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Abstract

Objective: This study sought to understand the meaning of women's experiences of participating in a prenatal group class led by a maternity nurse specialist in Bekasi, West Java, Indonesia.

Method: We used a phenomenological approach and recruited seven postpartum mothers at a nurse-led maternity clinic. Data were collected through in-depth interviews and were analyzed using Creswell's systematic coding process.

Results: Six themes were found in this study: (1) reasons to join prenatal class, (2) having more preparation compared to former pregnancy, (3) having broader and detailed information, (4) benefitting from the prenatal yoga exercise, (5) having positive birth experience, and (6) receiving better support from the husband.

Conclusions: The experiences of women participating in the prenatal group class reflect the importance of the prenatal health promotion done by the nurses. This study also implies the needs of pregnant women to receive more comprehensive antenatal education than what they normally obtain from standard care.

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Introduction

In general, pregnant women in Indonesia receive integrated antenatal care (ANC) service with a minimum of four ANC

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contacts during pregnancy.¹ Routine ANC consists of weight and height measurement; blood pressure test; nutritional status assessment using Mid-Upper Arm Circumference; measurements of fundal height, fetal presentation and fetal heart rate; tetanus vaccination status screening and provision; oral iron supplementation; laboratory tests (routine and specific); case management; and counseling.¹ Physicians, midwives, and trained nurses can provide individual routine antenatal care to pregnant women.

The 2016 Indonesian Health Profile reports the coverage of the four-contact ANC as much as 85.35%.² Despite the

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declining figure, this coverage has met the target of the Ministry of Health's Strategic Plan (74%).² Apart from the individual ANC service, pregnant women in Indonesia can also take advantage of the group prenatal classes at the primary health care centers. The prenatal class is designed as the group learning for pregnant women to improve their knowledge and skills around pregnancy, prenatal exercise, labor, postpartum period, postpartum contraception program, complication prevention, and newborn care.³ Prior studies have shown the many benefits of the prenatal group class for pregnant women.⁴⁻⁸ Some of the benefits are to lower the apprehension about childbirth, to improve the positive labor experience, to prevent preterm labor, to decrease the risk of having a low birth weight baby, to prevent prenatal anemia, and to improve husband's support and engagement.⁴⁻⁸

Nevertheless, group prenatal classes provided by public primary health centers in Indonesia are yet not wellimplemented. The facilitators/team and standard operating procedures to run the classes are still lacking.⁹ The primary health centers are also lacking clear organization with regards to planning, scheduling, funding and resource (media and equipment), evaluation, socialization, and cross-sectoral involvement in managing the group prenatal classes.⁹ Therefore, the participation rate of the pregnant women is minimal, and the perception of them about the group prenatal classes is also unfavorable.

Nurses as health care professionals can take part in providing antenatal care. As regulated by the Indonesian Law No 38 of 2014 concerning nursing, health care service includes nursing care in which nurses holding nursing practice license can practice and deliver nursing care independent of the health care facilities.¹⁰ Maternity nurse specialist is a clinical nurse specialist with competencies in providing preventive and promotive care for pregnant women.

Nurses can educate pregnant women to perform selfcare during pregnancy. Self-care encompasses decisions and acts of an individual to overcome his/her health care problems and to promote health.¹¹ Nurses' deeper engagement in maternity care potentially makes a great contribution to promote mother's health, particularly in the promotive and preventive maternal care. According to Narchi, nursing care should be integrated into the midwifery service to enhance the quality of the mother's health.¹²

Given the existent problems in the group prenatal classes, the maternity nurse specialists begin to facilitate such classes in their independent nursing practices. The maternity nurse specialists provide a group class model for comprehensive prenatal education. This prenatal group class is offered at a nurse-led maternity clinic registered at the Provincial Health Office of Bekasi, West Java, Indonesia (Indonesian Ministry of Health's Order no HK. 02.02/Menkes/148/2010 concerning Licence and Governance of Nursing Practice, amended into Ministerial Order no 17 of 2013).¹³ This privately funded prenatal class is publicized on social media platforms

The pregnant women participating in the prenatal class receive 10 h (five sessions) of group education. Every group consists of 6–8 pregnant women with fairly similar gestational age. Pregnant women typically start joining the prenatal class in the early second trimester, yet a few begin in their third trimester as they are not aware of such class

before. The prenatal class session starts with the routine examination including measurements of the body weight and height, blood pressure, abdomen, fetal health rate, as well as anamnesis; all of which are documented on the ANC nursing documentation. It is then continued with a prenatal yoga exercise for 30–45 min. The pregnant women and their husbands or accompanying family members will attend 45-min classes on pregnancy and childbirth. The topics include the adaptation to pregnancy, self-care to manage discomfort during pregnancy, signs, and symptoms of the pregnancy and labor complication, and preparation for labor. The sessions are concluded with discussion around pregnancy, labor, and parenting, during which the pregnant women can share their views and experiences on those issues.

Some studies suggest the benefits of the group prenatal classes. An RCT found that the women who had participated in a group prenatal class called 'Centering Pregnancy' had lowered risk of premature pregnancy, increased knowledge on pregnancy, improved satisfaction of the antenatal care and their labors, and felt more well-prepared for the labor and newborn care, compared to the group of women receiving individual standard ANC only.¹⁴ Another RCT added that women attending the prenatal group class tended to have more adequate ANC contacts during pregnancy and higher satisfaction of the ANC service than those who only engaged in the routine care.^{15,16} A prior study also recommended the group prenatal classes to leverage the satisfaction level of ANC service that is typically still hampered by minimum support, cultural practice and tradition in the midst of growing antenatal care needs.¹⁶

This study aimed to understand the meaning of the pregnant women's experiences of participating in the prenatal group class facilitated by maternity nurse specialists. We sought to answer the following research question: "what are the women's experiences of participating in the prenatal group class?"This study focused on the women's perspective on experiencing prenatal group class. Previous studies have explored the experiences of attending prenatal classes, ¹⁷⁻¹⁹ while the present study attempted to capture how the pregnant women perceive the meaning of participating in group prenatal class along with its impacts for them. This study offers insights of the maternity nurse specialists' roles in promoting pregnant women's health through group prenatal class model.

Method

We used the qualitative phenomenology approach in this study. Phenomenology is a method to study human experiences in a particular phenomenon.²⁰ Descriptive phenomenology, according to Husserl and Heidegger, assumes the basic structure of the worldview is the lived experience, the essence of the individual's conscious experience of their being in the world.²¹

The studied phenomenon here is the experiences of pregnant women in attending a prenatal group class led by the maternity nurse specialists in Indonesia. This study stressed on the meaning of taking part in the prenatal group class which is an addition of their routine individual antenatal care, and the implications of such group activities on the wellness of their pregnancy and labor.

Population and study setting

Postpartum mothers who had participated in the prenatal group class during their pregnancy were recruited using a purposive sampling approach. The inclusion criteria were: being physically and mentally healthy; having completed all sessions of the group prenatal classes, and being able to communicate their experiences. These criteria were necessary to allow exploration of meanings and perceptions on the subject of interest.²² In-depth interviews were conducted with seven participants. This relatively small number of participants is deemed sufficient for the qualitative studies while the level of depth and data saturation had been achieved.^{23,24} Interviews were tape recorded and were transcribed verbatim for the analysis.

Data analysis

Data were analyzed using Creswell's systematic coding process with modified phenomenology analysis technique (van Manen's selective and highlighting approach).^{25,26} The verbatim was read repeatedly and carefully to make sense of the women's experiences of participating in a prenatal group class. We then searched and highlighted the significant statements, the phrases containing essences and representing the experiences of the women, referred to as 'themes'. We continued by connecting the essential themes and checking them with the participants' description. Eventually, through the interrelated essential themes, we obtained an exhausted description of the phenomenon, i.e. the experiences of the pregnant women in the prenatal group class.

Ethical aspects

The nature of the study focus entails no potential harm physically or psychologically for the participants. All participants gave informed consent before taking part in this study. The research team has maintained the security of the data and participants' information. The ethical approval was attained from the Ethical Committee of the Faculty of Nursing, Universitas Indonesia.

Results

Participants characteristics

Seven participants of this study had participated in different groups of prenatal classes. The participants were aged 25–34. Most of them (6 out of 7) were multiparous women. All participants lived in Bekasi area, in which the study took place. Four of the participants had a bachelor's degree while three participants had a high school diploma. Five participants were housewives while the rest had a formal occupation. All participants lived with their husbands at their own house. It is a common practice in Indonesia for the new family living with the parents/parents-in-law. Hence this was taken into account. The participants indicated no history of risks or complications during pregnancy and labor. All participants described their experiences and views on participating in the prenatal group class. Six themes were found in this study: (1) reasons to join prenatal class, (2) having more preparation compared to former pregnancy, (3) having broader and detailed information, (4) benefitting from the prenatal yoga exercise, (5) having positive birth experience, (6) receiving better support from the husband.

Theme 1: Reasons to join the prenatal class

Most participants explained their reasons to take part in the prenatal group class while having ANC visit to the hospital every month based on their previous experience of pregnancy and labor. Some participants mentioned their intention to be better prepared mentally for labor. "Duh... for this second labor I wanted to be more ready, mentally... I was wondering how the labor supposed to be... Then I did some internet browsing, and I came across the information about this class, so I got interested to join it" (Participant 1).

Some participants initially searched on the Internet about prenatal yoga since they felt lacking physical exercise while being pregnant. They later found that the prenatal group class had prenatal yoga exercise, so they decided to participate. ''I had this prenatal yoga in the class and also a sharing session which I really loved'' (Participant 1). ''I used to do yoga every week... but then since I was staying at home, I also missed the routine physical exercise I used to do while working...'' (Participant 3). ''I saw on facebook that my neighbor who was having a 16-week pregnancy did yoga, and I wanted to do the same... So at first, I was only interested in doing prenatal yoga... and then I grew more interest, so I never missed a session'' (Participant 4).

Other participants also described their process of looking for the prenatal classes because they thought they only had minimal knowledge about self-care during pregnancy. "It's all about the explanation, I suppose... for example how it would be like when I was approaching the third month... what kind of nutrition I should take and how about the daily care... Unfortunately, I did not quite get that from my doctor... I should have known about what I would experience and how I had to do about it,... But the doctor only did the ultrasound, some measurement, blood pressure...' (Participant 2). "I once had such class at M hospital when I was pregnant with my first child, but it was only a regular exercise... I only received basic knowledge. But when I tried this one... I think they nailed it... I got the knowledge so that I was keen to, attend the class except when I had another activity on Saturday'' (Participant 5).

Overall, the reasons of the participants to join the prenatal class are the needs to improve the readiness for labor, to obtain knowledge on self-care during pregnancy, and to have prenatal yoga exercise.

Theme 2: Having more preparation compared to former pregnancy

The feeling of readiness for labor was expressed by the multiparous participants who took part in the prenatal group class for their latest pregnancy but not in their former pregnancy. A participant shared that her improved knowledge influenced her experiences of pregnancy and labor compared to the first pregnancy. "I found the prenatal class really beneficial... O God, Thank God, for the youngest one's pregnancy and labor, I had enough knowledge... The classes I attended at the clinic made a real difference... the knowledge I had when I was pregnant with my first and second child was so minimal. But during this third labor... I had in mind that this was what I supposed to do... and that's what I must do...'' (Participant 2). The participants also felt a different experience of the latest pregnancy and the former pregnancy. Some participants became more proactive in asking questions to their doctors.

"When I was having my first child I did not know... so when I had the antenatal visit, I barely had any idea, so I depended on the doctors, anything they said... if they said 'A' I would do 'A,' 'B' I would do 'B'... Anything. Since I knew nothing about it. But for this second pregnancy, even my husband also knew. We maintained the regular visit to the doctors. My husband would ask the doctor, for example, one time he asked the doctor to not to incise (the perineum) if my labor was normal. We did not have such knowledge in the first pregnancy, so we just let the doctor do anything for us." (Participant 4). "In fact, I did some reading when I was having my first child, but it just felt different when I got the knowledge (in the prenatal class)..." (Participant 6).

The participants experienced a difference in their knowledge to manage discomfort during pregnancy compared with the previous pregnancy. 'The difference was I was more ready in this pregnancy... I was actually had an easier pregnancy for my first child, no nausea... for this second child, the morning sickness was overwhelming; it drained me... but the self-care during pregnancy really helped me out...'' (Participant 5).

The following participant described her experiences of gaining knowledge and skills in the prenatal class which she missed during the prior pregnancy. "Well, I thought I had looked for knowledge for my first pregnancy but turned out that it was inadequate. Normally, I need to read by myself and hear from other people and act it out. I got all those three for this second pregnancy so I was mentally ready" (Participant 6).

Theme 3: Having broader and detailed information

The participants shared their experiences of having the description of the labor in the prenatal class. ''I really got the description about labor, while I was totally blank about it before. I thought one dilation meant one tear in the vagina'' (Participant 1). ''Had the explanation about this and this... and I got the description... I started with a blank page, but then I could make sense of it... oh, so that's how the process... oh, that's what's happening in our body during that stage... It was totally educational. In our last session, we were shown a video of a childbirth process, and I was like 'ooh'... so I got a picture. It's nothing like what we see by ourselves on youtube that women would go screaming during labor'' (Participant 3).

A participant who started joining the prenatal class in her last trimester pointed out the true benefit of knowing the labor process especially during her first stage in the transition phase. The knowledge prepared her to go through such a process. "When the health care providers mentioned about cervix I could relate to it... when they said about certain dilation, I could also relate... And when it came to the 7 cm dilation, I was like 'oh I'm entering the transition phase, and it is going to end, so I have to be mentally ready and do this and that. Even though I was gasping but I knew that this would happen... I understood it step-bystep..." (Participant 3). "Until I was approaching labor and I received the knowledge... tips about how to be mentally prepared for the labor, for example..." (Participant 5 and 7).

A participant highlighted the information she received in the prenatal class about nutrition during pregnancy and breastfeeding. ''I got the nutrition knowledge... even until now that I am breastfeeding I know about my nutritional need... Back then I just ate without knowing how to manage it'' (Participant 4).

Another participant mentioned her experience in arranging a birth plan. "My first childbirth was without planning. For the second one, we had it planned but due to the condition... we even have prepared a birth plan..." (Participant 4).

Some participants perceived the information they received in the group prenatal classes, including information about daily care and breastfeeding, was more detailed than the doctors. "The consultation was more detailed than that I had with the doctor. It was more detailed and more new knowledge that I did not get from the doctor... about the daily care, I was informed on how to prepare to breastfeed since I did not breastfeed my first child, I was taught about the nipple care, how to clean it, to massage it to stimulate milk production..."

Theme 4: Benefitting from the prenatal yoga exercise

The goal of integrating a prenatal yoga exercise into the prenatal group class is to maintain physical health during pregnancy. Some participants revealed the benefits they reaped from doing the yoga exercise, including the impacts on their physique and breathing during labor.

"It was just enough... I really enjoy the benefits of yoga, for example when I had the waist pain I performed some maneuvers to help relieve it... The maneuver of putting a cube on the waist, for example, felt so good" (Participant 2).

"But indeed yoga feels so good in the body for the pregnant women... feel fresher and also more prepared for childbirth... that's for the normal labor, isn't it' (Participant 2).

"The result was obvious... when I was having labor thank God I could manage my breathing technique although I thought I had lost my breath during the dilation. When I was pushing... the midwife asked me if I joined a yoga class...she said I managed well." (Participant 3).

Theme 5: Having a positive birth experience

A participant described that she felt ready and less apprehensive for the childbirth as she had the lessons from the

prenatal class. "A bit of panic... but then I remembered 'oh I was taught this way in the class, and during yoga, I had this advice... so it was good. It is all natural process, so then I could manage my apprehension and was not panicky as much as before...' (Participant 1). ''I just became more ready... to face the labor, to face the baby that we knew nothing about... I began the pregnancy hardly knew anything about it, but then I received the knowledge... so I could be calmer. More ready...' (Participant 4). ''I think I really became ready... I was taught about the dilation was still two, so I decided to return home... Since I had the knowledge, I felt calmer. Then when I was home I noticed that the duration between contractions was getting closer, I could count my contraction because I was taught to do so. It was getting quicker, so then I decided to go back to the hospital." (Participant 5).

A participant who joined the prenatal group class in her last week of pregnancy expressed her gratitude for having some preparation despite being quite limited (she had it focused on the labor topic). "At the beginning, I could not get it... at last, even though I had my childbirth at the hospital... Thank God I had some knowledge and preparation even though maybe only a little bit due to the time constrain..." (Participant 3).

Another participant said she felt more relaxed during labor as she already had the mental image of labor from the prenatal class."Well, it is quite typical for pregnant women, feeling panic when the contraction comes... But since I have learned in the class: this would take long... it was still staged 1, so I was just relaxed." (Participant 2).

Positive childbirth experiences were also raised by the participants related to what they felt and did during labor and contraction or labor pain. "I just slept... I slept really well... since afternoon time when the contraction began I woke up, but then I got back to sleep again... It was really a good feeling of having the endorphin hormone" (Participant 2). "Of course it was painful... but at least it was reduced. Because I had learned, so it must be different from those who hadn't learned about it...' (Participant 3). "Well, there was some pain... I felt the contraction a couple of times, but I had learned about it, so I just took a long deep breath." (Participant 6). "It was painful... painful but Thank God I had learned and gained the knowledge, so I took a deep breath and had jokes with my husband." (Participant 5). "And I found out the labor was not as painful as I imagined... the most important thing is this: know how to tolerate and to adapt to it... so when the pain struck I did not only bear with it, but I knew how to manage it." (Participant 3). "Turned out that it made me mentally ready. Until I had my 9 cm dilation, I did not feel the urge to push." (Participant 6).

Theme 6: Receiving better support from the husband

The participants described the increased support from their husbands. The husbands and other family members were invited to engage in the group prenatal classes. Some participants experienced huge support from their husbands during pregnancy and labor. "Thank God... my husband attended several classes, so they gave him the information

on what a husband supposed to do'' (Participant 3). ''Also, my husband did not haste... or for example, when I was having a little pain, he used to be extremely panic but now not any more...'' (Participant 5).

A participant shared the striking enthusiasm of the husband to engage in the prenatal group class. The husband avoided the loss of missing any single prenatal class. "My husband was very grateful... he attended the class diligently; it was a huge loss of missing a class... he would not miss any. He asked for the repeated lessons when I was the one who was not able to come to the class... It was a must... important and must-do... and lots of knowledge..." (Participant 4).

Another participant mentioned the role of her husband to ease her during labor. "When the night came we slept... my husband said we already knew so when the contraction hit we could sleep... I woke up occasionally, but then I returned to sleep... when having a contraction, we need to inhale deeply... so I did it.. Thank God... I really managed to keep the knowledge in my mind" (Participant 3).

Some participants said they felt more relaxed and ready because of their husbands. ''My husband was there next to me and holding my hand... he was just sleeping, he seemed to be relaxed, and most importantly I did not complain much...'' (Participant 5). ''My husband also nailed it, so I felt more ready from my heart'' (Participant 6).

Discussion

The reason for participating in the prenatal group class is a major theme to describe the experiences of the pregnant women in searching for the health care service which offers more than routine antenatal care. The women intended to promote their health during pregnancy and to prepare for labor. The searching process was described as an attempt to resolve the discomfort experienced by pregnant women. This theme identified a positive health-seeking behavior. In many other cases, some pregnant women were reluctant to take advantage of the health promotion program, for instance, the group prenatal classes at the primary health care. There also pregnant women who only go to the health care center when there is an imminent problem or complication.

Other major themes describe the benefits and impacts of participating in the nurse-led group prenatal class: having more preparation compared to former pregnancy, having broader and detailed information, benefitting from the prenatal yoga exercise, having positive birth experience, and receiving better support from the husband. These themes entail a challenge to fulfill the needs of health promotion for pregnant women beyond routine antenatal care.

The theme of 'having more preparation compared to former pregnancy' stemmed from the participants' stories around the differences they experienced in the latest pregnancy and labor (when they had joined the prenatal group class) and the former pregnancy. All pregnant women, not only the participants in this study, have their individual and unique experiences. Yet, the pregnant women in this study referred to the differences in terms of improved knowledge, understanding, and care which they did not get from the routine antenatal care. The experiences of taking part in the group prenatal classes during the latest pregnancy were seen to be beneficial to prepare their body and mind for the labor $^{\rm 6,26}$

The participants' description of how they gained much knowledge that they did not receive in the routine individual antenatal care led to the theme of 'Having broader and detailed information'. This result indicates the extra lesson participants learned in the prenatal group class. In the standard individual antenatal visit, the doctors have limited time to give consultation to the women. The pregnant women would normally only pick up the most important and specific questions to ask during the routine consultation. Some pregnant women might feel uncomfortable for having queries at all. On the other hand, they might only receive less comprehensive information to address their individual problems. These things make pregnant women less proactive in taking good care of themselves during pregnancy. In addition, the routine antenatal care does not provide the professionallymediated sharing between the pregnant women which can be a good opportunity to learn new insights and knowledge.

While participating in the prenatal group class, the pregnant women came to realize about their needs of information around the healthy pregnancy and labor. They could also fulfill those informational needs in the prenatal class. The prenatal group class provides thorough and detailed information on pregnancy and labor preparation. It also allocates more time to allow convenient discussion. Two hours of group educational session facilitated by a maternity nurse specialist provide the opportunity of knowledge transfer and sharing within the group. As in the previous studies on group prenatal classes, the sessions take place in a circle, value the women's contribution, and enable social interaction, thus promoting relationship among the group members.^{27,28} Such relational dimension in the prenatal group class might give extra values for the pregnant women, such as the feeling of ''I wasn't alone'',²⁹ as well as the development of social support.^{26,28}

'Benefitting from the prenatal yoga exercise' is the theme rendered from the participants' description of having yoga sessions in the prenatal group class. Prenatal yoga was deemed advantageous to help manage the physical symptoms of pregnant women in this study. It gave a sense of wellness for the women, and it also facilitated the physical strength and breathing skill during labor. Many prior studies have also suggested the benefits of prenatal yoga.³⁰⁻³⁶ Aside from it, the rising popularity of prenatal yoga was an attracting factor for pregnant women to attend the prenatal group class. This practice could be applied in the public-funded group prenatal classes at the primary health care to attract more participants.

The pregnant women in this study also delineated their positive childbirth experiences after taking part in the group prenatal classes. This finding supports the previous study results that participating in the prenatal class was linked with normal labor.^{28,35,37-39} Preparing for labor is one of the main topics of the prenatal class. The participants have explained women's adaptation during labor, the labor stages, and what the women and the husbands/the companion should do during labor. Moreover, there is also a session during which the participants could express their anxiety or fear while getting closer to their due date. This topic is of major

interest and importance for pregnant women in the third trimester.

The positive childbirth experience reflects the women's readiness for labor. The companions, typically their husbands, also show readiness as they have equipped with the necessary knowledge in the prenatal group class. Such a positive experience in labor may have an impact on women's future pregnancy and delivery.

'Receiving better support from the husband' is an interesting theme to note. This theme indicates the real support coming from the husband during pregnancy and labor. The husband's participation in the prenatal class is essential to building their knowledge ground and confidence for taking care of the mother and baby. Studies found that husbands who took part in the prenatal class felt happy and eager to support the wives during labor.^{40,41} Such support would also add to the positive childbirth experience for the women.

All themes found in this study imply the needs of promotive and preventive health care for the pregnant women and their family along with the standard antenatal care. The maternity nurse specialists can help close the gap by identifying the health promotion needs of the pregnant women and by implementing the nursing care to promote and empower the pregnant women and their families through group prenatal classes.

The prenatal group class can address the needs of the pregnant women that have not been fulfilled by having routine antenatal care. Information and skills gained in the prenatal group class can help the women and their families to take care of their health optimally during pregnancy. They can also be better prepared to take up the motherhood role. The pregnant women can feel supported, connected with fellow pregnant women, and empowered to take care of their own health. Furthermore, this may lead to the lower stress level of the pregnant women which may also positively affect the fetal wellness.¹⁶ Icjovics et al. also suggested that the prenatal group class is associated with improved birth outcomes such as lower preterm birth rate.¹⁶

In the future, the group prenatal classes can be designed to meet the specific needs of the groups of pregnant women, for example group of the adolescent pregnant women. The prenatal classes can also be arranged according to the profile of the pregnant women at a certain area, taking into account the status of parity, occupation, social economy, race, culture, and so on.

The women who participated in this study were those who routinely attended the prenatal group class until their labor. Those who dropped out of the class were not included. Therefore, a different perspective of this group of people could not be covered in this study. On the other hand, the group interaction in the prenatal class allows the forming of a social support group. However, this study did not encompass the social support topic that might influence the quality of the group prenatal class implementation and also the health outcome of pregnant women.

The context of this study is to understand the meaning of pregnant women's experiences in participating in the group prenatal classes. The findings of the present study are consistent with the previous study results. Most of the former studies examined the perspectives and experiences of the women who were recruited to take part in the prenatal classes. This study, on the other hand, captures the views of the women who sought for themselves and paid out of their own pocket to attend the group prenatal class.

Pregnant women attending the group prenatal classes described of having more preparation as a result of having broader and detailed information from the prenatal class, which along with the better support from the husband, led to their positive childbirth experiences. Getting the benefits from the prenatal yoga was found to be an attractive factor to join the prenatal class, while alleviating physical discomfort and preparing for labor explained why pregnant women decided to attend the group prenatal class.

The experiences of women participating in the group prenatal class reflect the importance of the nurse-led prenatal health promotion. This study also implies the needs of the pregnant women to receive more comprehensive antenatal education than what they normally obtain from standard care. Further studies need to be done to develop group-based antenatal care model for pregnant women in Indonesia provided by the maternity nurse specialists.

Conflict of interests

The authors declare no conflict of interest.

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References

- Peraturan Menteri Kesehatan Republik Indonesia Nomor 97 Tahun 2014 tentang Pelayanan Kesehatan Masa Sebelum Hamil, Masa Hamil, Persalinan dan Masa Sesudah Melahirkan, Penyelenggaraan Pelayanan Kontrasepsi, serta Pelayanan Kesehatan seksual: Kementerian Kesehatan Republik Indonesia; 2014.
- 2. Profil Kesehatan Indonesia Tahun 2016: Kementerian Kesehatan Republik Indonesia; 2017.
- 3. Pedoman Pelaksanaan Kleas Ibu Hamil. Edisi Revisi; Kementerian Kesehatan Republik Indonesial; 2014.
- Serçeku P, Mete S. Effects of antenatal education on maternal prenatal and postpartum adaptation. J Adv Nurs. 2011;66:999-1010, http://dx.doi.org/10.1111/j. 1365-2648.2009.05253.x.
- Larasati IK, Wibowo K. Pengaruh keikutsertaan senam hamil terhadap kecemasan primigravida trimester ketiga dalam menghadapi persalinan. Jurnal Biometrika dan Kependudukan. 2012;1:26–30.
- Ruiz-Mirazo E, Lopez-Yarto M, McDonald SD. Group prenatal care versus individual prenatal care: a systematic review and meta-analyses. J Obstet Gynaecol Can. 2012;34:223–9, http://dx.doi.org/10.1016/S1701-2163(16)35182-9.
- Ferguson S, Davis D, Browne J. Does antenatal education affect labour and birth? A structured review of the literature. Women Birth. 2013;26:e5–8, http://dx. doi.org/10.1016/j.wombi.2012.09.003.
- Puspita Sari R, Yulian V, Sulastri S, Susilaningsih EZ. Pengaruh Kelas Pre-Natal Terhadap Kadar Hemoglobin Ibu Hamil Di Wilayah Kerja Puskesmas Kartasura Kabupaten Sukoharjo. Universitas Muhammadiyah Surakarta; 2016. Retrieved from: http://eprints.ums.ac.id/44955/.

- Fuada N, Setyawati B. Pelaksanaan kelas ibu hamil di Indonesia. Jurnal Kesehatan Reproduksi. 2015;6:67–75, http://dx.doi. org/10.22435/kespro.v6i2.4745.67-75.
- 10. Undang-undang Republik Indonesia Nomor 38 Tahun 2014 tentang Keperawatan: Presiden Republik Indonesia; 2014.
- Orem DE. Nursing concepts of practice. St Louis: Mosby Year Book; 2001.
- Narchi NZ. Exercise of essential competencies for midwifery care by nurses in São Paulo, Brazil. Midwifery. 2011;27:23-9, http://dx.doi.org/10.1016/j.midw.2009.04.007.
- 13. Peraturan Menteri Kesehatan Republik Indonesia Nomor 17 Tahun 2013 tentang Perubahan atas Peraturan Menteri Kesehatan Nomor HK.02.02/Menkes/148/i/2010 tentang Izin dan Penyelenggaraan Praktik Perawat: Kementerian Kesehatan Republik Indonesia; 2013.
- 14. Jafari F, Eftekhar H, Fotouhi A, Mohammad K, Hantoushzadeh S. Comparison of maternal and neonatal outcomes of group versus individual prenatal care: a new experience in Iran. Health Care Women Int. 2010;31:571–84, http://dx.doi.org/10.1080/07399331003646323.
- Kennedy HP, Farrell T, Paden R, Hill S, Jolivet RR, Cooper BA, et al. A randomized clinical trial of group prenatal care in two military settings. Mil Med. 2011;176:1169–77.
- 16. Ickovics JR, Kershaw TS, Westdahl C, Rising SS, Klima C, Reynolds H, et al. Group prenatal care and preterm birth weight: results from a matched cohort study at public clinics. Obstet Gynecol. 2003;102:1051–7.
- Baldwin KA. Comparison of selected outcomes of Centering-Pregnancy versus traditional prenatal care. J Midwifery Womens Health. 2006;51:266–72.
- Robertson B, Aycock DM, Darnell LA. Comparison of Centering Pregnancy to traditional care in Hispanic mothers. Matern Child Health J. 2009;13:407–14.
- Shakespear K, Waite PJ, Gast J. A comparison of health behaviors of women in Centering Pregnancy and traditional prenatal care. Matern Child Health J. 2010;14:202–8.
- 20. Morse JM. Determinant sample size. Qual Health Res. 2010;10:3–5.
- 21. Anwar DG. Pengantar Fenomenologi Depok: Koekoesan; 2010.
- 22. Streubert HJ, Carpenter DR. Qualitative researcj in nursing: advancing the humanistic imperative. Philadelphia: Lippincott Williams & Wilkins; 2011.
- Morse J. Approaches to qualitative–quantitative methodological triangulation. Nurs Res. 1991;40:120–3.
- 24. Poerwandari EK. pendekatan kualitatif untuk riset perilaku manusia. Depok: LPSP3. 2009.
- Van manen M. Researching lived experiences: human science for action sensitive pedagogy. London: ON Althouse; 2007.
- Benediktsson I, McDonald SW, Vekved M, McNeil DA, Dolan SM, Tough SC. Comparing CenteringPregnancy[®] to standard prenatal care plus prenatal education. BMC Pregnancy and Childbirth. 2013;13 Suppl. 1:S5, http://dx.doi.org/10.1186/1471-2393-13-S1-S5.
- Rising SS, Kennedy HP, Klima CS. Redesigning prenatal care through CenteringPregnancy. J Midwifery Womens Health. 2004;49:398–404.
- Hodnett ED, Fredericks S, Weston J. Support during pregnancy for women at increased risk of low birthweight babies. Cochrane Database Syst Rev. 2010.
- Kennedy HP, Farrell T, Paden R, Hill S, Jolivet R, Willetts J, et al. ''I wasn't alone'' – a study of group prenatal care in the military. J Midwifery Womens Health. 2009;54:176–83.
- Fauziah L, Purwono, RU, Abdurachman M.O Efektivitas latihan yoga prenatal dalam menurunkan kecemasan pada ibu primigravida trimester III. Retrieved from: http://repository. unpad.ac.id/23845/1/Lestari-Fauziah-P-S.Psi_pdf.
- 31. Jiang Q, Wu Z, Zhou L, Dunlop J, Chen P. Effects of yoga intervention during pregnancy: a review for current status. Am

J Perinatol. 2015;32:503-14. Retrieved from: https://www. thieme-connect.com/products/ejournals/html/10.1055/ s-0034-1396701

- 32. Posadzki P, Ernst E, Terry R, Lee MS. Is yoga effective for pain? A systematic review of randomized clinical trials. Complem Therap Med. 2011;19:281–7. Retrieved from: http://www. sciencedirect.com/science/article/pii/S0965229911001063
- 33. Muzik M, Hamilton SE, Rosenblum KL, Waxler E, Hadi Z. Mindfulness yoga during pregnancy for psychiatrically at-risk women: preliminary results from a pilot feasibility study. Complem Therap Clin Pract. 2012;18:235–40. Retrieved from: http://www.sciencedirect.com/science/article/pii/S174438811200 0485
- 34. Reis PJ. Prenatal yoga practice in late pregnancy and patterning of change in optimism, power, and well-being; 2011. Retrieved from: http://thescholarship.ecu.edu/handle/10342/3594
- 35. Babbar S, Parks-Savage AC, Chauhan SP. Yoga during pregnancy: a review. Am J Perinatol. 2012;29:459–64. Retrieved from: https://www.thieme-connect.com/products/ejournals/html/ 10.1055/s-0032-1304828
- Newham JJ, Wittkowski A, Hurley J, Aplin JD, Westwood M. Effects of antenatal yoga on maternal anxiety and depression: a randomized controlled trial. Depress

Anxiety. 2014;31:631-40. Retrieved from: http://online library.wiley.com/doi/10.1002/da.22268/full

- 37. Stoll KH, Hall W. Childbirth education and obstetric interventions among low-risk Canadian women: is there a connection? J Perinatal Educ. 2012;21:229–37, http://dx.doi.org/10.1891/1058-1243.21.4.229.
- Bahadoran P, Asefi F, Oreyzi H, Valiani M. The effect of participating in the labor preparation classes on maternal vitality and positive affect during the pregnancy and after the labor. Iran J Nurs Midwifery Res. 2010;15 Suppl. 1:331–6. Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3208940/
- Soriano-Vidal FJ, Vila-Candel R, Soriano-Martín PJ, Tejedor-Tornero A, Castro-Sánchez E. The effect of prenatal education classes on the birth expectations of Spanish women. Midwifery. 2018;60:41-7, http://dx.doi. org/10.1016/j.midw.2018.02.002.
- Premberg A, Lundgren I. Fathers' experiences of childbirth education. J Perinatal Educ. 2006;15:21-8, http://dx.doi. org/10.1624/105812406X107780.
- Ahldén I, Ahlehagen S, Dahlgren LO, Josefsson A. Parents' expectations about participating in antenatal parenthood education classes. J Perinatal Educ. 2012;21:11–7, http://dx.doi.org/10.1891/1058-1243.21.