service orientation competencies. With the midwife's attitude focused on the best service orientation, it is hoped that postpartum mothers can receive the best service which is beneficial for the health condition of postpartum mothers. One of the important points included in service orientation is meeting patient needs. Thus, the better the midwife is at understanding the conditions experienced and felt by postpartum mothers, the more focused the midwife can be in providing services to postpartum mothers according to their needs. Organizational awareness is being able to read emotional states that exist in intrapersonal relationships (Boyatzis, et al., 1999). Based on the results of research that has been conducted, the majority (89.00%) of midwives have good organizational awareness competencies. Competencies like this are really needed by a midwife to fulfill her obligations in serving postpartum mothers. Midwives can build relationships with colleagues and work together well in serving postpartum mothers and don't forget to pay attention to existing duties and functions. Midwives also establish good relationships with postpartum mothers to be able to provide the best service. Therefore, midwives must be able to have good organizational awareness to become professional health workers. Organizational awareness allows a person to read a situation objectively, without personal bias and

distortion (Boyatzis, 1982). also stated that it can be assumed that with good organizational awareness, social awareness can correlate well with a person's performance. Based on the explanation of each competency that forms social awareness, most midwives have good social awareness. Midwives who work at Community Health Centers need things like this to improve the quality of health examination services for postpartum mothers. Service quality has several aspects such as empathy and reliability of the provider or service provider in providing the best service to the community (Jariyah, et al., 2023).

### Midwives' Social Skills

The social skills component consists of indicators of leadership, communication, influence, accelerating change, conflict management, willingness to build bonds, teamwork and supporting others. The following are the complete results of research on midwives' social skills related to postnatal care services that have been carried out.

Table 2. Midwives' Social Skills and Indicators

No.	Indicators of Social Skills		Poor	Good	Total
1.	Leadership	n %	44 (44,0%)	56 (56,0%)	100 (100,0%)
2.	Communication	n %	3 (3,0%)	97 (97,0%)	100 (100,0%)
3.	Influence	n %	32 (32,0%)	68 (68,0%)	100 (100,0%)
4.	Change catalyst	n %	29 (29,0%)	71 (71,0%)	100 (100,0%)
5.	Conflict Management	n %	23 (23,0%)	77 (77,0%)	100 (100,0%)
6.	Building bonds	n %	34 (34,0%)	66 (66,0%)	100 (100,0%)
7.	Teamwork & collaboration	n %	11 (11,0%)	89 (89,0%)	100 (100,0%)
8.	Developing others	n %	26 (26,0%)	74 (74,0%)	100 (100,0%)
Aggregate Valuation Midwife Social Skills			Frequency		Percentage
	1. Poor		19		19,0
	2. Good		81		81,0
	Total		100		100,0

Social skills are competencies that can manage other people's emotions in building relationships (Goleman, 1998); (Goleman, 2006);(Boyatzis, et al., 1999). Based on the data presented in table 2, information was obtained that the majority (81.00%) of midwives' social skills showed a good rating. Based on the indicators that make up midwives' social skills, the communication indicators have a better assessment than other indicators. Social skills are needed by midwives in providing postnatal care services to postnatal mothers. The social skills possessed by midwives have an impact on the resulting performance achievements. This is in line with what Goleman (2005) stated that social skills are directly proportional to employee performance. Someone with high social skills will produce high performance. Social skills can be improved by improving communication because in general the research results show that communication indicators get the best assessment. This communication can also influence employee abilities which ultimately leads to increased high performance (Khan, et al., 2013).

Social skills enable a person to form relationships, move and inspire others, build close relationships, convince and influence and make other people feel comfortable (Goleman, 1995 dan 1998; Boyatzis et al., 1999). Therefore, midwives must be able to form a close family relationship between midwives



and postpartum mothers in order to create a comfortable atmosphere for postpartum mothers. With a comfortable atmosphere, communication can be established well. Every midwife must have good social skills to be able to support social activities, namely serving postpartum mothers who are undergoing health checks. Good social skills can improve performance due to better communication and influencing abilities resulting in high performance results (Shahzad, *et al.*, 2011). Social skills are key to a service provider's performance as most require daily interactions with other people and fellow workers. This is in line with the activities carried out by midwives in serving and meeting the needs of postpartum mothers, especially health check services every day. Therefore, social skills are very important for their performance. Existing findings indicate that there is a need to emphasize the importance of social skills for service providers (Mwathi, 2010; Bradberry & Su, 2006; Mwangi, 2014). Midwives with good social skills will enable midwives to relate and communicate well with fellow workers and colleagues from other units to provide the best service to postpartum mothers.

### Midwife Partnership

An overview of the midwife partnership in providing postnatal care services at the Community Health Center is presented in the following explanation.

Table 3. Midwife Partnership and Indicators

No.	Partnership Indicators		Poor	Good	Total
1.	Equity	n %	5 (5,0%)	95 (95,0%)	100 (100,0%)
2.	Transparancy	n %	6 (6,0%)	94 (94,0%)	100 (100,0%)
3.	Mutual Benefit	n %	5 (5,0%)	95 (95,0%)	100 (100,0%)
Aggregate Valuation					
Midwife Interpersonal Communication			Frequency		Percentage
	1. Poor		2		2,0
	2. Good		98		98,0
	Total		100		100,0

Based on the data presented in the table above, information is obtained that in general the midwife's partnership skills show a good majority assessment (91.00%), but there are still those who receive a poor assessment (2.00%). Meanwhile, if observed in detail based on the indicators that make up the midwife partnership, the mutual benefit indicator has a better rating than other indicators with a higher percentage of very good scores. However, the three indicators that make up the midwife partnership still need to be improved because there are still some that are considered lacking. If there are similarities in establishing partnerships between midwives and postpartum mothers and postpartum mothers' families, it will be easy to achieve good performance in PNC services. Therefore, there needs to be a good approach between the two. The approach is not top down or bottom up, nor is it based on power alone, but rather a relationship of mutual respect, mutual appreciation and mutual trust. To avoid antagonism, mutual trust needs to be built. Equality includes respect, obligations and bonds (Wibisono, 2007). Therefore, the midwife and the postnatal mother and the postpartum mother's family must each feel the same or equal position as the others in achieving the agreed goals, namely postnatal care services for postnatal mothers so that their health status is always monitored and becomes better.

The results of the research show that the partnership between midwives and postpartum mothers and postpartum mothers' families has established good openness. Transparency is very necessary to avoid mutual suspicion between work partners (Wibisono, 2007). Openness must begin to exist from the beginning of the partnership between the midwife and the postpartum mother and the postpartum mother's family until the end of the PNC service activities. This mutual openness will lead to complementary efforts and mutual assistance between partners, namely midwives and postpartum

mothers and postpartum mothers' families. The research results show that the principle of partnership between midwives and postpartum mothers and postpartum mothers' families is a mutually beneficial partnership. A partnership must bring benefits to all parties involved (Wibisono, 2007), including midwives and postnatal mothers and postnatal mothers' families in implementing postnatal care services. The health sector cannot possibly run alone in carrying out all its programs (including health promotion) in realizing public health (Ayu & Sinaulan, 2018). Individuals, organizations or institutions that have established partnerships will benefit from the existing partnerships according to their respective contributions. Activities or work will be efficient and effective if done together.

The research results show that the principle of partnership between midwives and postnatal mothers and the majority of postnatal mothers' families has been well established based on all indicators (Equity, Transparency, Mutual Benefit) in relation to postnatal care services. The importance of partnerships began to be intensified by WHO at the fourth international conference on health promotion in Jakarta in 1997. In this regard, it is necessary to develop collaborative efforts that provide mutual benefits. This cooperative relationship will be more effective and efficient if it is also based on equality. Considering that partnership is a form of cooperation or alliance, each party involved in it must be willing to work together and let go of their individual interests and then build common interests. Building a partnership can be done if the party concerned meets the requirements that involve two parties who are mutually beneficial and require a commitment to achieving common goals (Bastian, et al., 2020). Therefore, the parties really need to provide support in a partnership regarding the use of health services through the rights, responsibilities, benefits and relationships of the parties (Damayanti, et al., 2020).

### **The Relationship of Social Competence on Partnership**

The relationship between Social Competence in this case includes social awareness and general social skills towards midwife partnerships, which can be seen in full in the following table.

Table 4. Analysis of Social Awareness and Social Skills on Midwives' Partnership

No.	Social Competence	Relationship						Total		Significant
		Poor		Good		n	%	n	%	
		n	%	n	%					
Social Awareness										
1	Poor	2	28,60	5	71,40			7	100,00	P=0,004 ( $\alpha = 0,05$ ) Phi = 0,521 PR = 0,714
2	Good	0	0,00	93	100,00			93	100,00	
	Total	2	2,00	98	98,00			100	100,00	
Social Skills										
1	Poor	1	5,30	18	94,70			19	100,00	P=0,345 ( $\alpha = 0,05$ ) Phi=0,113
2	Good	1	1,20	80	98,80			81	100,00	
	Total	2	2,00	98	98,00			100	100,00	

Building partnerships is an ability that a midwife must have in managing and implementing postnatal care services well, mobilizing and directing the parties involved towards goodness, empathizing, establishing and fostering relationships and communication to form a good partnership. Based on Table 4, it can be seen that when a midwife's social awareness gets better, a midwife's partnership ability also tends to improve. Likewise, if a midwife's social skills get better, a midwife's partnership skills will also tend to get better. Midwives in carrying out their duties providing postnatal care services to postnatal mothers cannot be separated from efforts to establish partnerships with related parties such as postnatal mothers and postnatal mothers' families, coordinating midwives and sub-district midwives and health cadres and are supported by good social competence. The results of the research show that when a midwife's social awareness gets better, a midwife's partnership ability also tends to improve. Likewise, if a midwife's social skills get better, a midwife's partnership skills will also tend to get better.

The better interpersonal communication skills possessed by midwives can have an impact on improving a midwife's partnership skills in implementing postnatal care services. Partnerships can be well established between two or more parties with the principles of mutual trust, mutual need, mutual advancement and mutual benefit. The parties really need to provide support in a partnership regarding the use of health services through the rights, responsibilities, benefits and relationships of the parties (Damayanti, et al., 2020). Partnerships in health services can be carried out in various ways with the support of good communication skills, being able to manage moods, and being able to empathize. All of this is found in leadership based on emotional intelligence (Ariyanti & Ummah, 2022).

#### **4. Conclusion and Future Scope**

Based on the results and discussion, the majority of midwives' social awareness and social skills are good. Based on the social awareness aspect of midwives, organizational awareness has a better rating than empathy and service orientation. Meanwhile, based on the midwife's social skills aspect, communication has a better assessment than other aspects. The partnership capabilities of the majority of midwives are good and the mutual benefit aspect has a better assessment than others. Part of social competence, namely social awareness, does not have a significant influence on midwife partnership efforts. However, social skills competency has a direct influence on midwife partnership efforts in providing postnatal care services. If the midwife's social skills get better, the quality of the midwife's partnership in providing postnatal care services also tends to get better. Therefore, midwives must be able to establish good relationships and be more open in communicating with colleagues or other work units when serving postpartum mothers.

#### **Acknowledgement**

Thank you to all primary health service participants in Surabaya, Universitas Airlangga Surabaya and Universitas Nahdlatul Ulama Surabaya.

#### **Conflict of interest**

The authors declare that they have no competing interests.

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