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The Role Of Midwives In Achieving Complete Neonatal Visits In East Kasiruta District In 2026

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Abstract

Neonatal mortality remains a significant public health challenge in Indonesia, accounting for the largest proportion of under-five deaths. Complete neonatal visits are essential to monitor newborn health, detect complications early, and provide appropriate health education to families. Midwives play a crucial role in ensuring the successful implementation of neonatal healthcare services at the community level.This study aimed to explore the role of midwives in the implementation of complete neonatal visits in East Kasiruta District in 2026.This study employed a qualitative observational design with a descriptive approach. Informants were selected using purposive sampling and consisted of mothers with infants aged 28 days to 11 months living in East Kasiruta District. Data were collected through structured questionnaires and interviews conducted from January 5 to January 10, 2026. The data were analyzed descriptively through data reduction, data presentation, and conclusion drawing. The findings revealed that all informants were aware of complete neonatal visits and generally understood their purpose in monitoring newborn health. Midwives were identified as the primary source of information regarding neonatal care, with four out of five informants obtaining information directly from village midwives. All informants reported receiving neonatal home visits during the first 28 days after birth; however, the frequency of visits varied from one to three visits. The study also identified additional factors influencing neonatal visit utilization, including husband support and local cultural traditions that discourage newborns from leaving the house before the age of 40 days. Midwives play a vital role in promoting and implementing complete neonatal visits in East Kasiruta District. However, improving neonatal healthcare coverage requires strengthening midwives' outreach activities and increasing family and community awareness to overcome social and cultural barriers.

Keywords: ***Midwife Role, Neonatal Visit, Neonatal Health Services, Newborn Care, Maternal Knowledge, Community Health***

INTRODUCTION

Neonatal health remains a major public health concern in Indonesia due to the high proportion of child deaths occurring during the first month of life. According to the Indonesian Ministry of Health, the number of deaths among children aged 0–59 months reached 34,226 cases in 2023. Of these, neonatal deaths (0–28 days) accounted for 27,530 cases (80.4%), while post-neonatal deaths (29 days–11 months) accounted for 4,951 cases (14.4%), and deaths among children aged 12–59 months accounted for 1,781 cases (5.2%). These figures indicate that the neonatal period remains the most vulnerable stage of child survival and requires intensive health interventions to reduce neonatal mortality rates (Kementerian Kesehatan Republik Indonesia, 2024).

Neonatal mortality is caused by several factors, including respiratory and cardiovascular disorders, low birth weight (LBW), congenital anomalies, infections, neurological disorders, central nervous system diseases, and intrapartum complications. In addition, a considerable proportion of neonatal deaths remain classified as having unknown causes. Many of these conditions can be prevented or managed through early detection and timely intervention, highlighting the importance of comprehensive neonatal health services during the first weeks of life (Kementerian Kesehatan Republik Indonesia, 2024).

The Government of Indonesia continues to strengthen maternal and child health programs to ensure that every child has the right to survive, grow, and develop optimally. This commitment is reflected in the Regulation of the Minister of Health Number 25 of 2024 concerning Child Health Services, which emphasizes the provision of quality health care and protection for all children. One of the key strategies implemented to achieve this goal is the neonatal visit program, which aims to

ensure that newborns receive essential health services and continuous monitoring during the neonatal period (Peraturan Menteri Kesehatan Nomor 25 Tahun 2014 Tentang Upaya Kesehatan Anak, 2014).

Neonatal visits are designed to improve access to basic newborn health services, facilitate early detection of health problems, and provide counseling and support to families regarding newborn care. The neonatal period is characterized by rapid physiological adaptations as the infant transitions from intrauterine to extrauterine life. During this stage, newborns undergo adaptations in the cardiovascular, respiratory, urogenital, integumentary, musculoskeletal, endocrine, and nervous systems. Failure of these adaptations may lead to serious complications and increase the risk of morbidity and mortality. Therefore, regular neonatal visits are essential to monitor newborn health and identify potential complications at an early stage (Suherlin et al., 2024).

Despite the importance of neonatal visits, their coverage remains below the national target in several regions. Data from the Indonesian Health Profile 2023 indicate that the national coverage of complete neonatal visits reached 90.8%, whereas North Maluku Province achieved only 87.6%, which is still below the national average. This situation suggests the existence of barriers related to healthcare accessibility, geographical conditions, community awareness, and the performance of healthcare providers in delivering neonatal services (Kementerian Kesehatan Republik Indonesia, 2024).

Midwives play a pivotal role in ensuring the success of neonatal health programs. As frontline healthcare providers, midwives are responsible for conducting neonatal examinations, identifying danger signs, providing health education to parents, facilitating referrals when necessary, and encouraging families to complete the recommended neonatal visits. Recent studies have demonstrated that active involvement of midwives significantly contributes to improving neonatal care utilization, increasing family compliance with neonatal visit schedules, and reducing delays in the identification and management of neonatal complications (Nurhayati, 2022).

East Kasiruta District is one of the regions in South Halmahera Regency with geographical characteristics that may influence access to healthcare services. These conditions can potentially affect the implementation and coverage of complete neonatal visits. Considering the strategic role of midwives in promoting neonatal health and reducing neonatal mortality, it is important to investigate how midwives contribute to the implementation of complete neonatal visits in this area. Therefore, this study aims to examine the role of midwives in complete neonatal visits in East Kasiruta District in 2026. The findings are expected to provide evidence for improving neonatal health services and supporting efforts to reduce neonatal mortality in North Maluku Province.

RESEARCH METHODS

This study employed a qualitative research design with an observational approach and a descriptive study framework. The qualitative approach was chosen to obtain an in-depth understanding of the role of midwives in the implementation of complete neonatal visits in East Kasiruta District in 2026. The study was conducted in East Kasiruta District from January 5 to January 10, 2026. Informants were selected using a purposive sampling technique, in which participants were deliberately chosen according to specific criteria relevant to the objectives of the study. The inclusion criteria were mothers who had infants aged 28 days to 11 months and resided in East Kasiruta District.

Data were collected using a structured questionnaire administered to the informants. The questionnaire contained questions regarding neonatal visit practices, utilization of neonatal health services, and the role of midwives in providing care and support for newborns and their families. In addition, observational data were collected to obtain a broader understanding of neonatal health service implementation within the study area.

Data analysis was conducted using a descriptive qualitative approach. The process involved data reduction, data presentation, and conclusion drawing. The analysis focused on identifying themes and patterns related to the role of midwives in supporting the implementation of complete neonatal visits.

To ensure the trustworthiness of the data, the researcher reviewed the completeness and consistency of questionnaire responses and compared information obtained from different informants. Ethical principles were maintained throughout the study by providing participants with information about the research objectives, ensuring confidentiality and anonymity, and obtaining informed consent prior to data collection.

RESULTS AND DISCUSSION

Result

This study involved five informants who were mothers of infants aged 28 days to 11 months in East Kasiruta District. Data were collected through interviews using questionnaires regarding knowledge of complete neonatal visits and the role of midwives in neonatal health services. The results showed that all five informants were aware of complete neonatal visits. Informants generally understood complete neonatal visits as health services provided to newborns during the neonatal period. However, the explanations provided by the mothers varied in detail. One informant explained that complete neonatal visits consist of at least three health service visits for newborns, while the other informants only stated that they were familiar with the term.

Regarding the purpose of complete neonatal visits, all informants stated that the visits were intended to monitor the health condition of newborns. Some mothers mentioned specific objectives such as ensuring the baby's physical health, monitoring urination and defecation, assessing breastfeeding adequacy, providing education on newborn care, and detecting abnormalities at an early stage.

The primary source of information about complete neonatal visits was midwives. Four informants reported obtaining information directly from village midwives, while one informant received information through Posyandu activities. Concerning neonatal home visits conducted by midwives during the first 28 days after birth, all informants reported having received at least one visit. The frequency of visits varied among informants. One informant reported receiving one neonatal visit, two informants reported receiving two visits, and two informants reported receiving three visits. Table 1 presents the responses of informants regarding complete neonatal visits.

Table 1. Informants' Responses Regarding Complete Neonatal Visits

Question	Informant 1	Informant 2	Informant 3	Informant 4	Informant 5
Do you know what a complete neonatal visit is?	Yes, health services provided at least three times for newborns	Yes	Yes	Yes	Yes
Do you know the purpose of complete neonatal visits?	To ensure the baby is healthy, monitor urination and defecation, ensure adequate breastfeeding, and provide newborn care education	Yes	Yes	Yes	To identify newborn care needs and detect abnormalities early

Where did you obtain information about complete neonatal visits?	Midwife	Midwife	Midwife	Posyandu	Village midwife
Did a midwife conduct neonatal home visits during the first 0–28 days after birth? If yes, how many times?	2 visits	1 visit	3 visits	2 visits	3 visits

Based on the interview results, all informants were aware of complete neonatal visits and recognized their importance for newborn health monitoring. Midwives were identified as the primary source of information regarding neonatal visits. Although all informants reported receiving neonatal home visits from midwives during the first 28 days after birth, the frequency of visits varied, ranging from one to three visits. These findings indicate differences in the implementation of complete neonatal visit services among mothers in East Kasiruta District.

Discussion

The findings of this study indicate that all informants were aware of complete neonatal visits and generally understood that these visits are intended to monitor newborn health and detect abnormalities at an early stage. However, the depth of understanding among mothers varied, as most informants were only able to explain the practical aspects of neonatal care and could not fully describe the broader objectives and schedule of complete neonatal visits. This finding suggests that maternal knowledge regarding neonatal health services remains dependent on the quality and intensity of health education provided by healthcare workers, particularly midwives.

The results are consistent with the study conducted by (Rahmawati et al., 2019) which found that maternal knowledge significantly influences compliance with neonatal visits and that midwives play an important role in providing information and motivation to mothers. Similarly, a study by (Handayani & Kurniawati, 2023) reported that mothers who received adequate counseling from healthcare providers demonstrated better knowledge and utilization of neonatal health services compared with mothers who received limited information. These findings emphasize the importance of continuous education during pregnancy, childbirth, and the postpartum period.

This study also found that midwives were the primary source of information regarding complete neonatal visits. Four out of five informants reported obtaining information directly from village midwives, while one informant received information through Posyandu activities. This finding highlights the strategic role of midwives as educators and facilitators in community-based maternal and child healthcare services. According to (Kementerian Kesehatan Republik Indonesia, 2024) midwives are responsible for providing health education, monitoring neonatal health, detecting complications early, and ensuring that newborns receive the recommended neonatal services.

The important role of midwives identified in this study is supported by previous research. (Ningsih & Suwandi, 2018) found that active involvement of midwives in counseling and home visits significantly increased maternal awareness and participation in neonatal healthcare programs. Likewise, (Sari, 2024) reported that effective communication between midwives and mothers positively influenced adherence to neonatal visit schedules. These studies demonstrate that the success of neonatal health programs is strongly associated with the performance and commitment of frontline healthcare providers.

Although all informants reported receiving neonatal home visits, the frequency of visits varied from one to three times. National guidelines recommend complete neonatal visits during the neonatal

period to ensure early identification of health problems and appropriate intervention when needed. The variation observed in this study suggests that the implementation of neonatal home visit services may not be fully standardized across the study area. Limited healthcare resources, geographical barriers, transportation difficulties, and workload among healthcare providers may contribute to differences in service delivery.

This finding is supported by research conducted by (Katarina & Rahman, 2026) which revealed that geographical challenges and limited healthcare accessibility were significant barriers to the implementation of neonatal services in remote areas of Indonesia. Similarly, (Azzahra et al., 2026) reported that inadequate numbers of healthcare personnel and long travel distances reduced the frequency of home visits conducted by midwives, particularly in rural and island communities. Considering that East Kasiruta District is characterized by geographical challenges typical of island regions, these factors may influence the implementation of complete neonatal visits.

Another important finding emerging from the interviews was the presence of social and cultural factors that may affect neonatal healthcare utilization. Although these variables were not specifically examined in the study design, informants indicated that husband support and local traditions influenced decisions related to neonatal visits. Some mothers reported that husbands with limited knowledge of neonatal care were less likely to encourage healthcare utilization. In addition, cultural beliefs that prohibit newborns younger than 40 days from leaving the house may reduce opportunities for accessing neonatal health services.

This finding aligns with the study by (Azzahra et al., 2026) which found that family support, particularly husband involvement, significantly influenced maternal compliance with neonatal and postnatal healthcare recommendations. Furthermore, research by (Oktafiani et al., 2023) demonstrated that cultural practices and traditional beliefs continue to affect maternal and child health service utilization in several Indonesian communities. These findings suggest that improving neonatal health outcomes requires not only strengthening healthcare services but also addressing family and community-level factors through culturally sensitive health promotion strategies.

Overall, the findings indicate that midwives play a crucial role in providing information and neonatal healthcare services in East Kasiruta District. However, variations in the frequency of neonatal visits and the influence of social and cultural factors suggest the need for strengthened community education, improved service coverage, and enhanced support systems to ensure that all newborns receive complete neonatal care according to national standards.

CONCLUSIONS

Based on the findings of this study, it can be concluded that midwives play a crucial role in the implementation of complete neonatal visits in East Kasiruta District. All informants were aware of neonatal visits and identified midwives as their primary source of information. However, mothers' understanding of the objectives and benefits of complete neonatal visits was still limited, and the implementation of neonatal home visits had not fully met the recommended standards, as not all informants received three visits during the neonatal period. In addition to the role of midwives, family support, particularly from husbands, and local cultural traditions that restrict newborns from leaving the house before the age of 40 days were found to influence the implementation of complete neonatal visits. Therefore, the success of neonatal visit programs depends not only on the performance of midwives but also on the support of families and the community to ensure that all newborns receive optimal neonatal healthcare services.

Midwives should strengthen their role in neonatal healthcare services by increasing the frequency of home visits, providing continuous health education, and monitoring newborn health according to neonatal care standards. Furthermore, broader health education programs are needed for the community, targeting not only mothers but also husbands and other family members, to improve

awareness of the importance of complete neonatal visits. Health promotion activities through Posyandu, home visits, and community engagement should be enhanced to address social and cultural barriers that may hinder the utilization of neonatal healthcare services. These efforts are expected to increase the coverage of complete neonatal visits and contribute to reducing neonatal morbidity and mortality rates.

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