
The Influence of Psychosocial Support, Health Communication, Information and Education (KIE), and Health Service Facilities on the Decision of Pregnant Mothers in Choosing Antenatal Care (ANC) and Delivery with Social-Media as a Moderating Variable at Petukangan Hospital

¹Doddy Fernando Pausoan Gultom, ²Kemala Rita Wahidi, ³Nofierni

Universitas Esa Unggul Jakarta, Indonesia

E-mail: doddydr@gmail.com

DOI: <https://doi.org/10.56457/jimk.v13i1.766>

Received: March 26, 2025

Accepted: June 10, 2025

Published: June 30, 2025

ABSTRACT

The decision of pregnant mothers to choose Antenatal Care (ANC) and delivery services is important because it affects hospital visits. The number of pregnant mothers visiting Petukangan General Hospital has shown a declining trend in 2023. Various health services for pregnant mothers have been provided, but they have not yet succeeded in increasing the number of visits. This research aims to analyze the role of Social Media Marketing as a moderating variable in the influence of psychosocial support, health communication, information and education (KIE), and health service facilities on the decision of pregnant mothers in choosing Antenatal Care (ANC) and delivery services at Petukangan General Hospital. Psychosocial support, which includes emotional and social support from family and healthcare providers, plays a crucial role in reducing anxiety and enhancing the comfort of pregnant mothers. Additionally, comprehensive health service facilities, such as specialist and subspecialist obstetric services, significantly influence the decisions of pregnant mothers. This study employs a causal quantitative research approach. The sample for this research consists of pregnant mothers living in Jakarta who have utilized services at Petukangan Hospital at least twice, have plans to give birth, are aware of the hospital's Instagram social media, and are participants in the BPJS program. The total sample size is 220 pregnant mothers. The analysis technique used is Cross Sectional with the SEM-PLS measurement method. The study shows that psychosocial support and health service facilities have a significant influence on the decisions of pregnant mothers. On the other hand, health communication, information, and education (KIE) do not have a significant effect. Social Media Marketing does not effectively moderate the relationship between these variables but has a direct and significant influence on the decisions of pregnant mothers through engaging and informative content. These results emphasize the importance of psychosocial support, quality service facilities, and effective digital marketing strategies to enhance the preferences of pregnant mothers for pregnancy services. Hospitals are recommended to strengthen their digital strategies to improve competitiveness in the healthcare market.

Keywords: Psychosocial Support, KIE, Health services facilities, Decisions of pregnant mothers, ANC, Delivery, Social Media Marketing.



INTRODUCTION

In the context of healthcare development in Indonesia, one of the most critical priorities has been the improvement of maternal and child health. This focus is particularly significant as mothers and children are among the most vulnerable populations, particularly during pregnancy, childbirth, and the postpartum period. The Indonesian government, through policies such as the Law of the Republic of Indonesia Number 17 of 2023 on Health, has prioritized improving the health status of mothers and children to achieve better overall health outcomes. This has become an urgent priority because the risks associated with maternal and child health remain high, despite substantial advances in healthcare systems. The primary focus has been on reducing the Maternal Mortality Rate (MMR) or Maternal Mortality Rate (MMR), a key indicator of maternal health. In 2022, the MMR in Indonesia was reported as 305 deaths per 100,000 live births, a significant figure that is far from the SDGs target of 70 per 100,000 live births (Indonesian Ministry of Health, 2020).

This gap highlights a deep-seated issue in maternal healthcare and calls for significant improvement in maternal health services, especially in terms of antenatal care (ANC), postnatal care, and professional medical interventions. The rise in maternal deaths from preventable causes such as hemorrhage, hypertension, infections, and other pregnancy-related complications further underscores the urgent need for enhanced healthcare delivery. The Indonesian government has increasingly invested in health

education campaigns to raise awareness among pregnant women about the importance of seeking medical care and monitoring their health during pregnancy. According to the 2022 Indonesian Demographic and Health Survey (SDKI), 99.2% of pregnant women are aware of the importance of regular check-ups, and 98.9% understand the significance of competent healthcare professionals. However, despite these figures, the reality remains that a substantial portion of the population does not seek or access appropriate healthcare services, thereby continuing to place both maternal and child health at risk.

This gap between awareness and healthcare utilization is attributed not only to a lack of awareness but also to the insufficient availability of adequate and supportive healthcare services that mothers can trust. Therefore, the role of Communication, Information, and Education (KIE), or Communication, Information, and Education, in healthcare has become increasingly essential. KIE is a multi-dimensional approach that focuses on raising awareness, disseminating accurate health information, and empowering individuals to make informed and healthier decisions. In the context of pregnant women, KIE plays a pivotal role in shaping decisions related to antenatal care, delivery, postnatal care, and general health behaviors. Hospitals and healthcare providers must understand the significant influence of IEC in guiding patients' choices, especially in regions where healthcare literacy may be low.

At the core of maternal healthcare is the Antenatal Care (ANC) program, which involves regular check-ups, monitoring for complications, and

preventive interventions that can save lives. The Integrated Antenatal Care Guidelines (2020) outlines ANC as a necessary process that ensures the health of both mother and fetus, allowing healthcare providers to identify risks early and implement necessary medical interventions. ANC is also an essential preventive healthcare approach that can significantly reduce maternal mortality if properly adhered to. However, it is not just medical care that is needed; the psychosocial aspects of pregnancy must also be addressed. Psychosocial support is crucial for managing the emotional and mental well-being of pregnant women, as pregnancy and childbirth can often be accompanied by anxiety, stress, and other emotional challenges.

Psychosocial support in healthcare refers to the emotional and psychological assistance provided to individuals facing health challenges. For pregnant women, psychosocial support includes counseling, mental health support, stress management, and other interventions that help women cope with the emotional demands of pregnancy. Research has shown that providing psychosocial support during pregnancy can reduce the likelihood of depression and anxiety, improve maternal well-being, and contribute to better health outcomes (Sarafino & Smith, 2002). Hospitals must provide these services to ensure that pregnant women are not only cared for physically but also emotionally. This holistic approach to maternal care helps foster trust between patients and healthcare providers, improving patient satisfaction and the likelihood that

women will seek necessary healthcare services.

In parallel with medical and psychosocial support, healthcare communication plays a critical role in influencing the choices that pregnant women make about their healthcare. Communication, Information and Education (KIE) is a communication strategy that focuses on providing accurate, clear, and culturally appropriate health information to empower individuals. In the context of maternal healthcare, KIE helps pregnant women understand the available options for antenatal care, the importance of regular check-ups, and how to manage the risks associated with pregnancy and childbirth. By receiving adequate information, women are more likely to make informed decisions that benefit their health and the health of their baby. Furthermore, IEC is vital in correcting misconceptions and improving health literacy among pregnant women, which can ultimately lead to healthier outcomes.

Hospitals and healthcare institutions like RS Petukanan have the responsibility to ensure that KIE strategies are integrated into their healthcare delivery systems. In practice, this involves using various channels and techniques, including face-to-face counseling, written materials, multimedia resources, and digital platforms, to disseminate health information. Effective communication not only involves conveying knowledge but also listening to the concerns of pregnant women and providing emotional support when necessary. The integration of digital tools, such as social media platforms, has also become a crucial component in

modern healthcare communication strategies. Platforms like Instagram provide an accessible and direct way to reach large audiences and engage pregnant women with information about available healthcare services, the benefits of ANC, and the risks of unmonitored pregnancies.

However, as the case of Petukangan Hospital illustrates, there are challenges in effectively using social media platforms for health communication. Despite having an Instagram account, many patients reported that the hospital's social media presence was not engaging or informative enough to convince them to follow the account or utilize the services it promotes. This highlights the importance of not only having a digital presence but also ensuring that the content is relevant, engaging, and provides real value to potential patients. As more people turn to the internet for healthcare advice and recommendations, hospitals must ensure that they are reaching pregnant women through these digital channels with compelling and accurate content.

Moreover, the quality of healthcare facilities also plays an essential role in determining whether pregnant women choose a particular hospital for antenatal care and delivery. Petukangan Hospital, as a private hospital, offers various services, but the comfort, cleanliness, and accessibility of its facilities influence patient decisions. Issues such as inadequate waiting areas, cleanliness concerns, and poor staff responsiveness have been cited by some patients as reasons for not returning to the hospital for subsequent visits. These factors are often overlooked in the context of medical interventions, yet they can

significantly affect patient satisfaction and trust in the healthcare provider. Creating a supportive and comfortable environment, both physically and emotionally, is crucial for encouraging pregnant women to seek care and return for regular check-ups.

The interplay between medical services, psychosocial support, KIE, and facility quality highlights the multifaceted nature of maternal healthcare. Hospitals must take a holistic approach, addressing not only the physical but also the emotional and informational needs of pregnant women. This involves integrating KIE into daily practice, offering comprehensive psychosocial support, ensuring high-quality healthcare facilities, and effectively using modern communication tools to engage patients. Such an approach is essential for improving maternal health outcomes and reducing maternal mortality rates in Indonesia.

To achieve these goals, hospitals like Petukangan Hospital must invest in improving their services and outreach efforts. This includes refining their social media marketing strategies to better communicate with pregnant women, ensuring that they provide both accurate information and emotional support, and making necessary improvements to the hospital environment. Additionally, healthcare providers must continuously evaluate the effectiveness of their KIE strategies and make adjustments based on patient feedback to ensure that their communication efforts are resonating with the target audience.

In conclusion, the role of Communication, Information and Education (KIE) in maternal healthcare cannot be overstated. Through effective

communication, information dissemination, and education, pregnant women are empowered to make informed decisions about their care. By integrating these strategies with psychosocial support and high-quality medical facilities, hospitals can enhance patient satisfaction, improve health outcomes, and contribute to reducing maternal mortality rates. The case of Petukangan Hospital underscores the need for a comprehensive approach that considers all aspects of patient care, from physical health to emotional support and effective communication, to ensure that every mother has access to the best possible healthcare during pregnancy and childbirth.

METHOD

This research employs a quantitative approach with a causal research design, aimed at identifying and analyzing the factors influencing pregnant women's decisions in selecting healthcare services at Petukangan General Hospital. The research method combines data collection through questionnaires and uses a cross-sectional approach, allowing the researcher to obtain relevant information within a limited timeframe (Sugiyono, 2013). The focus of this research is on independent, moderating, and dependent variables to study the relationship between factors that influence pregnant women's decisions in choosing antenatal care (ANC) and delivery services. The variables examined in this study include psychosocial support (X1), communication, information, and education (KIE) (X2), as well as healthcare facilities (X3). The dependent variable being studied is the decision of pregnant women in selecting these services, with social

media marketing (M) acting as a moderating variable (Baron & Kenny, 1986; Ghozali, 2021).

The population of this study consists of pregnant women who use services at Petukangan General Hospital in 2024. Using the Hair et al. formula, this study determined a sample size of 220 individuals, selected through purposive sampling. This technique was chosen because it allows the researcher to select samples based on specific criteria relevant to the research objectives (Sugiyono, 2013). The inclusion criteria include pregnant women who reside in Jakarta, have used services at Petukangan General Hospital, and plan to give birth there. The exclusion criteria include pregnant women who are unwilling to participate or have certain medical conditions that prevent them from being involved in the study.

Data for this study were collected using a questionnaire based on an ordinal scale, which is a form of measurement where respondents are asked to answer based on the ranking of categories, without considering the distance between those categories (Stockemer, 2019). The questionnaire was structured with four response options using a Likert scale, which ranges from "Strongly Agree" to "Strongly Disagree." This questionnaire measures various variables in the study, such as psychosocial support, KIE, healthcare facilities, and social media marketing, all of which are considered to influence pregnant women's decisions in choosing services at the hospital.

The data analysis technique involves descriptive analysis to describe the characteristics of the data and calculate the frequency of

responses from the respondents (Ferdinand, 2014). The researcher uses the three-box method to interpret the respondent's answer index results. This analysis allows the researcher to categorize the score results into three levels: low, medium, and high, which are then used to understand the tendencies of respondents' answers to each variable being studied.

Additionally, this study uses Partial Least Square (PLS) analysis, a robust analytical method for models with latent variables and non-normally distributed data (Ghozali, 2021). PLS is chosen for its ability to handle data with non-normal distributions and small sample sizes. In PLS, there are two main submodels: the measurement model (outer model) and the structural model (inner model). The measurement model explains how observed indicators are related to latent constructs, while the structural model shows the relationships between latent variables based on the underlying theory. Bootstrapping procedures are used to evaluate the significance of the model and path coefficients in PLS analysis, allowing the researcher to test the hypotheses proposed in this study (Hair, Ringle, & Sarstedt, 2011). This analysis will be used to test the hypothesis related to the influence of psychosocial support, KIE, and healthcare facilities on pregnant women's decisions, as well as to test the moderating role of social media marketing.

Overall, the methods used in this study include data collection through questionnaires, descriptive analysis, and statistical analysis using PLS-SEM to test the relationships between variables in the research model. Through this approach, the researcher aims to gain a deeper understanding of the factors influencing pregnant women's decisions in selecting antenatal care and delivery services at Petukangan General Hospital.

RESULTS and DISCUSSION

A. Testing Data Analysis Requirements

1. Evaluation of Measurement Model (Outer Model)

To find out the results of the validity and reliability tests, a measurement model test was conducted. In this study, the validity test was conducted to determine whether the construct had met the requirements to be continued as a study or not.

a. Convergent Validity

The measurement model shows how the manifest or observed variables represent the latent variables to be measured. Convergent validity is measured using the outer loading parameter. The individual reflexive measure can be said to be correlated if the value is more than 0.5 with the construct to be measured (Ghozali and Latan, 2015). The following are the results of the outer model test to show the outer loading value using the SmartPLS analysis tool (v 3.2.7).

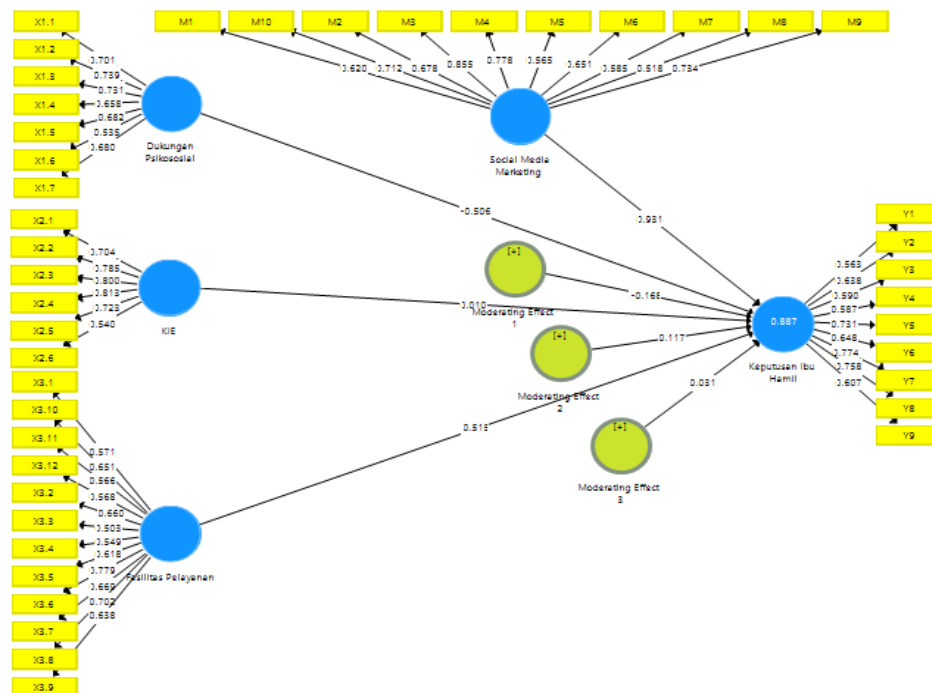


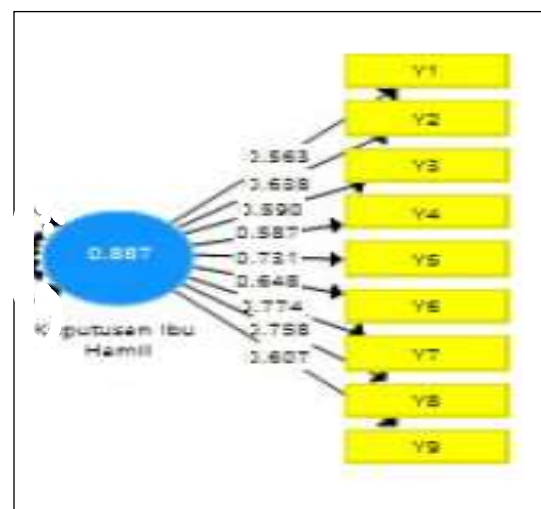
Figure 4.1 Outer model test results

Source: Processed data (2024)

From the analysis results shown in Figure 4.1, it shows that as many as 44 of all the variables and all items have a value greater than 0.5.

Table 4.1 Mark Loading Factor Decision Variables in Choosing a Service

Code	Loading Factor
Y1	0.563
Y2	0.638
Y3	0.590
Y4	0.587
Y5	0.731
Y6	0.648
Y7	0.774
Y8	0.758
Y9	0.607



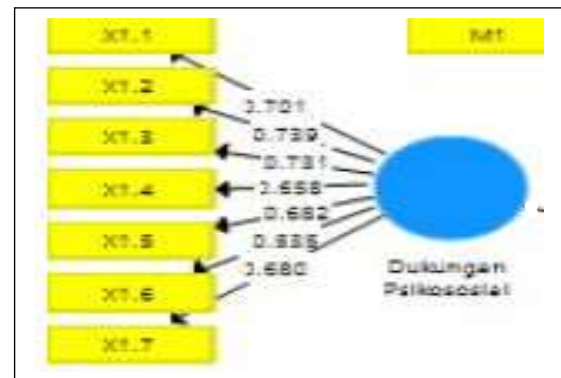
Source: Processed data (2024)

Based on table 4.6, the loading factor value of all variables is above 0.5, so none are excluded.

Furthermore, to be able to see more clearly the loading factor values of the Psychosocial Support data are presented in Table 4.3.

Table 4.2 Mark Loading Factor Psychosocial Support

Code	Loading Factor
X1.1	0.701
X1.2	0.739
X1.3	0.731
X1.4	0.658
X1.5	0.682
X1.6	0.535
X1.7	0.680



Source: Processed data (2024)

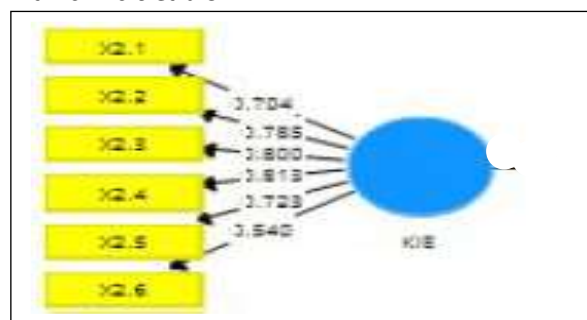
Based on Table 4.3, the loading factor values of all variables are above 0.5, so none are excluded.

Communication, Information and Education data are presented in Table 4.4.

Furthermore, to be able to see the loading factor values more clearly, the

Table 4.3 Loading Factor Value of Exogenous Construct Communication, Information and Education

Code	Loading Factor
X2.1	0.704
X2.2	0.785
X2.3	0.800
X2.4	0.813
X2.5	0.723
X2.6	0.540



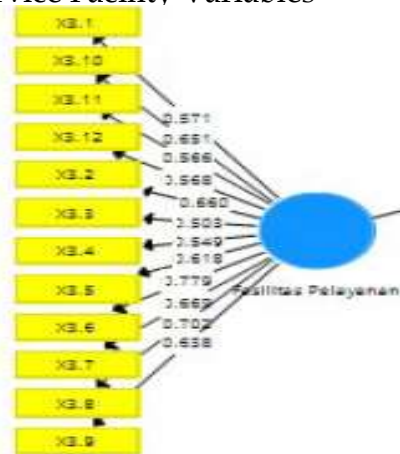
Source: Processed data (2024)

Based on Table 4.4, the loading factor values of all variables are above 0.5, so none are excluded.

Furthermore, to be able to see the loading factor values more clearly, the Service Facilities data are presented in Table 4.5.

Table 4.4 Mark Loading Factor Service Facility Variables

Code	Loading Factor
X3.1	0.571
X3.2	0.660
X3.3	0.503
X3.4	0.549
X3.5	0.618
X3.6	0.779
X3.7	0.669
X3.8	0.702
X3.9	0.638



X3.10	0.651
X3.11	0.566
X3.12	0.568

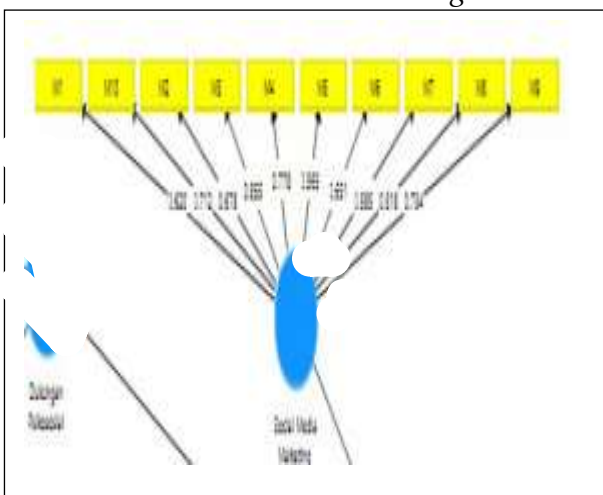
Source: Processed data (2024)

Table 4.5 shows that the loading factor values of all variables are above 0.5, so none are excluded.

To see the loading factor values more clearly, Social Media Marketing data is presented in Table 4.6.

Table 4.5 Mark Loading Factor Variables Social Media Marketing

Code	Loading Factor
M1	0.620
M2	0.678
M3	0.855
M4	0.778
M5	0.565
M6	0.651
M7	0.585
M8	0.518
M9	0.734
M10	0.712



Source: Processed data (2024)

Table 4.6 shows that the loading factor values of all variables are above 0.5, so none are excluded.

b. Composite Reliability

In addition to looking at the value of the construct loading factor as a validity test, a reliability test is also carried out in the measurement model. Reliability testing is carried out to prove the accuracy, consistency and

precision of the instrument in measuring a construct. In PLS-SEM using SmartPLS, to measure the reliability of a construct can be done in several ways, namely with AVE, Cronbach's Alpha and Composite Reliability. The results of the AVE, Composite Reliability, and Cronbach's Alpha indices can be seen in Table 4.7

Table 4.6 Composite Reliability

	Cronbach's Alpha	rho_A	Composite Reliability	Average Variance Extracted (AVE)
Psychosocial Support	0.809	0.826	0.855	0.596
Service Facilities	0.866	0.867	0.885	0.933
IEC	0.827	0.851	0.873	0.538
Pregnant Women's Decision	0.837	0.85	0.872	0.72
Social Media Marketing	0.866	0.879	0.892	0.578

Source: Processed data (2024)

From Table 4.7 it can be seen that the value of all variables in the reliability test using the validity test using AVE with a value of more than 0.5 or Composite Reliability value of more than 0.7. Therefore, it can be concluded that the variables tested are valid and reliable, so that it can be continued to test the structural model.

B. Three Box Method Analysis

The scoring technique that will be used in this study is, with a maximum score of 4 and a minimum score of 1, then the respondent's answer index will be calculated using the following formula:

$$\text{Index value} = [(\%F1*1) + (\%F2*2) + (\%F3*3) + (\%F4*4) / 4]$$

Information:

- F1: Frequency of respondents who answered 1 of the scores used in the questionnaire statement list
F2: Frequency of respondents who answered 2 of the scores used in the questionnaire statement list
F3: Frequency of respondents who answered 3 of the scores used in the questionnaire statement list
F4: Frequency of respondents who answered 4 of the scores used in the questionnaire statement list.

Then the range obtained is:

$$\text{Minimum: } (\%F1*1) = (220*1)/4 = 55$$

$$\text{Maximum: } (\%F4*4) = (220*4)/4 = 220$$

The resulting index number shows a score of 55 to 220 with a range of 176.25. By using the three-box method criteria, the range of 165 is divided into 3 parts, resulting in a range for each part of 55, which will be used as the following index interpretation list.(Ferdinand, 2014):

- Score 55 – 110: Low
- Score 110 – 165: Moderate
- Score 165 – 220: High

Based on the results of the range of values that have been divided into three categories, the researcher tried to analyze each research variable studied and categorize each of these variables. The results of the descriptive analysis based on the index value obtained the following results:

1. Decision to Choose Service (Y)

Descriptive analysis of the variable Decision to Choose Services (Y) consists of 4 indicators. The results of the descriptive analysis conducted on the Organizational Commitment variable are presented in the following table:

Table 4.7 Distribution of Respondents Based on Questionnaire Scores for Decision Variables in Choosing Services

No.	Statement	Score				Amount	Index	Category
		1	2	3	4	*	**	***
1	I am confident to do Antenatal Care at Petukangan Hospital	0	0	73	147	220	201	Tall
		0 (0x1)	40 (20x2)	369 (123 x 3)	588 (147 x 4)	807 (left side total)		
2	I believe in the service at	0	0	40	180	220	210	Tall
		0	0	120	720	840		

	Petukangan Hospital							
Average index of indicators of health service stability							205	Tall
3	I am used to doing Antenatal Care at Petukangan Hospital	0	0	55	165	220	206	Tall
		0	0	165	660	825		
4	I always do Antenatal Care at Petukangan Hospital	0	0	25	195	220	213	Tall
		0	0	75	780	855		
Average index of indicators of Habits in obtaining services							210	Tall
5	I recommend Antenatal Care at Petukangan Hospital to others.	0	0	11	209	220	217	Tall
		0	0	33	836	869		
6	I recommend Antenatal Care at Petukangan Hospital to you.	0	0	10	210	220	217	Tall
		0	0	30	840	870		
7	I recommend Antenatal Care at Petukangan Hospital to my friends.	0	0	85	135	220	198	Tall
		0	0	255	540	795		
Average index of indicators Recommend to others							211	Tall
8	I will do Antenatal Care during my next pregnancy at Petukangan Hospital	0	0	77	143	220	200	Tall
		0	0	231	572	803		
9	I always do Antenatal Care for every pregnancy at Petukangan Hospital	0	0	10	210	220	217	Tall
		0	0	30	840	870		
Average index of the indicator Making repeat purchases							209	Tall
Total number							836	
Average Total							209	Tall

Source: Processed data (2024)

The distribution of respondents from the calculation results can be seen in Table 4.8 where the average index value is 209.01 which is in the high

category, meaning that the Decision to Choose Petukangan Hospital Services is considered good. The highest index value is in questionnaire item number 6

which reflects the indicator Recommend to others, namely "I recommend Antenatal Care at Petukangan Hospital to you" with a score of 217; and questionnaire number 9 which reflects the indicator Recommend to others, namely "I always do Antenatal Care for every pregnancy at Petukangan Hospital" with a score of 217. This reflects that the respondents are satisfied so they will recommend Petukangan Hospital to their relatives and will do Antenatal Care for every pregnancy at Petukangan Hospital.

The lowest index value is in item number 7 in the Recommend to others indicator, namely "I recommend Antenatal Care at Petukangan Hospital to friends" with a score of 198.75. This shows that respondents are more interested in recommending Antenatal Care at Petukangan Hospital to relatives than to friends.

2. Psychosocial Support (X1)

Descriptive analysis of the Psychosocial Support variable (X1) consists of 3 indicators. The results of the descriptive analysis conducted on the psychosocial support variable are presented in the following table:

Table 4.8 Distribution of Respondents Based on Psychosocial Support Variable Questionnaire Scores

No.	Statement	Score				Amount	Index	Category
		1	2	3	4	*	**	***
1	There are many counseling sessions available for the psychological support program for pregnant women.	0	0	10	210	220	217	Tall
		0	0	30	840	870		
2	I received adequate emotional support after each counseling session.	0	0	20	200	220	215	Tall
		0	0	60	800	860		
3	Access to psychotherapy services at Petukangan Hospital is very easy.	0	0	42	178	220	209	Tall
		0	0	126	712	838		
4	I received a support program designed to address anxiety, depression or other mental health issues during pregnancy.	0	0	57	163	220	205	Tall
		0	0	171	652	823		
Average index of psychological counseling indicators							211	Tall
5	There is a group of fellow pregnant women who provide support to each other.	Tall	0	85	135	220	198	Tall
		0	0	255	540	795		
Average index of Support Group indicators							198	Tall
6	The material on health education for pregnant women is easy to	Tall	0	103	117	220	194	
		0	0	309	468	777		

	understand.							
7	Easy access to materials and information about pregnancy	0	0	75	145	220	201	Tall
		0	0	225	580	805		
Average index of Health info Assessment indicators							197	Tall
Total number							608	
Average Total							202	Tall

Source: Processed data (2024)

The distribution of respondents from the calculation results can be seen in Table 4.9 where the average index value is 202 which is in the high category, meaning that the Psychosocial Support of Petukangan Hospital is considered good. The highest index value is in questionnaire item number 1 which reflects the psychological counseling indicator, namely 'there are many counseling sessions for the psychological assistance program for pregnant women' with a score of 217. This reflects that there are many counseling sessions as an option that pregnant

women can follow at Petukangan Hospital.

The lowest index value is at number 6 in the Health Information Assessment indicator, namely "Materials on health education for pregnant women are easy to understand" with a score of 194.25. This shows that health education materials for pregnant women must be further improved to be more optimal and comprehensive.

3. KIE (X2)

Descriptive analysis of the KIE variable (X2) consists of 3 indicators. The results of the descriptive analysis conducted on Remuneration are presented in the following table:

Table 4.9 Distribution of Respondents based on Variable Questionnaire Scores (KIE)

No.	Statement	Score				Amount	Index	Category
		1	2	3	4	*	**	***
1	Availability of easily accessible communication channels for pregnant women	0	0	93	127	220	196	Tall
		0	0	279	508	787		
2	Use easy-to-understand language and avoid complicated medical terms when communicating with pregnant women.	0	0	64	156	220	204	Tall
		0	0	192	624	816		
Average index of communication indicators							200	Tall
3	The information provided is based on current scientific evidence and clinical guidelines.	0	0	80	140	220	200	Tall
		0	0	240	560	800		
4	Availability of reliable and accessible sources of information for pregnant women, such as brochures,	0	0	60	160	220	205	Tall
		0	0	180	640	820		

	websites, or approved literature.								
Average index of Information indicators								202	Tall
5	The education provided increased my understanding of the importance of prenatal care and the actions needed to maintain their health and that of their unborn baby.	0	0	82	138	220	199	Tall	
		0	0	246	552	798			
6	The education provided increased my understanding of birth planning.	0	0	74	146	220	201	Tall	
		0	0	222	584	806			
Average index of Education indicators								200	Tall
Total number								603	
Average Total								201	Tall

Source: Processed data (2024)

The distribution of respondents from the calculation results can be seen in Table 4.10 where the average index value is 201 which is in the high category, meaning that Communication, Information, and Antenatal Care Education at Petukangan Hospital is good. The highest index value is found in questionnaire item number 4 which reflects the information indicator carried out, namely "Availability of reliable and accessible sources of information for pregnant women, such as brochures, websites, or approved literature" with a score of 205. This reflects that there are reliable and easily accessible sources of information for

pregnant women at Petukangan Hospital.

The lowest index value is at number 1 in the communication indicator, namely "Availability of easily accessible communication channels for pregnant women" with a score of 196. This shows that pregnant women feel that communication channels are considered easy but the level of ease is not yet optimal.

4. Health Service Facilities (X3)

Descriptive analysis of the Health Service Facilities variable (X3) consists of 6 indicators. The results of the descriptive analysis conducted on the Health Service Facilities variable are presented in the following table:

Table 4.10 Distribution of Respondents Based on Health Service Facility Variable Questionnaire Scores

No.	Statement	Score				Amount	Index	Category
		1	2	3	4	*	**	***
1	I know that Petukangan Hospital has normal delivery services.	0	0	103	117	220	194	Tall
		0	0	309	468	777		
2	The delivery service at Petukangan Hospital is good	0	0	107	113	220	193	Tall
		0	0	321	452	773		
Average index of indicators of maternity services							193	Tall
3	I know that Petukangan	0	0	92	128	220	197	Tall

	Hospital has post-natal services, namely postpartum services.	0	0	276	512	788		
4	Postpartum services at Petukangan Hospital are good	0	0	64	156	220	204	Tall
		0	0	192	624	816		
Average index of postpartum service indicators							200	Tall
5	I know that Petukangan Hospital has family planning services	0	0	61	159	220	204	Tall
		0	0	183	636	819		
6	Family planning services at Petukangan Hospital are good	0	0	84	136	220	199	
		0	0	252	544	796		
Average index of KB Service indicators							201	Tall
7	I know that Petukangan Hospital has reproductive health/gynecological disease services.	0	0	75	145	220	201	Tall
		0	0	225	580	805		
8	Services for reproductive health disorders/gynecological diseases at Petukangan Hospital are good	0	0	65	155	220	203	Tall
		0	0	195	620	815		
Average index of reproductive health disorder/gynecological disease service indicators							202	
9	I know that Petukangan Hospital has surgical services	0	0	0	220	220	220	Tall
		0	0	0	880	880		
10	The action/operation services at Petukangan Hospital are good	0	0	0	220	220	220	Tall
		0	0	0	880	880		
Average index of service action/operation indicators							220	Tall
11	I know that Petukangan Hospital has other services in the obstetrics sub-specialization.	0	0	0	220	220	220	Tall
		0	0	0	880	880		
12	Other sub-specialist services at Petukangan Hospital are good	0	0	0	220	220	220	Tall
		0	0	0	880	880		
Average index of other sub-specialist service indicators							220	Tall
Total number							1238	
Average Total							206	Tall

Source: Processed data (2024)

The distribution of respondents in Table 4.11 where the average index from the calculation results can be seen value is 206 which is in the high

category, meaning that the Petukangan Hospital Health Service Facilities are good. The highest index value is found in questionnaire items number 9 and 10 which reflect the indicators of Action/Surgery Services, namely "I know that Petukangan Hospital has surgery services" and "The action/surgery services at Petukangan Hospital are good" with a score of 220. This reflects that respondents know the surgery services at Petukangan Hospital and are considered good.

The lowest index value is in statement number 2 in the delivery

service indicator, namely "Delivery services at Petukangan Hospital are good" with a score of 193. This shows that delivery services at Petukangan Hospital are considered good in the eyes of respondents but have not reached their maximum.

5. Social Media Marketing(Z)

Descriptive analysis of the Social Media Marketing (Z) variable consists of 5 indicators. The results of the descriptive analysis conducted on the Health Service Facilities variable are presented in the following table:

Table 4.11 Distribution of Respondents based on Variable Questionnaire Scores *Social Media Marketing*

No.	Statement	Score				Amount	Index	Category
		1	2	3	4			
1	RSU Petukangan Instagram content is interesting	0	76	60	84	220	167	Tall
		0	152	180	336	668		
2	Petukangan Hospital likes to provide giveaway content	0	81	60	79	220	164	Tall
		0	162	180	316	658		
Average index of Entertainment indicators							165	Tall
3	Instagram RSU Petukangan provides service information that suits your needs	0	70	20	130	220	180	Tall
		0	140	60	520	720		
4	Service information is easy to find in the RSU Petukangan IG content	0	70	20	130	220	180	Tall
		0	140	60	520	720		
Average index of Customization indicators							180	Tall
5	RSU Petukangan Instagram admin is quick to respond to follower questions	0	85	44	91	220	166	Tall
		0	170	132	364	666		
6	RSU Petukangan Instagram admin is friendly in interacting with followers	0	84	43	93	220	167	
		0	168	129	372	669		
Average index of Interaction indicators							166	Tall
7	I got the service information from sharing information from Petukangan Hospital patients on Instagram.	0	55	21	144	220	187	Tall
		0	110	63	576	749		
8	I know the quality of service from the testimonials of Petukangan Hospital patients on Instagram	0	52	21	147	220	188.75	Tall
		0	104	63	588	755		

Average index of EWOM indicators							188	
9	The style or type of content uploaded on the Petukangan Hospital Instagram is up to date	0	32	36	152	220	195	Tall
		0	64	108	608	780		
10	The information in the content uploaded on the Petukangan Hospital Instagram is up to date	0	32	36	152	220	195	Tall
		0	64	108	608	780		
Average index of Trend indicator							195	Tall
Total number							895	
Average Total							179	Tall

Source: Processed data (2024)

The distribution of respondents from the calculation results can be seen in Table 4.12 where the average index value is 179 which is in the high category, meaning that Social Media Marketing of Petukangan Hospital is good. The highest index value is found in questionnaire items number 9 and 10 which reflect the Trend indicator, namely "The style or type of content uploaded on Petukangan Hospital Instagram is up to date" and "Information in the content uploaded on Petukangan Hospital Instagram is up to date" with a score of 195. This reflects that respondents consider what

is posted on Petukangan Hospital Instagram to be up to date information.

The lowest index value is in statement number 2 in the Entertainment indicator, namely "RSU Petukangan likes to provide giveaway content" with a score of 164. This shows that the giveaway content on RSU Petukangan's Instagram is considered less attractive in the eyes of respondents.

ResumeDescription of respondents' answers regarding behavioral attitudes is shown in the matrix shown in the following table:

Table 4.12Petukangan Hospital Respondent Response Matrix

No.	Variables	Respondent Response Position			Attitude
		Low	Currently	Tall	
1	Decision to Choose Pregnancy and Childbirth Services	-	-	✓	Loyal and will make repeat visits
2	Psychosocial Support	-	-	✓	More communicative and compliant with care
3	IEC	-	-	✓	Communicative, obedient and critical in asking questions
4	Service	-	-	✓	Comfort

	Facilities				able and Repeat Visit
5	<i>Social Media Marketing</i>	-	-	✓	High engagement and awareness of hospital services and programs

Source: Processed data (2024)

Descriptive analysis using the three box method shows that the Decision to Choose Pregnancy Services at Petukangan Hospital is classified as high and Psychosocial Support, IEC, Service Facilities, and Social Media Marketing of Petukangan Hospital are also in the high category. This means that Psychosocial Support, IEC, Service Facilities, and Social Media Marketing of Petukangan Hospital are considered good by respondents.

C. Structural Model Evaluation (Inner Model)

The structural model was evaluated using R-square for dependent constructs, Stone-Geisser Q-square test for Q2 predictive relevance, significance test of structural path parameter coefficients.

1. R-Square (R²)

Evaluation of the structural model or inner model aims to predict the relationship between latent variables. The structural model is evaluated by looking at the percentage of variance explained, namely by looking at the R-Square value for the endogenous latent construct. Here is Table 4.19.

Table 4.13R-Square (R²)

	R Square	R Square Adjusted
Pregnant Women's Decision	0.887	0.883

Source: Processed data (2024)

From the results R^2 in Table 4.14 shows that the value R^2 Pregnant Women's Decision is 0.887. Value This shows that Psychosocial Support, IEC, Service Facilities are 98.7%. And the rest is influenced by other variables outside the variables in this study.

2. Significance Test (Bootstrapping)

To find out whether a hypothesis is accepted or rejected, it can be done by considering the significance value between constructs, t-statistics and p-

values. In this way, the measurement estimate and standard error are no longer calculated with statistical assumptions, but are based on empirical observations. In the bootstrapping method in this study, the hypothesis is accepted if the significance value of t-values is greater than 1.96 and/or the p-values are less than 0.05, then H_a is accepted and H_o is rejected and vice versa.

Table 4.14Result of t statistic

	Original Sample (O)	Sample Mean (M)	Standard Deviation (STDEV)	T Statistics (O/STDEV)	P Values
Psychosocial Support -> Pregnant Women's	-0.506	-0.496	0.125	4.053	0

Decisions					
Service Facilities -> Pregnant Women's Decisions	0.515	0.508	0.058	8,942	0
IEC -> Pregnant Women's Decisions	0.01	0.006	0.102	0.103	0.918
Moderating Effect 1 -> Pregnant Mother's Decision	-0.168	-0.166	0.092	1,817	0.07
Moderating Effect 2 -> Pregnant Mother's Decision	0.117	0.116	0.081	1,438	0.151
Moderating Effect 3 -> Pregnant Mother's Decision	0.031	0.027	0.027	1.136	0.256
Social Media Marketing -> Pregnant Women's Decisions	0.931	0.931	0.050	18,456	0,000

Source: Processed data (2024)

D. Hypothesis Testing

Based on Table 4.16, determining whether the hypothesis is accepted or rejected is explained as follows:

Table 4.15 Summary of Hypothesis Test Results

	Hypothesis
H1	Psychosocial Support Influences the Decision to Choose Pregnancy Services
H2	IEC has no influence and is not significant on the decision to choose pregnancy services
H3	Health service facilities influence the decision to choose pregnancy services
H4	<i>Social Media Marketing</i> Cannot Moderate Psychosocial Support on Decision to Choose Pregnancy Services
H5	<i>Social Media Marketing</i> Unable to Moderate IEC on Decision to Choose Pregnancy Services
H6	<i>Social Media Marketing</i> Unable to Moderate Service Facilities on Decisions to Choose Pregnancy Services
H7	<i>Social Media Marketing</i> Influence on Decision to Choose Pregnancy Services

Source: Processed data (2024)

CONCLUSION

Based on the analysis of the factors influencing pregnant women's decisions regarding antenatal care and delivery services at Petukangan General Hospital, several conclusions can be drawn. First, psychosocial

support and health service facilities were found to have a significant impact on the decision-making process of pregnant mothers. Psychosocial support, including emotional and social support from family and healthcare providers, plays a critical

role in reducing anxiety and enhancing the overall comfort of expectant mothers. Similarly, the availability of high-quality health service facilities, such as specialized obstetric services, was shown to be a significant factor in shaping the decisions of pregnant women.

On the other hand, health communication, information, and education (KIE) did not exhibit a strong influence on the decision-making process, possibly due to insufficient engagement or unclear messaging. Despite this, social media marketing proved to have a direct and significant impact on the choices of pregnant women, particularly through engaging content and effective communication via platforms like Instagram. This underscores the importance of modern digital marketing strategies in influencing healthcare decisions.

REFERENCES

- Agichtein, E., Castillo, C., Donato, D., Gionis, A., & Mishne, G. (2008). Finding High-Quality Content in Social Media. *Proceedings of the 2008 International Conference on Web Search and Data Mining*, Association for Computing Machinery, New York, USA, 183-194.
<https://doi.org/10.1145/1341531.1341557>.
- Akhrani, L. A., & Azhar, M. (2021). Wisata Super Premium Labuan Bajo: Mengkaji Peran Langsung dan Tidak Langsung Terhadap Visiting Intention Ditinjau dari Destination Image dan Tourist Expectation. *Personifikasi: Jurnal Ilmu Psikologi*, 12(1), 1-20.
- Alalawi, A., Aljuaid, H., & Natto, Z. S. (2002). The Effect of Social Media on the Choice of Dental Patients: A Cross-Sectional Study in the City of Jeddah, Saudi Arabia. *Patient Preference Adherence*, 13, 1685-1692.
- Al-Gunaid, T. H., Ibrahim, A. M., Alhazmi, K. M., Aljohani, A. A., Eshky, R. T., & Althagafi, N. (2021). Impact of Social Media on Patient's Decision-Making Toward Orthodontic Treatment. *Saudi Journal for Health Sciences*, 10(2), 132-137.
- Amankwah-Amoah, J., Boso, N., & Antwi-Agyei, I. (2018). The Effects of Business Failure Experience on Successive Entrepreneurial Engagements: An Evolutionary Phase Model. *Group & Organization Management*, 43(4), 648-682.
- Furthermore, the results suggest that while social media marketing does not moderate the relationship between the other factors and decision-making, it still contributes to the overall decision process by offering accessible, informative, and engaging content. Thus, healthcare providers are encouraged to enhance their digital presence and develop more engaging and informative social media strategies to improve the attractiveness of their services.
- Overall, this research highlights the critical roles that psychosocial support, health service quality, and social media marketing play in the decision-making process of pregnant mothers. Hospitals must invest in strengthening these aspects to better serve their patients and improve the utilization of antenatal care services, ultimately leading to better health outcomes for both mothers and babies.

- Apenteng, B. A., Ekpo, I. B., Mutiso, F. M., Akowuah, E. A., & Opoku, S. T. (2020). Examining the Relationship Between Social Media Engagement and Hospital Revenue. *Health Marketing Quarterly*, 37(1), 10-21.
- Arikunto, S. (2016). *Prosedur Penelitian Suatu Pendekatan Praktik*. Jakarta: Rineka Cipta.
- Ashley, C., & Tuten, T. (2015). Creative Strategies in Social Media Marketing: An Exploratory Study of Branded Social Content and Consumer Engagement. *Psychology & Marketing*, 32(1), 15-27.
- Ashley, C., & Tuten, T. (2015). Creative Strategies in Social Media Marketing: An Exploratory Study of Branded Social Content and Consumer Engagement. *Psychology & Marketing*, 32(1), 15-27.
- Astarika, G. A., Satar, Y. P., & Trigono, A. (2021). Pengaruh Faktor Bauran Pemasaran dan Karakteristik Pasien Antenatal Care (ANC) Terhadap Minat Melahirkan di RSAU Dr. Esnawan Antariksa pada Masa Pandemi Covid-19 Tahun 2021. *Jurnal Manajemen dan Administrasi Rumah Sakit Indonesia (Marsi)*, 5(2), 156-163.
- Atukunda, E. C., Mugenyi, G. R., Obua, C., Musiimenta, A., Agaba, E., Najjuma, J. N., Ware, N. C., & Matthews, L. T. (2020). Women's Choice to Deliver at Home: Understanding the Psychosocial and Cultural Factors Influencing Birthing Choices for Unskilled Home Delivery Among Women in Southwestern Uganda. *Journal of Pregnancy*, 2020.
- Berger, J., & Milkman, K. L. (2012). What Makes Online Content Viral? *Journal of Marketing Research*, 49(2), 192-205. <https://doi.org/10.1509/jmr.10.0353>.
- Bitton, A., Hwang, A., Greene, J., Rogers, W. H., & Rittenhouse, D. R. (2010). A Nationwide Survey of Patient Centered Medical Home Demonstration Projects. *Journal of General Internal Medicine*, 25(6), 584-592. <https://doi.org/10.1007/s11606-010-1262-8>.
- Brown, R. (2020). Reducing Stress Through Psychosocial Support Programs. *Health and Wellness Journal*, 22(2), 75-88.
- Cohen, S., & Wills, T. A. (1985). Stress, Social Support, and the Buffering Hypothesis. *Psychological Bulletin*, 98(2), 310-357.