

FACTORS RELATED TO THE PARTICIPATION OF PREGNANT WOMEN IN TRIMESTER III IMPLEMENTATION OF PRENATAL GENTLE YOGA AT PMB RESTU BUNDA

Nuning Juni Setia Ningsih^{1*}, Sumarni¹, dan Lutfia Uli Na'mah¹

¹Departement of Midwifery, faculty of Health, Universitas Muhammadiyah Gombong

* corresponding author : nuningjunisetianingsih@gmail.com

ARTICLE INFO

Article history

Received 24/06/2023

Revised 07/07/2023

Accepted 29/07/2023

Keywords

Factor_1

Prenatal Gentle Yoga_2

Trimester III

ABSTRACT (10PT)

Introduction: *Prenatal Gentle Yoga* is one of the recommended sports for pregnant women because if it is done regularly it will be able to overcome various complaints during pregnancy. However, in the Kebumen area itself, pregnant women do not understand the urgency of routinely carrying out *Prenatal Gentle Yoga*, this is indicated by the low participation rate. **Objectives:** To determine the Factors Associated with the Participation of Third Trimester Pregnant Women in the Implementation of *Prenatal Gentle Yoga* at PMB Restu Bunda. **Methods:** The research design used correlation analytic with a cross-sectional approach. The population is third-trimester pregnant women who check themselves at PMB Restu Bunda for a period of one month. **Results:** Based on bivariate results, it was found that the knowledge factor with participation had a relationship because the P value was 0.024

< 0.05. while other factors such as age, parity, work, and family support did not have this relationship indicated by p-value > 0.05.

Conclusion: Knowledge factor has a relationship with the Participation of Pregnant Women TM III in the Implementation of *Prenatal Gentle Yoga* at PMB Restu Bunda. However, the factors of age, parity, work, and family support did not have a relationship with the participation of pregnant women TM III in the implementation of *Prenatal Gentle Yoga* at PMB Restu Bunda.

Recommendations: There is a need for further research on other factors that have been studied related to the relationship with the participation of pregnant women in the third trimester in the implementation of *Prenatal Gentle Yoga*.

This is an open access article under the [CC-BY-SA](#) license.



1. Introduction (*Heading 1*) (bold, 11pt)

Pregnancy is a natural process [1], where during this pregnancy there will be a lot of changes that occur both physically and psychologically [2].

Starting from the beginning of the pregnancy, a woman will experience discomfort such as feeling unwell, then other complaints will arise such as Low Back Pain (LBP) and there will also be feelings of worry regarding the delivery process and the baby after birth. Low Back Pain (LBP) that occurs during pregnancy is caused by the bones in the back area stretching due to increasing gestational age. Management of this form of discomfort in pregnant women can be overcome by doing light exercise such as doing pregnancy exercises or Prenatal Gentle Yoga [3].

Referring to the results of research conducted by [4], that there are differences regarding the effectiveness between pregnancy exercise and pregnancy yoga in reducing lower back pain in third trimester pregnant women which can be seen from the results of the average value of pregnancy exercise

which is 26 and the average value of pregnant yoga is 29. With this it can be concluded that yoga pregnancy is more effective in reducing low back pain. Research result [4],

the underlying reason is that Prenatal Gentle Yoga is also one of the recommended exercises for pregnant women [3]. Because if done regularly it will be able to overcome various complaints during pregnancy because yoga is an activity to harmonize the body, mind and spirit so that pregnant women can enjoy their pregnancy while preparing for childbirth[5].

In the Kebumen area, the implementation of Prenatal Gentle Yoga is not yet popular among pregnant women. This is evidenced by the data obtained from PMB Restu Bunda itself. In 2022 in June, out of 148 Trimester III pregnant women who checked themselves at PMB Restu Bunda, only 20 the number of third trimester pregnant women participating in prenatal gentle yoga.

Referring to the results of previous studies that have been conducted by [6], [7], [8], [9], [10], [11] dan [12], that there are many factors related to the participation of third trimester pregnant women in the implementation of Prenatal Gentle Yoga, including age factors, knowledge factors, work factors, parity factors, family support factors and husband support factors. There are many factors related to the participation of third trimester pregnant women in the implementation of Prenatal Gentle Yoga, which in the end is what motivated the researcher to raise the title "Factors Associated with the Participation of Third Trimester Pregnant Women in the Implementation of Prenatal Gentle Yoga at PMB Restu Bunda".

2. Materials and Method

The research design used is a correlation analytic method with a cross sectional approach. The population used was third trimester pregnant women who checked themselves at PMB Restu Bunda with a period of one month. The sampling technique used was purposive sampling with adjusted criteria

3. Results and Discussion

3.1. Results

Researchers have conducted research conducted on 1-31 August 2022 at PMB Restu Bunda involving 54 respondents of third-trimester pregnant women. research as follows:

3.1.1. Univariate Analysis

3.1.1.1 Age

Table 1. Frequency Distribution Based on Age of TM III Pregnant Women at PMB Restu Bunda (n = 54)

No	Age	Frequency (f)	Percentage (%)
1.	<20 Years	0	0
2.	20-35 Yearss	52	96.3
3.	> 35 Year	2	3.7
Total		54	100.0

Source: Primary Data, 2022

Based on table 1 it is known that the characteristics of respondents based on the age group <20 years are (0%) while the age group that has the most number is the age of 20-35 years which has a frequency of 52 respondents with a percentage (96.3%) and the rest are age group >35 years with a frequency of 2 respondents with the percentage being (3.7%).

3.1.1.2. Knowledge

Table 2. Frequency distribution based on the knowledge of TM III pregnant women at PMB Restu Bunda (n = 54)

No	Knowledge	Frequency (f)	Percentage (%)
1.	Good	40	74.1
2.	Enough	14	25.9
3.	Not enough	0	0

Total	54	100.0
-------	----	-------

Source: Primary Data, 2022

Based on table 2. It is known that the characteristics of the knowledge of respondents in the good category are (74.1%) and respondents with sufficient knowledge are (25.9%) while for respondents in the less category are (0%).

3.1.1.3. Work

Table 3. Frequency Distribution Based on Occupation of TM III Pregnant Women at PMB RestuBunda (n=54)

No	Work	Frequency (f)	Percentage (%)
1.	working	5	9.3
2.	Doesn't work	49	90.7
Total		54	100.0

Source: Primary Data, 2022

Based on Table 3, it is known that the characteristics of respondents based on their employment status are that the average respondent does not work. It is known from the data obtained with a frequency of 49 respondents with a percentage (90.7%) not working and the rest are respondents with working status indicated by the frequency 5 respondents with the percentage is (9.3%).

3.1.1.4. Parity

Table 4. Frequency Distribution Based on Parity of TM III Pregnant Women at PMB Restu Bunda (n=54)

No	Parity	Frequency (f)	Percentage (%)
1.	Primigravida	24	44.4
2.	Multigravida	30	55.6
Total		54	100.0

Source: Primary Data, 2022

Based on table 4. It is known that the characteristics of respondents with multi gravida status, this is indicated by the frequency of 30 respondents who have a percentage (55.6%) and the other status is primigravida indicated by the frequency of 24 respondents with a percentage (44.4%).

3.1.1.5. Family support

Tabel 5. Distribusi Frekuensi Berdasarkan Dukungan Keluarga pada Ibu Hamil TM III di PMB Restu Bunda (n=54)

No	Family support	Frequency (f)	Percentage (%)
1.	Support	50	92.6
2.	Doesn't support	4	7.4
Total		54	100.0

Based on table 5. It is known that the average respondent received support from the family, this is indicated by the percentage (92.6%) and those who did not receive support from the family were as many as (7.4%).

3.1. 2. Bivariate Analysis

Bivariate analysis was carried out by researchers to prove whether the hypotheses that had been made previously were rejected or accepted..

3.1.2.1. The relationship between age and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Table 6. The relationship between age and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda (n = 54)

Age	participation				Total		P
	Follow		Do not follow		n	%	
	n	%	n	%			
<20 Years	0	0.0	0	0.0	0	0.0	
20-35 Years	11	21.2	41	78.8	52	100.0	
> 35 Years	1	50.0	1	50.0	2	100.0	0.398
Total	12	22.2	42	77.8	54	100.0	

Source: Primary Data, 2022

Based on table 6 it is known that respondents in the age category <20 years who participated and did not take part in Prenatal Gentle Yoga activities (0%). For respondents in the age category of 20-35 years who participated in Prenatal Gentle Yoga there were 11 (21.2%) and those who did not participate were 41 (78.8%). Meanwhile, for the age group >35 years, 1 (50.0%) participated in Prenatal Gentle Yoga and 1 (50.0%) did not participate. Bivariate results with the Fisher's exact test obtained a correlation coefficient of 0.398, which means that it can be concluded that the two variables have no relationship, this is supported by a P value of 0.398 > 0.05.

3.1.2.2. The relationship between knowledge and participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Table 7. The relationship between knowledge and participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda (n = 54)

knowledge	participation				Total		P
	Follow		Do not follow		n	%	
	n	%	n	%			
Good	12	30.0	28	70.0	40	100.0	
Enough	0	0.0	14	100.0	14	100.0	0.024
Not enough	0	0.0	0	0.0	0	0.0	
Total	12	22.2	42	77.8	54	100.0	

Source: Primary Data, 2022

Based on table 7, it is known that 40 respondents with good knowledge category participated in Prenatal Gentle Yoga as many as 12 (30.0%) and 28 (70.0%) did not

participate. Respondents in the sufficient category were 14 and those who did not take Prenatal Gentle Yoga (100%). For the less known knowledge category, n indicates (0.0%) the frequency of respondents participating or not participating in Prenatal Gentle Yoga as well (0.0%). There is a relationship between knowledge and participation, because there is an expected value of 1 Cell, an alternative Fisher Exact Test is carried out to obtain a P value of 0.024 < 0.05, meaning that there is a relationship between knowledge and participation.

3.1.2.3. The relationship between work and the participation of TM III pregnant women in the implementation of prenatal gentle yoga at PMB Restu Bunda

Table 8. Relationship of work to the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda (n = 54)

Work	participation				Total		P
	Follow		Do not follow		n	%	
	n	%	n	%			
work	1	20.0	4	80.0	5	100.0	1.000
Doesn't work	11	22.4	38	77.6	49	100.0	
Total	12	22.2	42	77.8	54	100.0	

Source: Primary Data, 2022

Based on table 8. It is known that there are 5 respondents with working status who take part in Prenatal Gentle Yoga as much as 1 (20.0%) and those who do not take part in Prenatal Gentle Yoga as much as 4 (80.0%) the rest who are not working are 49 who take part in Prenatal Gentle Yoga as much as 11 (22.4%) and 38 (77.6%) did not take Prenatal Gentle Yoga. The relationship between work and participation because there is an expected value, namely there are 2 cells, an alternative test in the form of the Fisher's Exact Test is carried out, and the p value is 1 > 0.05, which means that there is no relationship between work and participation.

3.1.2.4. The relationship between parity and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Table 9. The relationship of parity to the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda (n = 54)

Parity	participation				participation		P
	Follow		Do not follow		n	%	
	n	%	n	%			
Primigravida	6	25.0	18	75.0	24	100.0	0.913
Multigravida	6	20.0	24	80.0	30	100.0	
Total	12	22.2	42	77.8	54	100.0	

Source: Primary Data, 2022

Based on table 9, it is known that there were 24 respondents with primigravida status and 6 (25.0%) participating in Prenatal Gentle Yoga and 18 (75.0%) not participating in Prenatal Gentle Yoga. Meanwhile, 30 respondents with multigravida status participated in Prenatal Gentle Yoga with a total of 6 (20.0%) and 24 (80.0%) who did not participate in Prenatal Gentle Yoga. The relationship between parity and participation using the chi square test, seen from the continuity correction, obtained a p value of $0.913 > 0.05$. It can be concluded that there is no relationship between parity and participation.

3.1.2.5. The relationship between family support and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Table 10. The relationship of family support to the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda (n = 54)

family support	participation				Tota		P
	Follow		Do not follow		n	%	
	n	%	n	%			
support	11	22.0	39	78.0	50	100.0	
Doesn't support	1	25.0	3	75.0	4	100.0	1.000
Total	12	22.2	42	77.8	54	100.0	

Source: Primary Data, 2022

Based on table 10, it is known that 50 respondents who received support from their families participated in Prenatal Gentle Yoga as many as 11 (22.0%) and those who did not participate in Prenatal Gentle Yoga were as many as 39 (78.0%) and respondents who did not receive support from their families were 4 (25.0%) participated in Prenatal Gentle Yoga and 3 (75.0%) did not participate in Prenatal Gentle Yoga. The relationship between family support and participation where there is an expected value of 2 cells, an alternative test in the form of the Fisher's Exact Test was carried out, obtained a p value of $1 > 0.05$, it was concluded that there was no relationship between family support and participation.

3.2. Discussion

Based on the results of the study, the following discussion was obtained:

1. The relationship between age and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Based on table 6 it is known that there were 11 (21.2%) respondents in the age group <20-35 years who participated in Prenatal Gentle Yoga and 41 (78.8%) who did not. Meanwhile, for the age group >35 years, 1 (50.0%) participated in Prenatal Gentle Yoga and 1 (50.0%) did not participate. Bivariate results with the Fisher's exact test obtained a correlation coefficient of 0.398, which means that it can be concluded that the two variables have no relationship, this is supported by a P value of $0.398 > 0.05$.

Based on the research results from table 6, it is known that age has no relationship with the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB, mother's blessing, this is not in line with research that has been conducted by [13], where the results of the research is that there is a relationship between the age of the respondent and participation. The researcher explained that in this case the majority of pregnant women

with a mother's age of 20-35 years had high results in participating in pregnancy exercise where mothers knew the importance of their health needs during pregnancy.

Similar results were also mentioned in the study [12], that there is a significant relationship between the age of the respondent and the participation in prenatal yoga activities because according to the view of the researchers, pregnant women aged 20- 35 know the importance of health needs during pregnancy [14].

In this case most of the pregnant women aged 20-35 years have high results in participating in pregnancy exercise where mothers know the importance of their health needs during pregnancy. The age of pregnant women will be better if it is not "too" either too young or too old.

When someone enters adulthood, the age range of 31-40 years, their thinking pattern should become more logical, so that this will make it easier for them to remember and have a broader perspective on information so that it will make it easier to remember and understand new things. A woman who gets older will become more mature in terms of thinking about meeting her personal needs. Mature age will affect the decision-making process and thinking process in carrying out an activity [8].

2. The relationship between knowledge and participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Based on table 7, it is known that there were 40 respondents with a good knowledge category, 12 (30.0%) participated in Prenatal Gentle Yoga and 28 (70.0%) did not. The remaining 14 respondents were known to be in the sufficient knowledge category and did not participate in Prenatal Gentle Yoga (100%). There is a relationship between knowledge and participation, because there is an expected value of 1 Cell, an alternative Fisher Exact Test is carried out to obtain a P value of 0.024 <0.05, meaning that there is a relationship between knowledge and participation.

Based on table 7 it is known that knowledge has a relationship with the participation of third trimester pregnant women in the implementation of Prenatal Gentle Yoga. The results of this study are in line with research conducted by [15], where the results of the research are that there is a significant relationship between knowledge and the participation of pregnant women in the application of prenatal yoga. According to researchers, knowledge is a basis for someone to be able to do something and the main key to growing someone's interest. For example, you can learn from experiences. Respondents in this study who have sufficient knowledge about yoga can be advised to be able to further increase their knowledge and can apply it directly about prenatal yoga for the health of the mother and the baby in the mother's womb. the more knowledge gained, the higher the interest in participation of pregnant women to be able to learn about prenatal yoga exercises. However, if one's knowledge is low, it will be difficult for someone to increase interest in participation. Therefore it is important to always increase knowledge, knowledge can also be obtained from individual experiences and the experiences of others.

Similar research results were also mentioned by the research conducted [16], that there is a relationship between knowledge and the participation of pregnant women in the application of yoga exercises. According to researchers, knowledge is the basis for someone to do something and the main basic key in growing interest in one's participation. Knowledge can be obtained in various ways, for example by learning and from experience. To be able to generate interest in something, a person needs an understanding in a particular matter, so that knowledge is closely related to one's interest in participation.

[17], also mentioned the results of his research that the conclusion of this study was that there was a relationship between knowledge and the participation of TM II and III pregnant women in Prenatal Gentle Yoga. A knowledgeable pregnant woman who has good knowledge will certainly participate in the expectant mother class. Meanwhile, pregnant women who are less knowledgeable will not participate in pregnant women classes. the knowledge base possessed will affect the entire environment of the community. This makes the public understand whether or not the stages and forms of existing participation. Knowledge is an important domain in forming an action, while participation is defined as active participation in activities [18].

3. Occupational relations with the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Based on table 8, it is known that there are 5 respondents with working status who take part in Prenatal Gentle Yoga as much as 1 (20.0%) and those who do not take part in Prenatal Gentle Yoga as much as 4 (80.0%) the rest who are not working are 49 who take part in Prenatal Gentle Yoga as much as 11 (22.4 %) and 38 (77.6%) did not take Prenatal Gentle Yoga. The relationship between work and participation is because there is an expected value, namely there are 2 cells, so an alternative test is carried out in the form of the Fisher's Exact Test, and the p value is $1 > 0.05$, which means that there is no relationship between work and participation.

Based on table 8 it is known that the research results between work and the participation of Prenatal Gentle Yoga in pregnant women are not related, this is not in line with research that has been conducted by [12], mentioned that working mothers have less time to participate in prenatal yoga activities. Meanwhile, housewives have more time to participate in these activities. With limited time, it is more difficult for working mothers to spend time compared to housewives [8].

The same thing was also stated by the results of the study [19], that there is a relationship between employment status and the participation of pregnant women in pregnancy activities. The author assumes that pregnant women who do not work apart from taking care of housework, pregnant women who do not work have more free time and they can participate in any activity for the sake of their own health and that of the baby they are carrying, one of these activities is pregnancy yoga exercise. In contrast to working pregnant women, they are too busy with their work, so working pregnant women cannot take the time to participate in pregnancy yoga exercises.

work is generally a time-consuming activity. Working for mothers will have an influence on their lives so that mothers do not have much time to get information. Humans need a job to be able to develop and change. Someone working aims to achieve a state that is more than the previous state. By working someone can do something valuable, useful and gain various experiences. Pregnant women who work have little time to attend classes for pregnant women, one of which is pregnancy exercise or Prenatal Gentle Yoga. Work makes pregnant women spend a lot of time at work [20].

4. The relationship between parity and the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Based on table 9, it is known that there were 24 respondents with primigravida status and 6 (25.0%) participating in Prenatal Gentle Yoga and 18 (75.0%) not participating in Prenatal Gentle Yoga. Meanwhile, 30 respondents with multigravida status participated in Prenatal Gentle Yoga with a total of 6 (20.0%) and 24 (80.0%) who did not participate in Prenatal Gentle Yoga. The relationship between parity and participation using the chi square test, seen from the continuity correction, obtained a p value of $0.913 > 0.05$. It can be concluded that there is no relationship between parity and participation.

Based on table 9 it is known that there is no relationship between parity and participation, this is different from previous research that has been conducted by [21], where in the results of the study it was stated that parity was related to the participation of respondents in participating in activities during pregnancy where the authors assumed that pregnant yoga exercises were rarely attended by women who had never given birth could be due to a lack of information about the benefits of pregnant yoga exercises for dealing with childbirth. Whereas for mothers who have given birth, in addition to the lack of information, it can also be due to busy work, so it takes up time to do yoga during pregnancy. The amount of experience in childbirth also determines the amount of maternal participation in participating in yoga during pregnancy.

Participation in activities for pregnant women with multipara parity should not be something foreign or new for mothers and their partners. Armed with previous experience, they are motivated to improve their health status in dealing with pregnancy [13].

5. The relationship between family support for the participation of TM III pregnant women in

the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Based on table 10, it is known that 50 respondents who received support from their families participated in Prenatal Gentle Yoga as many as 11 (22.0%) and those who did not participate in Prenatal Gentle Yoga were as many as 39 (78.0%) and respondents who did not receive support from their families were 4 (25.0%) participated in Prenatal Gentle Yoga and 3 (75.0%) did not participate in Prenatal Gentle Yoga. The relationship between family support and participation where there is an expected value of 2 cells, an alternative test in the form of the Fisher's Exact Test was carried out, obtained a p value of $1 > 0.05$, it was concluded that there was no relationship between family support and participation.

Based on table 10, it is known that 50 respondents who received support from their families participated in Prenatal Gentle Yoga as many as 11 (22.0%) and those who did not participate in Prenatal Gentle Yoga were as many as 39 (78.0%) and respondents who did not receive support from their families were 4 (25.0%) participated in Prenatal Gentle Yoga and 3 (75.0%) did not participate in Prenatal Gentle Yoga. The relationship between family support and participation where there is an expected value of 2 cells, an alternative test is carried out in the form of the Fisher's Exact Test, obtained p value 1

> 0.05 , it is concluded that there is no relationship between family support and participation.

Based on table 10, it is known that there is no relationship between family support and participation. pregnant women in implementing Prenatal Gentle Yoga this is contrary to the results of previous studies [8], where the results of the research are that there is a relationship between family support and the implementation of Prenatal Gentle Yoga. The researcher explained that pregnant women who have the support of their husbands and family members to do something, will try to do something well and diligently, with the hope of good results. This is because if someone has the will and gets support from people around them, it will be more profitable and provide regularity in carrying out activities.

The husband is the closest person to the respondent. In the household, the husband's treatment will affect the wife's behavior. Including in the research area, husband's support can affect the behavior of respondents. The support in question is attitude support, willing to take to health services, financial support, and approval support [22].

4. Conclusion

- 4.1. Knowledge has a relationship with the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda
- 4.2. Age has no relationship to the Participation of TM III Pregnant Women in the Implementation of Prenatal Gentle Yoga at PMB Restu Bunda
- 4.3. Work has no relationship to the Participation of TM III Pregnant Women in the Implementation of Prenatal Gentle Yoga at PMB Restu Bunda
- 4.4. Parity has no relationship to the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu
- 4.5. Family support has no relationship to the participation of TM III pregnant women in the implementation of Prenatal Gentle Yoga at PMB Restu Bunda

Declaration

Acknowledgments: All sources of funding of the study should be disclosed. Please clearly indicate **Conflicts and Suggestions:** Respondents sometimes lack focus in filling out the questionnaire given because the busy atmosphere reduces focus, Respondents often provoke questions from the questionnaire giver regarding the strengthening of the answer options they will choose, Researchers only examine 5 factors and have not examined further factors related to participation of third trimester pregnant women in the implementation of Prenatal Gentle Yoga.

There is a need for further research regarding other factors that have been examined related to the relationship with the participation of third trimester pregnant women in the implementation of Prenatal Gentle Yoga such as the busy factor of mothers who do not work related to child care at home.

References

- [1] F. Ananda, M. S. Putri, Z. Surdam, A. S. Dewi, and A. I. Arfah, "Hubungan Pengetahuan Ibu Hamil Tentang Tanda Bahaya Kehamilan Dengan Kepatuhan ANC RSIA Ananda Makassar 2019," *FAKUMI Med. J.*, vol. 2, no. 3, pp. 172–177, 2022.
- [2] P. Sarwono, *Ilmu Kebidanan*. Jakarta: YBPSP, 2015.
- [3] B. Rahayu, Reni Merta Kusuma, and Alfie Ardiana Sari, "Optimalisasi Gerakan Yoga untuk Mengurangi Ketidaknyamanan pada Kehamilan," *J. Pengabd. Masy. Formosa*, vol. 1, no. 1, pp. 53–62, 2022, doi: 10.55927/jpmf.v1i1.343.
- [4] L. Fitriana, "EFEKTIVITAS SENAM HAMIL DAN YOGA HAMIL TERHADAP PENURUNAN NYERI PUNGGUNG PADA IBU HAMIL TRIMESTER III DI PUSKESMAS PEKKABATA," *J. Kesehat. Masy.*, vol. 4, no. 2, pp. 72–80, 2018.
- [5] R. T. Winarni and W. T. P, "PENGARUH PRENATAL YOGA TERHADAP TEKANAN DARAH PADA IBU KOTA KEDIRI," vol. 8, no. 2, pp. 58–63, 2021, doi: <https://doi.org/10.1210/jhj.v5i2.258>.
- [6] T. A. Lestari, A. Susanti, and Fathunikmah, "Faktor-Faktor Yang Berhubungan Dengan keikutsertaan Ibu Hamil Dalam Mengikuti Kelas Ibu Hamil Di Wilayah Kerja Puskesmas Kampar Kiri Tengah Kabupaten Kampar," *J. Ibu dan Anak*, vol. 6, no. 2, pp. 112–119, 2018.
- [7] N. W. M. Parwati and I. A. Wulandari, "HUBUNGAN PENDIDIKAN DAN PERSEPSI DENGAN KEIKUTSERTAAN PRENATAL YOGA PADA IBU HAMIL," *J. Kesehat. Hesti Wira Sakti*, vol. 7, no. 2, 2019.
- [8] W. Sartika and S. Qomariah, "Analisis Faktor – Faktor Yang Mempengaruhi Keikutsertaan senam Hamil Pada Ibu Hamil Trimester Iii Di Bpm Hj. Dince Safrina Sst," *J. Keperawatan Abdurrah*, vol. 3, no. 1, pp. 57–63, 2019, doi: 10.36341/jka.v3i1.813.
- [9] A. Lutfiyati, D. Yati, and S. Riyadi, "Hubungan Karakteristik Ibu Hamil dengan Sikap terhadap Pelaksanaan Senam Hamil di Puskesmas Srandakan, Bantul," *Wiraraja Med. J. Kesehat.*, vol. 10, no. 2, pp. 84–90, 2020, doi: 10.24929/fik.v10i2.1083.
- [10] R. Uzza, S. Adi, and S. Puspita Ratih, "Factors Influencing Pregnant Women's Participation in Prenatal Classes in Magetan Regency, Indonesia," *KnE Life Sci.*, vol. 2021, no. ISMoPHS 2020, pp. 195–203, 2021, doi: 10.18502/cls.v0i0.8880.
- [11] A. Yuliana, S. A. Putri, and N. Sukoharjo, "FAKTOR YANG BERHUBUNGAN DENGAN KEIKUTSERTAAN IBU DALAM KELAS HAMIL DI DESA NGASINANSUKOHARJO PADA ERA NEW NORMAL," pp. 382–390, 2021.
- [12] S. Andarwulan, A. Latifah, and Y. K. Waroh, "ANALISIS FAKTOR – FAKTOR KEIKUTSERTAAN IBU HAMIL TRIMESTER III TERHADAP PRENATAL YOGA," *J. Ilm. Kebidanan*, vol. 8, no. 1, 2022, doi: <https://doi.org/10.33023/jikeb.v8i1.1040>.
- [13] E. N. Windari, R. Putri, and S. N. Astriani, "Hubungan Karakteristik Ibu (Usia, Paritas, Pendidikan) Dan Dukungan Sosial Suami Dengan Keikutsertaan Senam Hamil Di Desa Pandanmulyo," *J. Issues Midwifery*, vol. 2, no. 3, pp. 30–40, 2018, doi: 10.21776/ub.joim.2018.002.03.3.
- [14] U. Laili, "Analisis Faktor-Faktor Yang Mempengaruhi Keikutsertaan Senam Hamil Pada Ibu Hamil Di BPS NINA Surabaya.," *Journal2.Unusa.Ac.Id*, 2015.

- [15] R. B. Situmorang, T. Rossita, and D. T. Rahmawati, "Hubungan Senam Prenatal Yoga dengan Tingkat Kecemasan Ibu Hamil Primigravida Trimester III," *J. Ilmu Kesehat. Masy.*, vol. 9, no. 03, pp. 178–183, 2020, doi: 10.33221/jikm.v9i03.620.
- [16] P. L. Sari and H. Nawangsari, "HUBUNGAN PENGETAHUAN DENGAN MINAT IBU HAMIL DALAM PENERAPAN SENAM YOGA (Di Ponkesdes Grogol Kecamatan Diwek Kabupaten Jombang)," *J. Kebidanan*, vol. 9, no. 2, pp. 163–170, 2019.
- [17] Aris Noviani and Siskana Dewi Rosita, "Hubungan Pengetahuan Dengan Minat Ibu Hamil Tm li Dan Iii Terhadap Prenatal Gentle Yoga," *J. Ilmu Kebidanan dan Kesehat. (Journal Midwifery Sci. Heal.*, vol. 12, no. 2, pp. 01–07, 2021, doi: 10.52299/jks.v12i2.83.
- [18] I. Baroroh, M. Jannah, and P. R. Meikawati, "Hubungan Pengetahuan Ibu Hamil Dengan Keikutsertaan Kelas Ibu Hamil Di Wilayah Kerja Puskesmas Jenggol Kota Pekalongan," *Siklus J. Res. Midwifery Politek. Tegal*, vol. 6, no. 2, pp. 212–217, 2017, doi: 10.30591/siklus.v6i2.579.
- [19] H. Juaria, "PENDIDIKAN DAN PEKERJAAN IBU HAMIL TERHADAP KEIKUTSERTAAN SENAM HAMIL," vol. 4, no. 1, pp. 67–71, 2016.
- [20] Tri Anasari, "Analisis Faktor - Faktor Yang Berhubungan Dengan Keikutsertaan Ibu Hamil Dalam Melakukan Senam Hamil Pada Kelas Ibu Hamil," *J. Kesehat. Akad. kebidanan YLPP Purwokerto*, 2013.
- [21] A. Impartina, "Hubungan Paritas Dengan Partisipasi Ibu Hamil Mengikuti Senam Hamil," *Surya*, vol. 53, no. 9, pp. 1689–1699, 2017.
- [22] K. E. Linadi, "Dukungan Suami Mendorong Keikutsertaan Pap Smear Pasangan Usia Subur (Pus) Di Perumahan Pucang Gading Semarang," *J. Kesehat. Reproduksi*, vol. 4, no. 2, pp. 61–71, 2013.