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''Establishing healthy family and offspring on prospective bridegroom'': A qualitative analysis $\stackrel{\star}{\sim}$



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KEYWORDS

Prospective bridegroom; Preconception planning; Reproduction preparation

Abstract

Objective: Prospective bridegroom needs to prepare several things related to preconception health to gain a healthy pregnancy so that the baby born can be healthy, and the mother can give birth safely. *Method:* The use of qualitative study with focus group method aims to observe the prospective

Method: The use of qualitative study with focus group method aims to observe the prospective bridegroom preparation in establishing good healthy family and offspring.

Results: Six themes are identified through this study, such as: (1) Physiological health preparation; (2) psychological preparation; (3) economic preparation; (4) social preparation; (5) childbirth preparation; (6) getting healthcare.

Conclusion: The result of this study suggests nurses apply the proper intervention to support preconception care.

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Introduction

The high rate of marriage necessarily needs to be accompanied with proper marriage planning from prospective bridegroom as the issue of reproductive health related to

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mother mortality is occurred from marriage itself. The prospective bridegroom needs to plan on preconception health and care to gain a healthy pregnancy, so the mother can give birth safely and have a healthy baby born. Woman's health condition during preconception period can affect pregnancy later as well as the fetus on prenatal which includes pregnancy, childbirth, postpartum, and the subsequent period. The baby condition is heavily related to the mother's medical record before pregnancy, for instances: Diabetes Mellitus, abnormal blood pressure, stress, and also alcoholic behavior and fast food consumption habit done throughout or during the pregnancy period.¹ Until today, preconception care has not become a primary service since perinatal period is still regarded as important area to be

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intervened, for example, in the first 1000 days of life program, the intervention during pregnancy has already begun. The first 1000 days of life program attempts to improve nutritional intake received by the fetus which means during 270 days of pregnancy and 730 days next after birth or the first two years of life.²

In Indonesia, the Ministry of Health has publicly released a policy which governs on preconception health care, written or included within Minister of Health Regulation of the Republic of Indonesia number 97 of 2014. The regulation is implemented in order to prepare the Indonesian women to have safe and healthy pregnancy and childbirth process so that the baby will be healthy as well. In implementing the regulation, the government involves the Ministry of Religious Affairs and Ministry of Health to strengthen and support the government's effort in socializing promotive and preventive health intervention: "Gerakan Masyarakat Sehat".³

Method

Design

This study was conducted through a qualitative approach. The researcher employed data by conducting focus group discussions to aimed at identifying the preparedness of preconception care on prospective bridegroom as well as premarital counseling and health services.

Participant

Ten prospective brides grooms and counseling staff were voluntarily involved as participants in this study. They were selected through purposive sampling technique which selecting participants' characteristics matching with the research objectives. The criteria were prospective brides and grooms who had been registered themselves at Office of Religious Affairs in South Jakarta with inclusive criteria such as aged between 15 and 49 years old, physically healthy, able to communicate actively, and willing to be participants.

Data collection and analysis

Data collection began with proposing for ethical clearance test to Ethics Committee of Faculty of Nursing Universitas Indonesia as well as proposing for research permit at the designated research location.

Data collection through Focus Group Discussion (FGD) was set to be able to adjust with the current situation and condition. The FGD was conducted on 19 October 2018.

While collecting the qualitative data, the researchers used MP4 audio recorder and video recorder during FGD as well as on participative observation. The instruments were used to ensure the completeness of verbal and visual information. These instruments had been tested and checked beforehand to be used after, such as charger, battery, microphone, the quality of recorded sound, and also the internal memory capacity. Field notes during observation and FGD were also made to document the verbal responds.

The data were analyzed through several steps: data preparation, data organization, data reduction to themes

related to the coding process, summary formation from generated codes, and data presentation in the form of discussion material.

The result of interview and FGD were analyzed through several steps, such as: transcribing the recorded data, marking and observing keywords from the transcript, labeling or defining code for theme classification, forming themes from categories of coding process result, making notes from each acquired category or theme, interpreting the data from generated themes. The validity test on the data was checked through member check and giving a clear description of the situation of participants, and their background during the research was conducted. Also, talking to qualitative research expertise were conducted as well.

Ethical clearance

This research has been approved for its ethical clearance by Ethic Committee of Faculty of Nursing Universitas Indonesia, with reference number 5323/UN2.F12.D/PPM.00.02/2018 dated in 28 August 2018.

Results

The findings of this study will be described from the participants' characteristic and focus group discussion analysis.

Participants' characteristic

Ten participants fully participate in this research. Their background is presented in Table 1.

Themes analysis

The result from recorded FGD shows some main themes, for instances: (1) Physical health preparation; (2) Psychological health preparation; (3) Economical preparation; (4) Social preparation; (5) Sexual preparation; (6) Health care service provision for the prospective bridegroom. These six themes are the result of participants' responds analysis on questions given to them.

Themes of prospective grooms

(1) Physical health preparation

According to prospective grooms, this preparation is done to prepare themselves to be a husband or furtherly to be a father with full responsibility in keeping their wife as well as children later. The responsibility can be done properly if they are physically healthy. This can be achieved through regular physical excercise or enhanced daily activities, body mass control, avoiding any alcoholic beverages, lessening caffeine consumption, lessening smoking habits, improving sleep cycle, and dietary habit control. Dietary habit control is done through lessening late night meal, restricting certain kinds of food, consuming vegetables and fruits.

Doing regular daily physical exercise is done by participants to prepare the marriage. This can be seen in the statement below:

Table 1 Darticipants' background

Participant's code	Age	Sex	Educational background	Ethnic	Occupation	Time length of knowing the partner (in month)
P1	25	Male	Master Degree	Betawi	Employee	12
P2	24	Female	Bachelor Degree	Jawa	Employee	12
P3	27	Male	Bachelor Degree	Jawa	Employee	10
P4	26	Female	Bachelor Degree	Jawa	Employee	10
P5	21	Male	Senior High	Betawi	Employee	14
P6	25	Female	Vocational High School	Betawi	Employee	14
P7	37	Male	Bachelor Degree	Padang	Employee	10
P8	33	Female	Bachelor Degree	Padang	Employee	10
Р9	29	Male	Master Degree	Betawi	Employee	72
P10	25	Female	Bachelor Degree	Padang	Employee	72

"I agree (with doing physical exercise), for the physical exercise, I put more times in doing so, yet I love to exercise from the beginning, I love doing soccer, jogging. Even after marriage I must do it almost every week, wait, whoops..., (laughing, the group laugh as well)..." (P5)

"...for daily exercise, we actually have planned it, but we haven't done it yet. So far, the hat is what we've planned, maybe later when we have kids, ..." (P3)

"... I like sprinting, at least twice a week, jogging as well, I keep doing it routinely now before the D-day because it'll be hard when the kid comes, but when i can't do it in the morning, i'll do it later after working" (P9).

Maintaining body weight is one of physical health preparation done by prospective grooms before as well as after the marriage as from their perspective, it will benefit the prospective grooms in the future if they have good, in shape, and healthy physical condition, so they can keep their family at best. This is stated by the participants as follows:

"...I have planned it (losing weight) because I have quite a large body, so it's necessary to start a more healthy lifestyle so that I can protect my wife and kids..." (P1)

Dietary habit control is one of the physical health preparation done by prospective grooms before marriage. This dietary control is stated by participants variously, such as limiting some certain kinds of food or consuming a lot of vegetables and fruits. These statements can be seen from the participants' responds as can be seen below:

"(I) restricting late night snack, as I used always to eat before I go to bed at eleven almost midnight, now I try not to do that again, it's just starting from yesterday" (P1)

"... I do dietary control, I prefer vegetables and fruits now which I believe to have a good impact on my sperm, like watermelon, I really like that fruit...since we become strict about food, I and my partner prefer not to eat instant noodle now, prefer not to eat indomie" (P5)

The efforts of maintaining good physical condition before marriage, other than exercise and dietary control, can also be done through avoiding alcoholic beverages and caffeine or coffee as well. This is stated by two participants as follow:

"...I work at the restaurant, my customers always give us the drinks (alcoholic beverages), I used to drink it... but now I stop drinking it. Especially before marriage" (P5)

"...I really like coffee, but now before I get married I rarely drink it ..." (P9)

Two participants admit to being smokers, yet before marriage, they lessen this habit. This is stated by participants as follows:

"I prefer decreasing smoking instead of restricting it, as I will still do it secretly (if smoking was restricted)...believe it or not, my brother is also an active smoker, but have 5 children (laughing)." (P7)

"...I think if I don't smoke, I feel healthier, but since I have addicted to it since forever, I can be less vigorous if I don't smoke, so I will try to lessen it after fetting married." (P3)

Sleep pattern of the participants are quite abnormal in which participants tend to sleep late in the middle of the night, and this is admitted by most of them. However, they attempt to improve their sleep pattern ahead of marriage. Some participants try to sleep earlier and try to maintain a good sleep pattern. This can be seen in their statements below:

"My partner also said to me to not sleep late, now before our marriage, I try to sleep earlier no more than 10 o'clock" (P1)

"... ahead of marriage, I've committed to sleeping at no more than noon,... so how can I do that?, I now try to sleep earlier and wake up at dawn..." (P5)

(2) Psychological preparation

Psychological preparation done by prospective grooms is preparing their mental and maintaining their emotion. The mental preparedness is a state which both prospective grooms and brides are ready to face marital life as well as building a family together with partner or spouse, being responsible for their roles in the family especially the role of head of the family in educating and guiding his wife and children. This is expressed by some participants which can be seen below:

"...the preparation including mental preparation because we will build a family, a husband needs to guide, educate his kid and protect his wife sincerely" (P3)

"...after getting married, there will come a child. So I have to get ready first. Money can be gathered, but mental readiness comes first for me" (P5)

(3) Economical preparation

Economical preparation before marriage is done by prospective grooms to ensure that they can fulfill their duty and responsibility as a husband in fulfilling their family needs. This responsibility, according to participants, can be fulfilled by having a permanent job as the main source of family income. This can be seen in the statements below:

"That is one important factor, (I) need to have a permanent job as we have considered about it (family) for the minimum of the first 5 years (after marriage) needs to be ensured on the source of my family income..." (P3)

''I personally get influenced by my family, I need to have a good job first to fulfill my family needs after'' (P5)

Besides of having a permanent job to fulfill family needs, it is also expressed by prospective grooms that wedding expense is also a thing which needs to be considered and prepared well. This can be seel as follow:

"...Preparing for money expense to register to the Office of Religious Affairs, because a wedding takes a lot of money,..." (P3)

"why I said collecting money first, actually I have been really prepared for this marriage since the beginning, but when I told my parents about this, they said to me that wedding might take a lot of money, it might be not important but needs to be prepared" (P9)

(4) Social preparation

Social preparation is carried out by prospective groom participants by increasing socialization to the families of prospective wives and communities. In the prospective wife's family, it is done by friendship to get to know each other as expressed by the participant's statement as follows:

"For us, we have known for quite a long time 6 years, maybe the first and second years don't know the family enough, only 100% have come here to know" (P9)

''If I try to learn to understand and accept my wife's family, I try to get to know my friendship to them, so get to know each other like that'' (P5)

For wider social preparation the prospective groom participant also socializes to the community, this is expressed by participants as part of the preparation of roles after marriage for a prospective head of household in community life, as revealed by the following participant statement: "The main thing is the parents, yes ... the same with the community, so it will be right if you get married, just go ahead" (P3)

"... because we live in the community if we are married, we will have to live in a community, especially because men are like KK ... if they are ready, they will be easy for the community" (P1)

(5) Reproductive health preparation

Reproductive health preparation carried out by prospective male substitutes is to improve sperm quality, as expressed by participants as follows:

"Yes it improves sperm quality, and I take care of food, which I eat with my future wife" (P3)

(6) Obtaining health services for prospective brides

According to the prospective bride participants the health services received include general health checks, laboratory examinations and tetanus immunization for the bride, as revealed by the following participants:

"... we were given a chance to get a health examination at a local health center, which was examined for general health such as blood pressure, weight gain vision test ... so I have given a certificate worthy of marriage, so rich in blood tests, health tests like that" (P3)

"... for health tests, ensuring we are equally protected whether there are infectious diseases, etc. ..." (P7)

"Tetanus, he was injected with me who was taught hehee (laughs)" (P5)

Themes of prospective brides

(1) Physical health preparation

Prospective brides attempt to maintain their physical health to plan their pregnancy and for healthy offspring later. Therefore, the preparation is quite similar to prospective grooms which are a daily exercise, maintaining body weight, improving sleep pattern, and dietary control.

Doing daily exercise is also done by prospective brides. This can be seen in their statements below:

"... for exercise, I routinely swim, well for once a week for stamina and fitness..., now I'm getting married, the exercise needs to be more frequent hehe..." (P4)

"Besides, before the D-day, I also do exercise... I do aerobic once a week... to be fit and get pregnant quickly haha (laughing)." (P6)

Two participants say that they need to sustain their body weight before marriage to maintain their appearance for the wedding and to prepare themselves for the pregnancy in the future:

"not to look fatty, and to look fit on the D-day, and get pregnant after getting married. Hopefully my stamina will be improved, and obviously I want to fit on my wedding dress, so I won't be a burden to the wedding organizers (laughing)'' (P8)

".... not to be fat. I want to look fit and unusually pretty also on the D-day, and after getting married I want to have a child soon, so my body needs to be really healthy and fit from now on..." (P2)

"because I wonder if it's not healthy to have a kid if I am this fat, even I haven't seen a doctor yet, some people around suggest loosing my weight first to make me healthy when i get pregnant" (P4)

The participants also maintain their physical fitness by sustaining their sleep schedule. This is stated by some participants:

''and then for sleep schedule, I sleep earlier at least at 9 or 10 o'clock, so I can wake up at dawn ...'' (P8)

''I try not to sleep late, I must sleep no more than 10 o clock to keep body fitness...'' (P10)

Dietary habit is also done by participants by restricting late-night meal, limiting some certain kinds of food, and consuming vegetables and fruits. This is stated by participants as can be seen below:

''...makan kalau persiapan saya ya jaga kesehatan dengan pola makan yang saya kerja di restoran jaga pola makan dalam segi waktu'' (P8)

"Kadang bikin indomie, sawinya lebih banyak, taugenya lebih banyak, brokolinya lebih banyak kadang ada sayuran apa aka di kulkas itu masukin.jadi lebih banyak sayurannya daripada mienya" (P6)

(2) Psycologial health preparation

The prospective brides prepare their mental condition by intesively doing religious activities (i.e. praying, *shalat*) as well as gahering more information on being a good wife, and also asking for advice from parents. This can be seen on statements below:

''Praying a lot, reading some articles about marriage...'
(P6)

"Watching youtube videos, such as ust. AS videos (hehe)" (P8)

"Asking for advice from my parents, so we can know on what kind of wife you're going to be..." (P10)

(3) Economical preparation

However, according to prospective brides, economical preparation can be done through saving, arranging the expense, and insurance which is also an economical preparation that needs to be prepared before marriage. This is stated by the participants as follow:

"...so our target within 1-2 years has a kid and we understand well about the economic needs during the first year of marriage can be very crucial, so we begin to save some of our money. I work in a financial company, so I know well how to manage the income. So the economy becomes the main factor..." (P4) "We usually shop at the Mall, but now we have to restrict our expense..." (P6)

"...I have no idea how to manage the income in details for my kid, but I know that the insurance for my kid is a must, life insurance, health insurance, education insurance, even I just know from my friends that the baby who hasn't born can be registered for insurance as well, my point is, wife is like the ministry of economy..." (P8)

"I think the same, maybe I will make bank accounts which have different purposes for each such as saving account one for educational needs, number two is for the monthly expense, and so on" (P2)

(4) Social preparation

The social preparation of the prospective bride participants, the prospective substitute women, are more focused on getting to know the prospective husband's family, as expressed by participants as follows:

"For us, we have known for quite a long time 6 years, maybe the first and second years don't know enough about the family, only 100% come to know my prospective husband's family" (P10)

"... often met with large families so that the relationship is quite good and close" (P6)

(5) Reproductive health preparation

While the preparation for reproduction carried out by the participants of the bride is to consume folic acid, as stated by participants as follows:

''I myself as a girl to prepare for pregnancy need vitamin folic acid, so in the past 3 months I have tried drinking prenagen essences and folavit vitamins'' (P6)

"Agree on folic acid to prepare the anin and the intelligence of the brain ..." (P10)

(6) Health care service provision for the prospective bridegroom

According to prospective bride participants, health services for prospective brides are general examinations, laboratory examinations, and TT immunization, as revealed by participants as follows:

"... it's also minimal for sexual education too, almost nothing when we need it ..." (P4)

"The same high blood pressure is asked for complaints, the same is also studied with the doctors who are in it, have had a history of illness as well, have been treated by or not" (P8)

''From the general polyclinic, keep checking the bloodrich, check it too ...'' (P6)

Discussion

Married planning is a form of readiness for various roles to be passed by the bride and groom after marriage. The participant of the groom in this study revealed that as a prospective husband and prospective father he must be responsible for looking after his wife and child later. The point of view possessed by the groom can facilitate him in delivering roles and responsibilities in a family. This supports preparation efforts in forming a family.

In this study, physical, psychological, economic, social, reproductive, and health care readiness for prospective brides is an active effort made by prospective brides and grooms in forming families and preparing healthy offspring. The six readiness is in line with the dimensions of well-being based on the dimensions of well-being based on Bill Hettler, namely occupational, physical, social, spiritual, emotional and intellectual.⁴

Physical preparedness by prospective groom participants aims to prepare themselves as prospective husbands and prospective fathers who have the responsibility of looking after their wives and children later. The responsibility according to the participants can be carried out properly if you have good physical health. In this study physical readiness is routine exercise and increasing physical activity, maintaining weight, regulating diet, including reducing dinner, limiting certain types of food, increasing consumption of fruits and vegetables, also avoiding alcohol and reducing coffee consumption, reducing smoking, and improving sleep patterns.

In contrast to prospective groom participants, physical preparation ahead of marriage is carried out by the prospective bride with the aim of preparing for pregnancy and healthy offspring. The physical preparation is done by doing regular exercise, maintaining body weight, improving sleep patterns and regulating diet. In contrast to the research conducted by Ghalili who found that physical readiness carried out before marriage is the sexual ability and the ability to give birth to a child.⁵

Mental readiness and managing emotions is a psychological readiness that is owned by the groom before marriage. Mental readiness is done to deal with life after marriage in terms of building a family, responsibilities, and roles of men in educating children and wives. Psychological readiness by the bride and groom by increasing worship and preparing knowledge to become a good wife and asking for parental advice. Kashirskaya et al. revealed that psychological readiness for marriage is a complete system in which all components, namely the value of marriage, marital motivation, marriage hierarchy ideas, marital attitudes and expectations, ideas about marital relations, are interrelated.⁶

This study shows participants of male and female brides have economic readiness before marriage. Economic readiness before marriage is carried out by prospective groom participants to ensure that as a prospective husband must be economically responsible for supporting his family, namely his wife and future child. The responsibility according to the participants is fulfilled by having a permanent job as a definite source of income to provide a living to his family. In addition, the cost of marriage is also an economic need that must be prepared. Economic readiness according to prospective bride participants needs to be done by saving, arranging financial expenses and management, and insurance is an economic preparation that must be prepared before marriage. This is in line with the research of Carroll et al. which states that one of the criteria for marriage readiness is having a permanent job and financial achievement.⁷

An indicator of someone having social readiness to get married is when he is able to function independently in the community.⁸ Social readiness is carried out by participants of the groom by increasing socialization to the families of prospective wives and communities. The social readiness of prospective bride participants is done to get to know the prospective husband's family.

Another readiness that is owned by the participants of the bride and groom is reproductive readiness that is closely related to the readiness to have children. Men emphasize sexual readiness as an important indicator of marriage readiness.⁵

Reproductive planning, known as the Reproductive Life Plan (RLP), is a plan that can be used by bride and groom related to their reproductive functions and the decision to have children or not. Starting from good preparation, every pregnancy that occurs is a desired pregnancy, well planned and can have an impact on a healthy birth.⁹ In this study the reproductive preparations made by the prospective groom's participants are to improve sperm quality while the prospective bride participant women are taking folic acid.

The prospective groom participant reveals the health services needed by the bride and groom include general health checks, laboratory examinations and tetanus immunization for the bride. While the prospective bride participants revealed health services for prospective brides are general examinations, laboratory examinations, and TT immunization. Pre-marriage health checks are useful for improving the quality of life, promoting health, and helping to maintain health during pregnancy and post-partum periods.¹⁰ In conclusion of this study was marriage readiness is the main variable in the decision to get married and is a significant predictor of marital satisfaction.

Conflict of interests

The authors declare no conflict of interest.

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