INTISARI

Latar belakang: Keterikatan batin ibu-janin merupakan perilaku ibu hamil dalam merepresentasikan interaksi hubungan batin ibu dengan janin. Hal ini memerlukan pengetahuan keterampilan dan pengambilan keputusan ibu hamil dalam perawatan kehamilan. Keterikatan batin ibu-janin rendah berdampak negatif kepada ibu dan janin diantaranya prematuritas, bayi berat lahir rendah, masalah neonatal dan anak.
Tujuan: Penelitian ini untuk mengetahui literasi kesehatan ibu pada ibu hamil trimester 1 dan keterikatan batin ibu-janin pada ibu hamil trimester 3, menggali informasi tentang literasi kesehatan ibu serta keterikatan batin ibu-janin.
Metode: Studi *mixed methods* menggunakan *sequential explanatory design.* Tahap kuantitatif menggunakan *prospective cohort study.* Teknik sampling dengan *proportional random sampling.* Jumlah sampel 153 ibu hamil. Analisis data kuantitatif dengan Spearman's, Mann Whitney, t-test dan dan regresi logistik ordinal menggunakan STATA 16. Penelitian kualitatif dengan wawancara semi terstruktur kepada 7 ibu hamil, 1 kelompok FGD bidan Puskesmas dan 1 kelompok FGD pengelola kesehatan ibu dan anak di Dinas Kesehatan. Analisis data kualitatif menggunakan *software OpenCode 4.03*.
Hasil: Ada hubungan yang signifikan literasi kesehatan ibu dengan keterikatan batin ibu-janin dengan uji Spearman's nilai *coef* 0.41, CI 95% 0,26-0,55, dan $p < 0,05$. Faktor yang berhubungan literasi kesehatan ibu adalah *antenatal care*, peran bidan dan dokter spesialis kebidanan, status kesehatan ibu dan fasilitas pelayanan kesehatan. Keterikatan batin ibu-janin tinggi karena memiliki pengalaman, umur kehamilan, dukungan sosial, keyakinan spiritual dan budaya.
Kesimpulan: Literasi kesehatan ibu merupakan faktor yang berhubungan dengan keterikatan ibu-janin khususnya pada ibu dengan tidak mengalami *fetal loss*, primipara dan kecemasan tinggi. Keterikatan batin yang optimal terbentuk melalui integrasi literasi kesehatan ibu, tidak ada riwayat *fetal loss*, penatalaksanaan kecemasan, budaya dan kepercayaan spiritual.

Kata Kunci: hubungan, literasi kesehatan, keterikatan batin ibu-janin, ibu hamil, *mixed methods*

ABSTRACT

Background: *Maternal-fetal attachment is the behavior of pregnant women that reflects the emotional interaction between mother and fetus. This requires knowledge, skills, and decision-making skills in prenatal care. A low maternal-fetal attachment can negatively impact both mother and fetus, including prematurity, low birth weight, and neonatal and childcare problems.*
Objective*: This study aims to examine maternal health literacy in the first trimester of pregnancy as a determinant of MFA in the third trimester and to explore information about maternal health literacy and maternal, fetal attachment.*
Methods: *The research employs a mixed methods approach with a sequential explanatory design. Quantitative data were gathered through a prospective cohort study using proportional random sampling (n = 153) and analysed with Spearman's, Mann Whitney, t-test and ordinal logistic regression using STATA 16. Qualitative data were collected using semi-structured interviews with 7 pregnant women, focus group discussions (FGDs) with midwives at community health centers, and health officials managing maternal and child health. Qualitative analysis was conducted using OpenCode 4.03 software.*
Results: *There is a significant association between maternal health literacy and maternal-fetal attachment, based on the Spearman's test (coefficient 0.41, 95% CI 0.26–0.55, p < 0.05). Qualitative research results indicate that factors associated with maternal health literacy include ANC, the role of midwives and obstetricians, maternal health status, and health care facilities. High MFA is associated with maternal experience, increased gestational age, social support, spiritual beliefs, and cultural beliefs. Factors inhibiting the MFA include anxiety, unwanted pregnancy, maternal health conditions and history of fetal loss.*
Conclusion: *Maternal health literacy is a significant determinant of maternal fetal attachment. Optimal emotional bonding is formed through the integration of maternal health literacy, no prior fetal loss, anxiety management, and the mather's cultural and spiritual beliefs.*

Keywords: *Assosiation, health literacy, maternal-fetal attachment, pregnant women, mixed methods*