The Knowledge Level among Third Trimester Pregnant Women on Premature Rupture of Membranes

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ABSTRACT

Based on preliminary data, there are 36 from 187 pregnant women in the third trimester and 124 women giving birth at the Immanuela Clinic experienced premature rupture of membranes. Premature rupture of membranes is a reason dangerous infection that can result in maternal and infant morbidity and mortality. Knowledge Level can indirectly form attitudes and behavior in making decisions in the event of premature rupture of membranes. This research use descriptive quantitative method. The number of samples is 24 respondents who are between 36 weeks-40 weeks pregnant women accidentally visits Immanuela Clinic for Antenatal Care. Accidental Sampling technique with questionnaire instrument, univariate analysis with percentage results were used. The results obtained from 24 respondents, the level of knowledge of pregnant women about premature rupture of membranes at Immanuela clinic Batam has the most knowledge (45.8%) totaling 11 respondents. Most of the pregnant women aged 20-35 years (87.5%) amounted to 21 respondents with a high school education level (66.66%) totaling 16 respondents, and pregnant women with multigravida (62.5%) totaling 15 respondents. The level of knowledge of pregnant women about premature rupture of membranes at Immanuela Clinic Batam is categorized as "Enough" with most pregnant women aged 20-35 years with a high school education level and the majority of mothers being multigravida.

Keywords:
Knowledge Level Of Education
Pregnant Women
Premature rupture of membrane

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INTRODUCTION

According to the World Health Organizations (WHO) around 830 women worldwide die from complications during pregnancy and childbirth. Approximately 99% of all maternal deaths occur in developing countries (World Health Organization, 2017). The number of maternal deaths in the world in 2018 was recorded at 303,000 people and the number of maternal deaths due to complications of pregnancy and childbirth in the world was 216 people. One of the causes is caused by premature rupture of the membranes (World Health Organization, 2018). The maternal mortality rate in the world in 2017 was 216 per 100,000 live births or it is estimated that the number of maternal deaths was 810,000 deaths with the highest number being in developing countries, namely 94% of maternal deaths (World Health Organization, 2017). Based on the results of the Intercensus Population Survey (SUPAS, 2019) MMR in...
Premature rupture of membranes is defined as leakage of the membranes before delivery and less than 37 weeks of gestation. The incidence of premature rupture of membranes is about 8-10% of deliveries (Suriani Tahir, 2021). At term pregnancy, the incidence ranges from 6%-19% of pregnancies. While preterm PROM is about 2% of deliveries overall (Tahir, 2021). Almost all PROM in preterm pregnancies will be born before term or delivery will occur within one week after the membranes rupture. 70% of PROM occurs at term pregnancy. Approximately 85% of perinatal morbidity and mortality is due to prematurity. PROM is associated with the cause of the incidence of prematurity with an incidence of 30-40% (Tahir, 2021).

Previous research conducted by Dwi Lestari and Shinta Aulia in 2017 regarding the Knowledge Description of Pregnant Women TM III about Premature Rupture of Membranes at Sukoharjo Hospital, the results of research on respondents' knowledge based on the characteristics of the majority of good knowledge based on the age of the majority aged 25-34 years as many as 14 respondents, based on education the majority of high school education are 15 respondents, based on occupation are 18 respondents, while based on parity the majority are multipara as many as 11 respondents. The conclusion is that the knowledge of TM III pregnant women about premature rupture of membranes at the Immanuela Clinic, Batu Aji District, Batam City is in the good category as many as 20 respondents (54.1%). (D Lestari, S Aulia, 2017)

Meanwhile, previous research conducted by Nora Ayu and Ratih Kumoro Jati in 2018 on the Knowledge Level of Pregnant Women about Premature Rupture of Membranes at the Kalasan Health Center, Sleman Yogyakarta, the results of the study obtained that the knowledge level of pregnant women about premature rupture of membranes at the Kalasan Health Center, Sleman Yogyakarta was categorized as "Enough" with the majority of pregnant women aged 20-35 years with a high school education level the majority of mothers are not working and most of the mothers are multigravida. (Ayu, Nora. Kumoro Jati, 2018).

The results of the study by Maryuni and Dedeh Kurniasih in 2017 were the sample consisted of 114 cases of mothers who experienced premature rupture of membranes and controls as many as 228 mothers who did not experience premature rupture of membranes. The results showed that the risk factors for premature rupture of membranes were age, parity and education. (Maryuni & Dedeh, 2018) Based on multivariate analysis, the most dominant factor at risk for the incidence of premature rupture of membranes is education. Where education is one of the factors that affect knowledge (Wawan & M, 2019).

Knowledge is the result of knowing, and this happens after people sense a certain object. Sensing occurs through the human senses, namely the senses of sight, hearing, smell, taste and touch. Lack of knowledge of pregnant women and proper information about premature rupture of membranes can increase the incidence of infections caused by premature rupture of membranes which can increase maternal mortality. So it is necessary to provide complete and up-to-date information to pregnant women to increase their knowledge about premature rupture of membranes (Wawan & M, 2019).

China, the incidence of premature rupture of membranes with gestational age less than 37 weeks is 2.7% of 3% of all cases of labor with premature rupture of membranes. Premature rupture of membranes is a frequent case of complications, although the pathogenesis of premature rupture of membranes is unknown (Zhou Q, Zhang W, Xu H, Li X, 2018). According to Researcher Ivansri Marsaulina Panjaitan 2017, the incidence of PROM in Indonesia ranges from 4.5% to 7.6% of all pregnancies, this number increases every year, this is something that medical personnel must pay attention to so that the incidence of PROM can be controlled. (3) The incidence of premature rupture of membranes (PROM) in Indonesia ranges from 4.5% to 7.6% of almost all pregnancies, this number increases every year, this is something that must be considered by medical personnel so that the incidence of PROM can be controlled (Ivansri Marsaulina Panjaitani*, 2018)

A preliminary survey that I did during the Pandemic period in May 2020-October 2020 there were 187 pregnant women in the third trimester and 124 women giving birth at the Immanuela Clinic with the result that 36 of them experienced premature rupture of membranes. Where for 25 of them I obtained from secondary data and 11 cases I saw directly. TM II pregnant women with a gestational age of 12-28 weeks as many as 2 people. While pregnant women with a gestational age of 28-40 weeks were 34 people. Based on
the above background, it can be seen from the characteristics of the causes of mothers giving birth with KPD including maternal age, parity, and education as well as sources of data and the incidence rate is still high as a cause of AKI and IMR and also the problems I got at the Immanuela clinic. Based on the above background, the maternal and child mortality rates are still high due to the lack of knowledge of mothers about premature rupture of membranes, I am interested in studying "Level of Knowledge of Third Trimester Pregnant Women About Labor with Premature Rupture of Membranes at Immanuela Clinic" in the hope of reducing maternal mortality and children and can be useful as a source of information to pregnant women in the third trimester regarding premature rupture of membranes.
RESEARCH METHOD

The design of this study is a survey research design that aims to determine the level of knowledge of pregnant women TM III about labor with premature rupture of membranes at Immanuela Clinic, the population in this study were all pregnant women TM III in 2021 at the Immanuela Clinic, based on my Preliminary Survey in May-October 2020, 3rd trimester pregnant women as many as 187 pregnant women, the sampling technique in this study was carried out using the accidental sampling method, namely all TM III pregnant women who were met while conducting research at the Immanuela Clinic in February-April 2021, the variables used in this study were the level of knowledge of pregnant women in the third trimester about definitions, causes, signs and symptoms including maternal age, parity, and education, and the instrument used in this study used a questionnaire in the form of a list of questions about premature rupture of membranes and checklists. This questionnaire consists of 28 questions with a choice of true or false answers. If the respondent answers the statement correctly, the value is 1 and if the statement is incorrect, it will get a score of 0. Filling out this questionnaire is done by putting a check mark (√) on the questionnaire sheet that has been provided. In this questionnaire there are 28 statements.

To measure the value of knowledge with the Gutman scale according to Ari Kunto (2013), the results of the measuring scale are grouped into good (76-100%), sufficient (56-75%), and less (<55%). So to produce knowledge of the way of knowledge (good if the value is 76-100%, 56-75% is enough and less if <55%, then the measuring result for good 76% x 28 = 21.28 is fulfilled by 21, it is enough that 56% x 28 = 15.68 is fulfilled as 16, minus 55% x 28 = 15.4 is added to 15. Knowledge measuring scale as: Good: 76% -100% if you can answer the question correctly (21-28 questions); Enough: 56%-75% if you can answer the question correctly (16-20 questions); Less: 55% if you can answer the questions correctly (0-15 questions).

The study was conducted in April 2021 at the Immanuela Clinic Batam. research data collection after obtaining permission from STIKes St. Elisabeth Medan. There are two types of data collection used, namely: primary data including data obtained directly by administering a questionnaire to pregnant women TM III. Data collection was obtained through interviews, distributing questionnaires, and documentation.

To find out the description of the data from each of the variables studied and presented descriptively by using the frequency distribution table and the percentage of each group. Variables that are seen include the level of knowledge of pregnant women in the third trimester about labor with premature rupture of membranes. The overall data is processed manually and then analyzed descriptively using the percentage formula, namely: 
\[ P = \frac{f}{N} \times 100\% \]

\( Q \) shows the percentage of data, \( F \) shows the number of observations, meanwhile \( N \) shows the total population.

RESULTS

After conducting research on respondents regarding "Level of Knowledge of Third Trimester Pregnant Women About Childbirth with Premature Ruptured Membranes at Immanuela Clinic, Batu Aji District, Batam City in 2021" the following results were obtained:

Table 1. Frequency Distribution of Knowledge Level of Third Trimester Pregnant Women

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Good</td>
<td>7</td>
<td>29.2</td>
</tr>
<tr>
<td>2</td>
<td>Sufficient</td>
<td>11</td>
<td>45.8</td>
</tr>
<tr>
<td>3</td>
<td>Less</td>
<td>6</td>
<td>25</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100</td>
</tr>
</tbody>
</table>

From table 1. above, it shows that the level of knowledge of pregnant women about premature rupture of membranes is mostly sufficient category, namely 11 people (45.8%), while at least having less knowledge, there are 6 respondents (25%).

Table 2. Frequency Distribution of Knowledge Level of Third Trimester Pregnant Women About Definition of Childbirth with Premature Rupture of Membranes at Immanuela Clinic, Batu Aji District, Batam City in 2021

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Good</td>
<td>5</td>
<td>20.83</td>
</tr>
<tr>
<td>2</td>
<td>Sufficient</td>
<td>5</td>
<td>20.83</td>
</tr>
<tr>
<td>3</td>
<td>Less</td>
<td>3</td>
<td>15.33</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>14</td>
<td>58.33</td>
</tr>
</tbody>
</table>

| Total | 24 | 100 |

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From table 2 The above shows that the level of knowledge of pregnant women about the definition of premature rupture of membranes is majority less knowledgeable, namely 14 people (58.33%), while respondents have good and sufficient knowledge, each of which there are 5 respondents (20.83%).

Table 3. Frequency Distribution of the Level of Knowledge of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Membranes regarding Causes of Premature Rupture of Membranes

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Good</td>
<td>8</td>
<td>33.33%</td>
</tr>
<tr>
<td>2</td>
<td>Sufficient</td>
<td>9</td>
<td>37.5%</td>
</tr>
<tr>
<td>3</td>
<td>Less</td>
<td>7</td>
<td>29.16%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100%</td>
</tr>
</tbody>
</table>

From table 3 above, it shows that the level of knowledge of pregnant women about the causes of premature rupture of membranes is the most knowledgeable enough, namely 9 people (37.5%), while the least knowledgeable is 7 people (29.16%).

Table 4. Frequency Distribution of Levels of Knowledge of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Membranes regarding Signs and Symptoms of Premature Rupture of Membranes

<table>
<thead>
<tr>
<th>No</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Good</td>
<td>14</td>
<td>58.33%</td>
</tr>
<tr>
<td>2</td>
<td>Sufficient</td>
<td>6</td>
<td>25%</td>
</tr>
<tr>
<td>3</td>
<td>Less</td>
<td>4</td>
<td>16.67%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100%</td>
</tr>
</tbody>
</table>

From table 4 above, it shows that the level of knowledge of pregnant women about signs and symptoms of premature rupture of membranes is mostly good, namely 14 people (58.33%), while the minority has less knowledge, namely 4 people (16.67%).

Table 5. Frequency Distribution of Level of Knowledge of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Membranes including Age

<table>
<thead>
<tr>
<th>No</th>
<th>Age</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>20-35</td>
<td>21</td>
<td>87.5%</td>
</tr>
<tr>
<td>2</td>
<td>&gt;35</td>
<td>9</td>
<td>12.5%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 5 above shows that most of the respondents with sufficient knowledge aged 20-35 years were 21 people (87.5%) and a small proportion of respondents were >35 years old, namely 9 people (12.5%).

Table 6. Frequency Distribution of Knowledge Level of Third Trimester Pregnant Women About Childbirth with Premature Rupture of Membranes including Parity

<table>
<thead>
<tr>
<th>No</th>
<th>Parity</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Primipara</td>
<td>9</td>
<td>37.5%</td>
</tr>
<tr>
<td>2</td>
<td>Multipara</td>
<td>15</td>
<td>62.5%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 6 above shows that the majority of respondents have sufficient knowledge, namely 15 multiparas (62.5%) and a moderately knowledgeable minority, namely 9 primiparas (37.5%).

Table 7. Frequency Distribution of the Level of Knowledge of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Membranes including Education

<table>
<thead>
<tr>
<th>No</th>
<th>Education</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SHS</td>
<td>16</td>
<td>66.66%</td>
</tr>
<tr>
<td>2</td>
<td>Diploma</td>
<td>4</td>
<td>16.7%</td>
</tr>
<tr>
<td>3</td>
<td>Bachelor</td>
<td>4</td>
<td>16.7%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>24</td>
<td>100%</td>
</tr>
</tbody>
</table>

The Knowledge Level among Third Trimester Pregnant Women on Premature Rupture of At Immanuela Clinic Batam (Ester Laura)
From table 7 above, it shows that the majority of respondents with sufficient knowledge of education are SMA, namely 16 people (66.6%), and the minority of respondents with sufficient knowledge are Diploma and Bachelor, each with 16.67%.

**DISCUSSIONS**

From the results of research that has been carried out on 24 respondents regarding "Level of Knowledge of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Ambulances at Immanuela Clinic, Batu Aji District, Batam City in 2021, the discussion is as follows: Level of Knowledge of Third Trimester Pregnant Women about Childbirth with Premature Rupture of Membranes at Immanuela Clinic in 2021.

Based on the results of research on the level of knowledge of pregnant women TM III about labor with premature rupture of membranes at the Immanuela Clinic Perum. Fanindo Block D No. 01 district. Batu Aji Batam City in 2021. Obtained from 24 respondents, it showed that the most who had sufficient knowledge were 11 people, 45.8%, good knowledge 7 people, 29.2% and the least who had less knowledge were 6 25%. This is due to the lack of knowledge of TM III pregnant women regarding premature rupture of membranes.

Based on the results of the research as described above, in order to clarify the knowledge of pregnant women TM III premature rupture of membranes at the Immanuela Clinic, Batu Aji District, Batam City, below will be discussed further. Based on the research objectives, it can be seen that in this study the knowledge of TM III pregnant women about premature rupture of membranes at Immanuela Clinic in 2021.

Based on the table, it can be concluded that the most knowledge of TM III pregnant women about premature rupture of membranes is 11 respondents (45.8%). Sufficient knowledge of TM III pregnant women includes demographic data in the form of age, parity, and education. Knowledge is the result of "knowing" and this occurs after people have sensed a certain object. Sensing of objects occurs through the five human senses, namely sight, hearing, smell, taste and touch. At the time of sensing to produce knowledge, it is strongly influenced by the intensity of the perception of the object. Most of human knowledge is obtained through the eyes and ears.

According to Wawan and M in 2019, Knowledge is the result of not knowing to knowing, this happens because someone is sensing a certain object. The increase occurs through the five human senses, namely the senses of smell, sight, hearing, taste and touch. Most of human knowledge is obtained through eyes and ears.

According to the theory of Notoadmojo in 2019, stated that someone with a better level of knowledge has a better understanding of premature rupture of membranes. Knowledge makes pregnant women better understand the efforts and actions that need to be taken in handling premature rupture of membranes.

My research is in line with the previous research conducted by Nora Ayu Fitriana entitled "Pregnant Mother's Knowledge Level About Premature Rupture of Membranes at Kalasan Health Center, Sleman Yogyakarta. Obtained from 38 respondents, the level of knowledge of pregnant women about premature rupture of membranes at the Kalasan Health Center, Sleman Yogyakarta has sufficient knowledge (57.9%) totaling 22 respondents (Ayu, Nora. Kumoro Jati, 2018).

According to the assumptions of Nora Ayu and Ratih, respondents have sufficient knowledge about premature rupture of membranes due to low knowledge and curiosity of mothers, mothers are less able to anticipate complications or risks of pregnancy that can be experienced, one of which is premature rupture of membranes.

Meanwhile, research conducted by Maria Yakoba Eliriani in the title "Determinants of Maternal Knowledge About Premature Rupture of Membranes at Ileboleng Health Center, East Flores Regency in 2016" shows that mothers who have less knowledge about premature rupture of membranes are 79 (79%), while mothers have good knowledge as many as 21 (21%).

According to Maria's assumption, the low level of knowledge of respondents could be due to lack of exposure to health information from health workers and information media such as television, books or...
newspapers, as well as unsupportive environmental factors, such as lack of access to health information from community leaders. This is in line with the opinion that increasing or lack of knowledge of a person affects the understanding, way of thinking and analyzing something so that by itself will give a different perception of the object being observed which will ultimately change a person’s behavior.

According to my assumption, most respondents who have sufficient knowledge about premature rupture of membranes are included in the “know” category, which means recalling something specific and all the materials studied or stimuli that have been received. Therefore this “know” is the lowest level of knowledge. The lack of knowledge of mothers is also due to lack of socialization and the lack of intensity of counseling carried out by health workers, therefore socialization efforts are needed in the form of scheduled counseling so that it can minimize the occurrence of maternal and infant morbidity and mortality due to lack of knowledge of TM III pregnant women about ruptured membranes. Early. Knowledge of Third Trimester Pregnant Women About Childbirth with Premature Rupture of Membranes regarding Definition of Premature Rupture of Membranes at Immanuela Clinic in 2021

Based on the theory by Sagita Darma Sari, SST in 2017, premature rupture of membranes is the rupture of the membranes before the time to give birth (Sagita Darma Sari, SST, 2017). Premature rupture of membranes is also a rupture of the membranes before there are signs of starting labor (Suriani Tahir, 2021). Premature rupture of membranes is characterized by discharge in the form of water from the vagina after 22 weeks of pregnancy and can be declared premature rupture occurs before the delivery process takes place. Fluid comes out through the tearing of the amniotic sac, appearing after 28 weeks of gestation and at least one hour before the actual time of pregnancy. Under normal circumstances, 8-10% of pregnant women at term will experience PROM.

Based on the author’s assumption, the majority of respondents lack knowledge because some respondents are not very familiar with premature rupture of membranes and because they have never experienced premature rupture of membranes in a previous pregnancy or their current pregnancy so that they lack knowledge about the definition of premature rupture of membranes. Knowledge of pregnant women in the third trimester of labor with premature rupture of membranes regarding the causes of premature rupture of membranes at Immanuela Clinic.

The results of a study conducted by Rahayu and Sari in 2017 regarding the causes of premature rupture of membranes in maternity women showed that the majority of PROM occurred in multiparous women, aged 20-35 years, gestational age 37 weeks, uterine enlargement was normal and the position of the fetus was presumptive. (Rahayu and Sari, 2017).

*The Knowledge Level among Third Trimester Pregnant Women on Premature Rupture of Membranes at Immanuela Clinic Batam* (Ester Laura)
According to my assumption, the majority of respondents have sufficient knowledge because judging from the results of research on definitions alone, the majority of pregnant women have less knowledge. Lack of knowledge of pregnant women about the definition causes pregnant women to have sufficient knowledge about the causes of premature rupture of membranes and because they have never experienced premature rupture of membranes in previous pregnancies or their current pregnancies. In addition, there were many words that were difficult for pregnant women to understand on the questionnaire so that I as a researcher had to re-explain the difficult words asked by pregnant women when filling out the questionnaire. Knowledge of pregnant women in the third trimester of labor with premature rupture of membranes regarding signs and symptoms of premature rupture of membranes at Immanuela Clinic in 2021.

Based on table 1.4, the frequency distribution of the level of knowledge of pregnant women in the third trimester of labor with premature rupture of membranes regarding signs and symptoms of premature rupture of membranes at Immanuela Clinic, Batu Aji District, Batam City in 2021, shows that the level of knowledge of pregnant women about signs and symptoms of premature rupture of membranes is mostly knowledgeable, good, namely 14 people (58.33%), while the minority with less knowledge is 4 people (16.67%).

According to my assumption, the majority of respondents have good knowledge because there are no difficult words found on the questionnaire sheet and respondents can also understand well the characteristics or signs and symptoms of premature rupture of membranes such as leaking amniotic fluid, the smell of amniotic fluid having a sweet smell and not like Ammonia odor, pale color. Knowledge of Third Trimester Pregnant Women About Childbirth with Premature Rupture of Membranes Including Age at Immanuela Clinic.

Based on Table 1.5, the frequency distribution of knowledge levels of pregnant women in the third trimester about delivery with premature rupture of membranes includes age at Immanuela Clinic, Batu Aji District, Batam City in 2021. The category of knowledge is sufficient, most of the respondents aged 20-35 years as many as 21 people (87.5%) . At a relatively young age, it is possible for a person to lack experience in obtaining information. This is in accordance with Istiarti (2014) which states that the factors that influence knowledge include exposure to mass media and experience.

Age is one of the factors that can describe a person’s maturity psychologically and socially, thus making a person better able to respond to the information obtained (Notoadmojo 2019). This will affect one’s grasping power in digesting the information obtained, so that it can affect one's knowledge.

The research that I did is in accordance with the previous research conducted by Nora Ayu Fitriana entitled "Level of Knowledge of Pregnant Women About Premature Rupture of Membranes at the Kalasan Health Center, Sleman Yogyakarta"/ the majority of them have sufficient knowledge (57.9%) (Ayu, Nora. Kumoro Jati, 2018).

While the results of research by Dwi Lestari and Shinta Aulia contradict the results of my research, where from the results of my research the most respondents with sufficient knowledge, while the results of research conducted by Dwi Lestari and Shinta Aulia are the majority who have good knowledge rather than sufficient knowledge entitled "Overview Knowledge of TM III pregnant women about premature rupture of membranes at Sukoharjo Hospital in 2017." Based on the assumptions of Dwi Lestari and Shinta Aulia, the knowledge of pregnant women TM III about premature rupture of membranes can be concluded that the majority have good knowledge because the category of good knowledge is that the majority of respondents aged 25-35 years are more receptive to information. The higher the age, the level of maturity and strength of a person will be more mature in thinking and working. In terms of public trust, someone who is more mature is trusted than someone who is not yet mature. This will be an experience and maturity of the soul. There are several factors that affect knowledge such as internal factors (age, education, occupation, and parity), and external factors (environmental and socio-cultural) (Lestari, Dwi. Aulia 2017).

According to my assumption, different research results are due to measuring a person’s knowledge not only in terms of age, education, and parity. However, there are other factors along with the number of respondents obtained as well as sufficient knowledge of respondents, which can be caused by the fact that the age of 20-35 years is younger than the age of >35 years so that the experience gained is still very little causing the knowledge to be very low and difficult to accept. Information from other people can also be seen from the background of each pregnant woman with different parity, education, and age. Knowledge of
Third Trimester Pregnant Women about Childbirth with Premature Rupture of Membranes Including Parity at Immanuela Clinic.

Based on Table 1.6, the frequency distribution of the knowledge level of pregnant women in the third trimester about childbirth with premature rupture of membranes includes parity at Immanuela Clinic, Batu Aji District, Batam City in 2021. Parity is the number of deliveries a woman has had until her current pregnancy. The more parity, the higher the knowledge, this has to do with the influence of one's own experience and that of others, as well as a mother who already has parity, she will have previous experience when compared to her who does not have parity. The more one gains knowledge, the more one has understood.

The results of the research by Dwi Lestari and Shinta Aulia are in accordance with the results of my research, where in their research the title is "An overview of the knowledge of pregnant women TM III about premature rupture of membranes at Sukoharjo Hospital in 2017." The category of good knowledge is the majority of respondents with multipara parity, namely 11 respondents. Shinta Aulia and Dwi Lestari assume that the more parity, the higher the knowledge, this has something to do with the influence of one's own experience and that of others, just like a mother who already has parity, she will have previous experience when compared to her who does not yet have parity. The more one gains knowledge, the more one has understood. Knowledge of Third Trimester Pregnant Women about Childbirth with Premature Rupture of Membranes Includes Education at Immanuela Clinic.

Based on Table 1.7, the Frequency Distribution of Knowledge Levels of Pregnant Women in the Third Trimester About Childbirth with Premature Rupture of Membranes includes Education at Immanuela Clinic, Batu Aji District, Batam City in 2021. The majority of knowledge categories are respondents with high school education as many as 16 people (66.6%). Education means the guidance given by someone to the development of others towards certain ideals that determine humans to act and fill life to achieve safety and happiness.

Education is needed to get information, for example things that support health so that it can improve the quality of life. Knowledge is very closely related to education, where it is hoped that with higher education, the person will have wider knowledge. However, it should be emphasized, it does not mean that someone with low education is absolutely low in knowledge. This proves that education affects knowledge because a person's level of education will affect the response that comes from outside.

According to Notoatmodjo (2017), a person's attitudes and actions based on education will last. The mother's education level will determine her attitude and actions in dealing with various problems, especially health problems. Mothers with higher education are easier to absorb information so they have better perceptions than those with secondary or basic education. (Notoadmojo 2019)

According to Theory from Notoatmodjo (2019), suggests that someone with a better level of knowledge has a better understanding of premature rupture of membranes. Knowledge makes pregnant women better understand the efforts and actions that need to be taken in handling premature rupture of membranes.

When compared with existing theories, in this study there is a gap between theory and research results, according to the theories of Wawan & M (2019) and Notoatmodjo (2019) a person's knowledge is influenced by one's education, the better and wider knowledge is compared to low levels of education. This can happen because not all highly educated people have high knowledge, the search for knowledge between the educated and the uneducated is the same, it depends on a person to get that knowledge (Notoadmojo, 2019).

According to my assumption, respondents who have sufficient knowledge about premature rupture of membranes are because the majority of pregnant women have a high school education of 66.6%, where the level of education greatly affects a person's level of knowledge. However, keep in mind that to measure a person's knowledge can not only be measured in terms of age, education, and parity, there are other factors along with the number of respondents obtained because knowledge can be obtained through the five senses, which means that knowledge is not only obtained through education, it can also be obtained.
through education, through the internet, books, newspapers, news and even conversations with other people who know about something. Education cannot be used to describe one’s knowledge.

CONCLUSION

The level of knowledge of pregnant women about premature rupture of membranes at Immanuela Clinic Batam is categorized as "Enough" with most pregnant women aged 20-35 years with a high school education level and the majority of mothers being multigravida so that health education is still needed for pregnant women regarding premature rupture of membranes.

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