

PROSES PENGAMBILAN KEPUTUSAN PASIEN *ANTENATAL CARE* DALAM MEMILIH TEMPAT BERSALIN DI RS X DI BANTUL

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INTISARI

Latar Belakang: Tingginya kunjungan *Antenatal Care* (ANC) di RS Nur Hidayah Bantul tidak otomatis berlanjut pada keputusan persalinan, yang menunjukkan terputusnya *continuity of care*. Penelitian ini memahami dinamika keputusan pasien ANC sebagai dasar penyusunan strategi retensi.

Tujuan: Mengeksplorasi proses pengambilan keputusan pasien ANC dalam memilih tempat bersalin di RS Nur Hidayah Bantul, mencakup faktor pertimbangan, dinamika proses, serta pendorong dan penghambat pilihan.

Metode: Penelitian kualitatif ini menggunakan desain studi kasus deskriptif *single-case embedded* dengan unit analisis terbenam berupa Pasien Bersalin di RS Nur Hidayah (PBNH), yaitu pasien yang menjalani pelayanan ANC di RS Nur Hidayah Bantul dan kemudian memutuskan untuk bersalin di RS Nur Hidayah Bantul, dan Pasien Bersalin di Fasilitas Kesehatan Lain (PBFL), yaitu pasien yang menjalani pelayanan ANC di RS Nur Hidayah Bantul dan kemudian memutuskan untuk bersalin di fasilitas kesehatan lain. Data dikumpulkan melalui wawancara mendalam terhadap informan yang dipilih secara *purposive* dengan prinsip *maximum variation*, observasi langsung, serta triangulasi sumber dengan tenaga kesehatan dan manajemen. Analisis data dilakukan secara induktif melalui analisis tematik, *within-unit analysis*, *cross-unit synthesis*, dan *pattern matching*.

Hasil: Keputusan tempat bersalin bersifat dinamis sepanjang periode ANC. Pasien mempertimbangkan sembilan faktor utama, yaitu: aksesibilitas geografis dan spasial; pemasaran digital dan *customer relationship management*; kelayakan sarana, prasarana, dan teknologi medis; efisiensi alur layanan dan tata kelola operasional; keselarasan nilai dan etika religius; keterjangkauan biaya dan pembiayaan; kualitas interaksi klinis tenaga medis; kualitas layanan paramedis dan staf pendukung; serta pengaruh lingkaran sosial dan kelompok referensi. Perbedaan utama kelompok PBNH dan PBFL terletak pada komitmen pilihan. Pengalaman ANC pada PBNH berkembang menjadi keyakinan yang menetap. Sebaliknya, keputusan PBFL tetap terbuka untuk dievaluasi ulang menjelang persalinan akibat munculnya atribut tertentu yang menggeser persepsi keunggulan ANC. Temuan ini menghasilkan rumusan strategi retensi terintegrasi untuk menjaga kesinambungan pelayanan maternal.

Kesimpulan: Keputusan tempat bersalin pasien ANC bersifat dinamis dan dipengaruhi oleh sembilan faktor utama, di mana kelompok PBNH mempertahankan pilihan bersalin di RS Nur Hidayah hingga akhir melalui pengalaman pelayanan ANC yang positif dan keandalan, sedangkan kelompok PBFL melakukan evaluasi ulang kemudian memutuskan tidak memilih RS Nur Hidayah akibat hambatan regulasi JKN, jarak, keterbatasan fasilitas, serta biaya. Temuan ini mendasari penyusunan strategi retensi melalui penguatan komitmen sepanjang fase ANC, peningkatan visibilitas nilai pelayanan, serta meminimalan ketidakpastian menjelang persalinan.

Kata Kunci: *Antenatal Care, Continuity of Care*, Pemilihan Tempat Bersalin, Proses Pengambilan Keputusan Pasien, Studi Kasus

DECISION-MAKING PROCESS OF ANTENATAL CARE PATIENTS IN SELECTING A DELIVERY FACILITY AT HOSPITAL X IN BANTUL

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ABSTRACT

Background: *The high volume of Antenatal Care (ANC) visits at Nur Hidayah Hospital Bantul does not automatically translate into childbirth service utilization, indicating a disruption in the continuity of care. This study examines the dynamics of ANC patient decision-making to serve as a foundation for formulating retention strategies.*

Objective: *To explore the decision-making process of ANC patients in selecting a delivery facility at Nur Hidayah Hospital Bantul, encompassing consideration factors, process dynamics, as well as the drivers and barriers influencing their choice.*

Methods: *This qualitative study employed a descriptive single-case embedded case study design, with embedded units of analysis consisting of Maternity Patients at Nur Hidayah Hospital (PBNH), Patients who underwent Antenatal Care (ANC) services at Nur Hidayah Hospital Bantul and subsequently decided to give birth at Nur Hidayah Hospital Bantul, and Maternity Patients at Other Health Facilities (PBFL), Patients who underwent Antenatal Care (ANC) services at Nur Hidayah Hospital Bantul and subsequently decided to give birth at other health facilities. Data were gathered through in-depth interviews with purposefully selected informants using maximum variation principles, direct observations, and source triangulation with healthcare providers and hospital management. Inductive data analysis was conducted via thematic analysis, within-unit analysis, cross-unit synthesis, and pattern matching.*

Results: *Health facility choice for delivery remains dynamic throughout the ANC period. Patients evaluate nine key factors: geographic and spatial accessibility; digital marketing and customer relationship management; adequacy of facilities, infrastructure, and medical technology; service flow efficiency and operational governance; alignment of values and religious ethics; cost affordability and financing schemes; clinical interaction quality of medical personnel; service quality of paramedics and support staff; and the influence of social circles and reference groups. The primary difference between PBNH and PBFL lies in choice commitment. For PBNH, ANC experiences evolve into fixed trust and retention. Conversely, PBFL decisions remain open to re-evaluation near delivery as specific*

attributes emerge, shifting their perceived superiority of ANC. These findings establish an integrated retention strategy to preserve maternal care continuity.

Conclusion: *The health facility choice for delivery among ANC patients is dynamic and influenced by nine key factors. The PBNH group maintained their choice of delivery at Nur Hidayah Hospital through positive ANC service experiences and reliability, whereas the PBFL group reevaluated and ultimately decided against Nur Hidayah Hospital due to National Health Insurance (JKN) regulatory barriers, distance, facility limitations, and costs. These findings underline the development of retention strategies through strengthening commitment throughout the ANC phase, enhancing the visibility of service value, and minimizing uncertainty prior to childbirth.*

Keywords: *Antenatal Care, Case Study, Continuity of Care, Delivery Facility Selection, Patient Decision-Making Process.*