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## **Women Pregnancy amidst Covid-19: Understanding Vulnerability, Developing Vaccine Strategy, and Capacity in Palembang**

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### **Abstract**

Women in pregnancy have special needs and may require different forms of physical, social, mental, and emotional support than others because they are very vulnerable to death, illness and injury during the Covid-19 pandemic. This article examines how the government plans to prepare some strategies and capacity to ensure pregnant women's safety during the Covid-19 pandemic in Palembang. We conducted a field study with essential questions in assessing the vaccination program for pregnant women, government, hospitals, print news, and online about the distribution of services and the availability of vaccination for pregnant woman are delaying. In this article, we found a significant disruption to the practice of vaccination of pregnant women in the city of Palembang during the COVID-19 pandemic. This is not only because of the closure of health services but also because of the lack of supply of vaccine distribution for pregnant women, so the vaccination program for pregnant women has been delayed. We urge the government to strengthen the strategy and capacity to ensure that vaccination services for pregnant women are available in the city of Palembang because even though the Covid-19 pandemic is currently sloping, there is still a possibility that it will rise again.

Keywords: Covid-19, Pregnant Women, Vaccine, Government Capacity and Strategy, Palembang City

### **Abstrak**

Wanita hamil memiliki kebutuhan khusus dan mungkin memerlukan dukungan fisik, sosial, mental, dan emosional yang berbeda dari yang lain karena mereka sangat rentan terhadap kematian, penyakit, dan cedera selama pandemi Covid-19. Artikel ini bertujuan untuk mengkaji bagaimana kebijakan pemerintah menyiapkan beberapa strategi dan kapasitas untuk memastikan ibu hamil aman selama pandemi Covid-19 di kota Palembang. Kami melakukan studi lapangan dengan pertanyaan-pertanyaan penting dalam menilai program vaksinasi untuk ibu hamil, pemerintah, rumah sakit, berita cetak dan online tentang distribusi layanan dan ketersediaan vaksinasi untuk ibu hamil yang tertunda. Dalam artikel ini, kami menemukan bahwa ada gangguan yang signifikan terhadap praktik vaksinasi ibu hamil di kota Palembang selama pandemi COVID-19. Hal ini tidak hanya karena penutupan layanan kesehatan tetapi juga karena kurangnya pasokan distribusi vaksin untuk ibu hamil sehingga program vaksinasi untuk ibu hamil tertunda. Kami mendesak pemerintah memperkuat strategi dan kapasitas untuk memastikan tersedianya layanan vaksinasi bagi ibu hamil di kota Palembang, karena meski pandemi Covid-19 saat ini sedang melandai, namun masih ada kemungkinan akan bangkit kembali.

Kata kunci: Covid-19, Wanita Hamil, Vaksinasi, Kapasitas dan Strategi Pemerintah, Kota Palembang.

## **INTRODUCTION**

At the end of 2019, or to be precisely at the beginning of 2020, all people on the planet were experiencing the same illness caused by the latest epidemic in the world in the last century. It is more commonly known as COVID-19 (Fredy & Raegen, 2022). It spreads quickly, but its effects can, at the same time, destroy the brilliance of the world's people. This kind of disease also creates new challenges unimaginable to humans at the time. It first occurred in Wuhan, China, but has spread exponentially to every corner of the world, including Indonesia (Marthen Raegen & Yulion, 2022). It begins with relationships between people and between countries and ultimately restricts human movement (Putra et al., 2020). It becomes a terrifying specter that disrupts all human activity, from crowds to isolation to world systems (Sholihin et al., 2022). On that basis of that, from the North to the South, from the Western to the Eastern states, they take various actions, starting from the issuance of PSBB (Large-Scale Social Restrictions) rules, human movement (people movement), social distancing, which causes delays the movement of people, the economy and the lockdown of regions, countries and even the closure of educational activities (Sirozi & Yenrizal, 2020). In other words, all people worldwide are experiencing significant stuttering in devising ways to deal with the spread of the COVID-19 pandemic (Harahap & Anisyah, 2021).

In the aspect of women and health amid the spread of Covid-19, various countries in various parts of the world have the same level of concern, collectively limiting and even limiting health service activities for pregnant women simultaneously without warning (Isbaniah & Susanto, 2020). The closure of the health system, although initially experiencing problems, services must still be carried out effectively and optimally. In carrying out this effectiveness and optimization, all mechanisms, structures, and techniques of health services for pregnant women are a new challenge, not only for developing countries but also for developed and modern countries (Collin et al., 2020). Even though many government services are transferred through online-based digital technology, the health aspect of pregnant women becomes a new complex problem. Even though the health service system is online-based for developed and modern countries, health services for pregnant women have it because all the facilities and infrastructure have long been able to support this learning system. The most unpleasant thing happens to a country that these modern facilities and infrastructure have not fully supported. Much literature reveals that the presence of the COVID-19 pandemic has opened up the weakness of the health service system for pregnant women, who cannot rely solely on and use various digital platforms, applications, and websites. This is related to the high vulnerability to Covid-19 infection in pregnant women (Ceulemans et al., 2021). Pregnant women have a low immune system and are more susceptible to disease or conditions. Since pregnant women have a standard immune system, COVID-19 can infect at any time. Although the general symptoms experienced will be the same as other sufferers, pregnant women with congenital diseases, such as lung disease, asthma, or liver damage, will have more severe symptoms. Coronavirus in pregnant women will cause some existing conditions to cause severe signs, even leading to loss of life. In addition, pregnant women severely affected by COVID-19 are also at risk of experiencing preterm labor, miscarriage, and even death. According to Ari K Januarto, pregnant women are included in the individuals vulnerable to the Covid-19 infection group. If pregnant women contract Covid-19, the impact or consequences will be worse than mothers who are not pregnant. In addition, the risk of Covid-19 increases swelling,

premature labor, and other pregnancy complications in even worse conditions. Therefore, the transition of health services for pregnant women is a new challenge. Then how, in Indonesia, the health services and consultations for pregnant women present unique challenges, and the problem of access and government capacity to improve the quality of services is still worrying (Susilowati et al., 2021).

It has attracted the attention of many scholars with different conceptual and theoretical approaches to explain the Covid-19 pandemic to the world of women's pregnancy during the Covid-19 pandemic. First, Davis-Floyd et al., (2020) analyze the changes that have occurred in the medical and nursing world in dealing with pregnant and childbirth women in the United States that have happened so quickly due to the Covid-19 pandemic. The medical world and care in dealing with pregnant and giving birth women face complex challenges, not only about government regulations on wearing masks and gloves but also not having access to hospital services. The hospital provides the services temporarily through virtual services such as zoom (Ropik et al., 2018). In addition, women who want to give birth must also have a limited workspace, so they choose to give birth safely outside the hospital with a midwife. The emergence of the Covid-19 Pandemic in the United States required hospitals to comply with best-practice transfer protocols to ensure a safe and efficient interface with out-of-home delivery workers when patients needed higher care (Davis-Floyd et al., 2020). In the bigger picture, we place the COVID-19 pandemic in the context of other disasters, such as earthquakes and volcanic eruptions, including hurricanes from the Climate Crisis – all of which present significant challenges for maternity caregivers (Yenrizal, 2021). We hope that the rapidly reclaiming US maternity care system becomes more integrated, includes the community of midwives as fully recognized participants in that system, and intensively supports home births and stand-alone birth centers, eliminating race and equalizing access (Ropik & Qibtiyah, 2021). To cover them under government insurance. Midwifery and doula care must be available to all and covered by Medicaid or insurance (Mayopoulos et al., 2021).

Second, Kingsley et al., (2021) how the existing healthcare system prioritizes services amid and outside the COVID-19 pandemic in low- and middle-income countries. Studies are based on the emergence of COVID-19 directly affecting pregnant women, causing more severe illness and adverse outcomes. The indirect effects of the tremendous COVID-19 response are far worse, increasing maternal and infant mortality. Service Assessment Amid COVID-19, the government, must balance effective COVID-19 response measures while continuing to provide essential health care. In the study caused by the Covid-19 Pandemic, identifying the extent and reasons for service interruptions and the impact of using modeling techniques will facilitate service prioritization. Sufficient supply, maintaining core interventions, expanding the non-physician workforce, and deploying telehealth are some adaptation measures to optimize care (Syawaludin & Fikri, 2019). In the COVID-19 pandemic, the government must reinvest in maternal and child health by building more resilient maternal health services supported by political commitment, multisectoral engagement, and assistance from international partners (Galle et al., 2022). Therefore, there is a need for multisectoral investments that provide high-quality care that ensures continuity and is available to all segments of the population. A robust primary healthcare system linked to specialist care and access to all population segments, including marginalized subgroups, is essential—a systematic approach to digital healthcare solutions to bridge support in critical services. Future pandemic preparedness programs should include action plans for resilient maternal health services (Wang et al., 2021).

Third, Sutrisno et al., (2021) argued that the emergence of the Covid-19 pandemic has caused not only anxiety in the world community but also anxiety for pregnant and childbirth women in various countries around the world, especially in Indonesia. Although the stress level experienced by pregnant women in Indonesia varies, around 66.6% of pregnant women have

mild anxiety levels, while 16.7% have moderate anxiety. Most pregnant women are concerned about the health of themselves, their children, their unborn babies, and their elderly family members, work from home, avoid large-scale social activities and gatherings, and limit visits to health facilities. They also highlighted that the COVID-19 pandemic increased the likelihood of anxiety symptoms and changes in attitudes and behavior in pregnant women (Haristiani et al., 2022).

In the Indonesian context, around 2.179 pregnant women were exposed to Covid-19, and as many as 18 percent of them died in the April 2020-April 2021 period. This data is data before the surge in Covid-19 cases in Indonesia, which occurred in June-July 2021 due to the delta variant attack. To reduce the death rate and minimize the possibility of severe symptoms, the government is carrying out vaccination activities for not only Indonesia. For pregnant women, since the beginning of August 2021, the Ministry of Health has permitted vaccination; POGI has also recommended that the Covid vaccine be given to pregnant women at 12-33 weeks of gestation. Therefore, various regions in Indonesia are actively carrying out vaccination activities for pregnant women.

This study was conducted in South Sumatra as a research location where the study could be conducted based on several considerations. Empirically, the number of pregnant women vaccinated in Palembang City are one of the cities with many pregnant women infected with Covid-19. According to BPS, the number of pregnant women in 2019 was 176,027; in 2020, there were 174,076, and in 2021 there were 171905 people, so the dense population of Palembang city reached 1,843,000 which is one of the challenges for pregnant women in dealing with the spread and transmission of Covid-19. In addition, there were at least 19 cases of deaths in pregnant women due to Covid-19 as of August 2021. In this case, it can be said that Covid-19 is currently a scary thing that can endanger the safety of pregnant women and fetuses. The vulnerability of pregnant women should certainly be a concern for the government in taking quick steps to break the spread of Covid-19, especially in pregnant women with high risk. Therefore, pregnant women infected with Covid-19 need more intensive attention (Luluk, 2020). Currently, there is limited data on Covid-19 during pregnancy, mainly found during late pregnancy, which is a risk for the mother and fetus (L. Zhang et al., 2020). During late pregnancy of Covid-19, infected mothers may risk-averse obstetrical outcomes. A multi-disciplinary team contact should be adopted for dealing with these patients as it allows the practical sharing of knowledge, expertise, and responsibility (Lam et al., 2015). However, repeated testing, Contact tracing and self-isolation may control the spread of SARS-CoV2 and Covid-19 infection until specific treatment, either by vaccine or drugs, are available.

Judging from the data above, many limitations still prevent the implementation of vaccination activities for pregnant women from going well (Sahu et al., 2020). Vaccination for pregnant women, which is only allowed at 12-33 weeks of gestation or around four months of gestation, makes cases of Covid-19 infection still vulnerable to pregnant women, which can pose serious risks, especially during young pregnancies. Of course, this problem must be addressed by the government immediately. In addition, health services during a pandemic like now are hazardous for pregnant women to get vaccinated (Qiao, 2020). The possibility of contracting Covid-19 outside the Puskesmas is still quite large, let alone having to go directly to the Puskesmas. Government policies in prioritizing and providing information to pregnant women must be very concerning. On the Palembang City Health Service website for pregnant women with a target of 13,509 people, only 527 people (4%) got the first dose of the vaccine. The ultimate findings of this study are very important for the health authorities to formulate the best suitable approach to implement COVID-19 vaccination programme, especially in developing countries. In addition, such studies are important for pregnant women to understand how existence and conditions are vulnerable. Therefore, this study designed to assess the

women pregnancy vaccinated amidst Covid-19 in a sample of Palembang City population when the Covid-19 vaccines are mandatory.

## **RESEARCH METHOD**

This paper used qualitative-descriptive methods (Creswell & Poth, 2016), under the case study approach to explain "Women Pregnant Vaccinated during the Era Covid-19 Era: Developing Strategy and Capacity in Palembang City". Principally, qualitative research emphasizes using words other than numbers (Bryman, 2012). In addition, a qualitative method mostly collected data highlighting data that differ from each other, which aimed to facilitate the process of reading, analyzing, and minimizing the difficulty of finding research gaps with research has been carried out (Danial & Wasriah, 2009). This descriptive research aims to account for the facts, properties, and relationships between the phenomena studied, including the relationships between activities, attitudes, beliefs, and ongoing processes. The research data used are qualitative data that emphasize sentences or text only. Therefore, we collected data from primary data by ordering from pregnant women who had directly experienced taking care during the Covid-19 era. In contrast, the secondary data collected from social media which has strongly related to the research topic, such as the official website report of the Ministry of Health, National Population and Family Planning Agency of Republic Indonesia (BKKBN-RI), Palembang City Health Office, books, journals on the distribution of services and availability of vaccinations for pregnant women (Harahap & Anisyah, 2021).

The analysis process is carried out in several stages. First, constructing the phenomena by collecting, selecting, reducing data, and synthesizing with existing methodological foundation (Syawaludin, 2021). In this context, researcher asked participants especially from pregnant women about the Covid-19 vaccines which is raging from can pregnant women vaccines cause Covid-19", "do you dare in infecting Covid-19?", and "the Covid-19 vaccines is safe and effective in preventing Covid-19. In addition, researcher asked to participants especially from government side, about their strategy in build capacity for providing health facilities for pregnant women for vaccinated. All questions particularly related to "upgrading health facilities," provide best information for pregnant women," "perceived severity of Covid-19 effects to own life," and "perceived risk of getting Covid-19." Secondly, presenting all data qualitatively through interview mode which composed experience and information that provides a reality (Zalpa, 2019). In this matter, all the participants were first asked to indicate how they usually perceived the vaccine information, followed by the main sources of vaccines information such as raging from family, friends, the Internet (trusted sites such as the World Health Organization), visits to health care providers, mass media, and so on (Ramadhan Izomiddin & Zalpa, 2022). Finally, concluding all data analysis combined with the method and phenomena of women's pregnancy during the Covid-19 in Palembang as a step of verifying and configuring this research (Budianto, 2019).

## **RESULT AND DISCUSSION**

### **Understanding Vulnerability of Women Pregnant Infecting Covid-19**

The coronavirus infection 2019 (Covid-19) is spreading globally, and the World Health Organization (WHO) declared it on 11 March 2020 as a pandemic disease (World Health Organization, 2020). The outbreaks of Covid-19 during pregnancy are regarded as clinical characteristics and outcomes. In pregnancy, the physiological alteration of immunity and a cardiopulmonary system that may disproportionately be affected by any virus causes respiratory illness and an increased morbidity and mortality rate. Previous documented the death of pregnant women from the severe acute respiratory syndrome coronavirus (SARS-CoV) and Middle East respiratory syndrome coronavirus.

The World Health Organization (WHO) and Centers for Disease Control and Prevention (CDC) draw on previous knowledge and some specific management of outbreaking coronavirus that may be appropriate for Covid-19 pregnant women. Currently, many countries have outbreaks of Covid-19 during pregnancy. Therefore, we have to provide exact information about the vulnerability of pregnant women. The Covid-19 infected pregnant women with a travel-related history of Covid-19 need to immediately self-isolate for screening and testing. Many women suffered the psychological impact of the outbreaks and higher levels of stress, depression, and anxiety which deteriorated to a critical condition. Health professionals ensure their requirements are addressed and provide resources for psychological support to minimize the crucial state of pregnancy (Sahu et al., 2020). The identified of Covid-19 pregnant women were immediately isolated in designated wards in existing hospitals with isolated unfavorable pressure rooms, adequate health care resources for monitoring the mother and fetus, an available intensive care unit, the capability of emergency delivery, and a facility for newborns (Qiao, 2020).

One of the group of population which was dangerous in getting infected from Covid-19 is Pregnant women. It become one of the vulnerable populations exposed to Covid-19 iinfection which is not only effecting a mother but also the womb. According to Chairman of the Indonesian Society of Obstetrics and Gynaecology (POGI) that the risk to pregnant women during this pandemic increased up to 10-fold. In line to that, According to the staff of the Fetomaternal Medicine Division of KSM obgyn RSMH, dr. Nuswil Bernolian, SpOG(K)-KFM, MARS said that pregnant women are a population that is a very high risk, especially at the age of womb fairly old 72% of pregnant women in Indonesia infected with Covid-19 have a gestational age of >37 weeks. Nuswil said that almost 45% of pregnant women need intensive care, and the death rate in pregnant women reached 3% (April 2021).

The risk of severity in pregnant women if infected with Covid-19 is said to increase if the infection occurs during the postpartum period because the inflammatory reaction of Covid-19 occurs along with an increased inflammatory response also during the postpartum period. Pregnancy complications often happen due to exposure to Covid-19 in pregnant women, starting from preterm labor, intrauterine fetal death, and KPD. With the death of pregnant women increasing up to three times. This vulnerability, vaccination in pregnant women is considered very urgent. "Saving pregnant women means saving at least two lives," Yusuf said. Head of the National Population and Family Planning Agency (BKKBN) Sumsel Nopian Andusti, said the acceleration of vaccination in pregnant women is the right step because they include vulnerable people infected and transmitted Covid-19. According to him, three community groups must be prioritized, namely elderly citizens, children, and pregnant women. Moreover, the most vulnerable transmission occurs in the house when family members unknowingly transmit or contract Covid-19. This is what all parties need to realize vaccination must continue to be pursued. Not to prevent transmission but to suppress the impact of exposure to disease. "All parties should encourage citizens to be vaccinated immediately so that their endurance increases," Nopian said.

Surprisingly, until October 2021, there have been about 173,513 pregnant women in South Sumatra. Ideally, everyone should be vaccinated. It targets at least 20,000 vaccinated pregnant women due to vaccine limitations. Meanwhile, the Head of Disease Prevention and Control of the south Sumatra Health Office, Ferry Yanuar, said it targets all pregnant women whose gestational age is at least 13 weeks can be vaccinated. "The implementation of vaccination can also be done in all health care facilities in South Sumatra," he said. Ferry explained that pregnant women will still get twice the dose of the Sinovac vaccine. "We hope pregnant women can all come to the fakes to get the Covid-19 vaccination. So that we can suppress the fatality rate for pregnant women," he said. (Infopublik.id, 2021).

## **Women Praganency Experience in Palembang**

Our study found that majority of participants were willing to be vaccinated against Covid-19. The major reason why many participants were willing to be vaccinated against Covid-19 was because of the recommendations from health authorities. Conversely, the major reason why participants were unwilling to be vaccinated against Covid-19 was because they were concerned about vaccine side effects. Therefore, it is imperative to highlight and emphasize the benefits of Covid-19 vaccination, which can reflect on strengthening trust in Covid-19 vaccines among the populations. It is important to note that the avoidance of Covid-19 vaccination can lead to a lower Covid-19 vaccination rate among the population and increase the risk of SAR-CoV-2 infection (Preis et al., 2020).

There have been many studies reported that majority of the people were willing to be vaccinated against Covid-19. They thought that, to be vaccinated are safe through the government recommendations. On the other hand, they have been numerous people unwillingness to be vaccinated because of side effects of covid-19. In this concern, participants of our study found the same coin which were not willing to be vaccinated. One of the main reason why they unwilling to be vaccinated that they do not understand about the vulnerability pregnant women amid Covid-19.

According to Putri Septiani (29), the fear she feels if infected with Covid-19 is tremendous. She is a laboratory staff at AK Hospital Ghani is at risk of exposure to Covid-19 which was the work environment closely related to healthcare centers allows women to meet with many people daily. Also, Putri knows knows how the dangers of Covid-19 threaten her safety. Still, she said she does not know for sure about the government's policy or socialization about the risks pregnant women receive if infected with Covid-19; she also said that she is afraid of vaccines because there are no special facilities for mothers. Pregnant. "I do not dare to vaccinate about there is no special attention or special access received by pregnant women," said the pregnant woman who already has one child. Until now, Putri feels that she has not dared to be vaccinated until there is a unique facility that distinguishes pregnant women from others who will be vaccinated. Putri's doubts about being vaccinated are growing because she has a disease, which is very vulnerable when infected with Covid-19. Covid-19 vaccination is undoubtedly essential for the putri to boost her immune system, especially in her pregnant state. In addition, Norma Juainah (30) said she did not know that pregnant women are vulnerable if infected with Covid-19. Norma, who works as a lecturer, is well aware of the dangers of Covid-19 infection, but she does not know about the greater risk to pregnant women. Norma has not dared to get vaccinated because there is still not much information about vaccination for pregnant women.

Furthermore, According to Netti Herawati (28), a pregnant woman who works as a teacher said that she did not know that vaccines are essential for pregnant women, even feel they do not need vaccinations because she thinks that her body is healthy. She added, there have been many pregnant women out there who do not even want to be vaccinated and do not know the dangers of the risks if pregnant women are exposed to Covid-19. Similarly, Puan Maharani (35) thinks that she does not need vaccinations and does not know about the vulnerability of pregnant women if exposed to Covid-19. She still works as a Bank team member by serving customers in large numbers daily.

Anastasia Martina (27), a pregnant woman vaccinated at RSMH Palembang, said that she took the initiative to follow the Covid-19 vaccination so that the fetus's condition remains healthy until the delivery period. On January 2021, she contracted Covid-19. "With this vaccination, it is expected that my immunity will be better,". Anastasia did not hesitate to be

vaccinated because she had consulted her brother, who worked as a health worker. she was also encouraged to experience the second vaccination dose one month after the first vaccination.

It can be concluded that there are still many, or even the majority of pregnant women in the city of Palembang, who do not know about the importance of vaccination during pregnancy, especially at the gestational age reached 12-23 weeks. It means that, the role of the government for socializing and disseminating information about immunization and vulnerability of pregnant women if infected with Covid-19 is essential. it is important to note that the avoidance of Covid-19 vaccination can lead to a lower Covid-19 vaccination rate among the population and increase the risk of SAR-CoV-2 infection. Therefore, in order to further improve the vaccination rate, the relevant health authorities need to design and develop health education program emphasizing the importance of vaccination.

### **Government Developing Strategy and Capacity**

Covid-19 vaccination for pregnant women in Palembang only reached 548 out of the target of 13,509 people, or only 4 percent. Those who have been vaccinated have just undergone the first dose. On that day, there were only an additional three pregnant women who underwent vaccinations. (Merdeka.com, 2021). Coupled with the prediction that later this year, there will be a third wave of Covid-19 spread in Indonesia. With data that only 4% of pregnant women are new to the vaccine, the city of Palembang certainly will not be able to handle the spread and effects that will occur in pregnant women.

The Head of Disease Prevention and Control of the south Sumatra Health Office, said that it targets all pregnant women whose gestational age is at least 13 weeks can be vaccinated. "The implementation of vaccination can also be done in all health care facilities in South Sumatra," in addition, he said. Ferry explained that pregnant women will still get twice the dose of the Sinovac vaccine. "We hope pregnant women can all come to the fakes to get the Covid-19 vaccination. So that we can suppress the fatality rate for pregnant women, " (Palembang, 2021).

Not only vaccinations, but the government also conducts socialization on social media to protect pregnant women from Covid-19. Pregnant women are asked to do a pregnancy check-up for the first time and make an appointment with a doctor not to wait long. During the trip, health facilities prevent the transmission of covid-19 in general. They are filling out the P4K sticker in the midwife/nurse/doctor guide through communication media, studying the KIA book and applying it in daily life, checking themselves, and immediately going to the health facility if there is a risk/danger sign. Ensure fetal movement at the beginning of 20 weeks of gestation. After 28 weeks of pregnancy, count fetal movements (at least ten movements per 2 hours) and postpone the class of pregnant women (World Health Organization WHO, 2021).

Unfortunately, lack of knowledge and information on pregnant women about the importance of vaccination against Covid-19 makes many women feel reluctant even to be afraid to follow the vaccination process. It was coupled with the state of vaccination of pregnant women whose function is still equalized along with everyone. Of course, this becomes a vulnerable situation for pregnant women (Zhang et al., 2021).

The risk of exposure and severity of pregnant women infected with Covid-19, if not vaccinated, will be at high risk of experiencing severe Covid until maternal death, pregnancy complications, to various problems in the fetus. The risk of this severity will increase if pregnant women have comorbid such as heart disease, DM, and HT.

In this case, the Palembang City government's capacity to succeed in vaccination activities for pregnant women is essential. Aside from fulfilling the number of vaccine supplies, the dissemination of information about the importance of vaccination for pregnant women must



also be part of the capacity that needs to be considered and carried out by the government. The number of pregnant women who do not know the magnitude of the risk of pregnant women being infected with Covid-19 and a state of not getting vaccinated will be fatal, even causing death for the mother and problems for the fetus.

In addition, majority of participants in our study reported using media and internet to obtain Covid-19 vaccine information. Online sources have been reported to be one of the important sites for individuals to seek for health-related information especially in the 21th century. Therefore, online sources can be one of the important factors that can influences health behaviour and attitudes in individuals. On the other hands, if these online sources contain some misinformation details that may negatively influences health and behaviour and attitudes, this can cause some adverse effects on the individual health status.

## **CONCLUSIN**

Pregnant women become one of the vulnerable populations exposed to Covid-19. Their position infected with COVID-19 must be greater intensive attention. Infection with this disease affects not only the mother but also the womb. The vulnerability of pregnant women should certainly be a concern for the government in taking quick steps to break the spread of Covid-19, especially in pregnant women with high risk. Unfortunately, majority of pregnant women in the city of Palembang do not know about the importance of vaccination during pregnancy, especially at the gestational age that has reached 12-23 weeks. So that the strategy and role of the government in the socialization and dissemination of information about vaccinations and the vulnerability of pregnant women if infected with Covid-19 is essential. The capacity of the Palembang City government in succeeding vaccination activities for pregnant women is indeed crucial. Aside from fulfilling the number of vaccine supplies, the dissemination of information about the importance of vaccination for pregnant women must also be part of the capacity that needs to be considered and carried out by the government. The number of pregnant women who do not know the magnitude of the risk if pregnant women are infected with Covid-19 and in a state of not getting vaccinated will be fatal, even causing death for the mother and problems for the fetus.

## **REFERENCES**

- Budianto, K. (2019). Kedudukan Hak Wanita Menurut Hukum Islam dan Hukum Perdata (KUHPerdata). *Jurnal Studi Sosial Dan Politik*, 3(1), 42–54. <https://doi.org/10.19109/jssp.v3i1.4067>
- Ceulemans, M., Foulon, V., Panchaud, A., Winterfeld, U., Pomar, L., Lambelet, V., Cleary, B., O'shaughnessy, F., Passier, A., Richardson, J. L., Allegaert, K., & Nordeng, H. (2021). Vaccine willingness and impact of the covid-19 pandemic on women's perinatal experiences and practices—a multinational, cross-sectional study covering the first wave of the pandemic. *International Journal of Environmental Research and Public Health*, 18(7). <https://doi.org/10.3390/ijerph18073367>
- Collin, J., Byström, E., Carnahan, A. S., & Ahrne, M. (2020). Public Health Agency of Sweden's Brief Report: Pregnant and postpartum women with severe acute respiratory syndrome coronavirus 2 infection in intensive care in Sweden. *Acta Obstetrica et Gynecologica Scandinavica*, 99(7), 819–822. <https://doi.org/10.1111/aogs.13901>

- Creswell, J. W., & Poth, C. N. (2016). *Qualitative inquiry and research design: Choosing among five approaches*. Sage.
- Davis-Floyd, R., Gutschow, K., & Schwartz, D. A. (2020a). How Birth Providers in the United States are Responding to the COVID-19 Pandemic. *Journal of Prenatal & Perinatal Psychology & Health*, 34(4), 272–284. <http://ezproxy.unal.edu.co/scholarly-journals/how-birth-providers-united-states-are-responding/docview/2468393026/se-2?accountid=137090>
- Davis-Floyd, R., Gutschow, K., & Schwartz, D. A. (2020b). Pregnancy, Birth and the COVID-19 Pandemic in the United States. *Medical Anthropology: Cross Cultural Studies in Health and Illness*, 39(5), 413–427. <https://doi.org/10.1080/01459740.2020.1761804>
- Endang Danial and Nanan Wasriah. (2009). *Metode Penulisan Karya Ilmiah*. Laboratorium Pendidikan Kewarganegaraan.
- Fathiyah Isbaniah, & Agus Dwi Susanto. (2020). Pneumonia Corona Virus Infection Disease-19 (COVID-19). *Journal Of The Indonesian Medical Association*, 70(4), 87–94. <https://doi.org/10.47830/jinma-vol.70.4-2020-235>
- Fredy, F., & Raegen, H. (2022). Pandemic and Democracy in Palembang: Problems Controlling Government and Social People Network for Preventing Pandemic Covid-19. *Proceeding for the International Conference on Social Studies and Humanities (Vol. 4, No. 1)*, 63–68.
- Galle, A., Kavira, G., Semaan, A., Françoise, M., Benova, L., & Ntambue, A. (2022). Utilisation of services along the continuum of maternal healthcare during the COVID-19 pandemic in Lubumbashi, DRC: findings from a cross-sectional household survey of women. *ResearchSquare*, 1–24. <http://www.epistemonikos.org.ezproxy.javeriana.edu.co/documents/9b53091171e5b75222bb68663e635b78350f33a5>
- Harahap, R., & Anisyah, S. (2021). Re-Interpretasi Utopisme “Palembang Emas Darussalam” melalui Penyediaan Ruang Terbuka Hijau di Kota Palembang. *Jdp (Jurnal Dinamika Pemerintahan)*, 4(1), 16–27. <https://doi.org/10.36341/jdp.v4i1.1700>
- Haristiani, R., Asrul, N. A. M., & Yusuf, Y. (2022). Changes in Sleep in Pregnant Women During Covid-19 Pandemic. *Jurnal Keperawatan*, 14, 649–656.
- Kingsley, J. P., Vijay, P. K., Kumaresan, J., & Sathiakumar, N. (2021). The Changing Aspects of Motherhood in Face of the COVID-19 Pandemic in Low- and Middle-Income Countries. *Maternal and Child Health Journal*, 25(1), 15–21. <https://doi.org/10.1007/s10995-020-03044-9>
- Lam, N., Muravez, S. N., & Boyce, R. W. (2015). A comparison of the Indian Health Service counseling technique with traditional, lecture-style counseling. In *Journal of the American Pharmacists Association* (Vol. 55, Issue 5). <https://doi.org/10.1331/JAPhA.2015.14093>
- Luluk, W. Y. (2020). Karakteristik Gejala Klinis Kehamilan dengan Coronavirus Disease (COVID-19) Pendahuluan. *Jurnal Ilmiah Kesehatan Sandi Husada*, 12(2), 726–734. <https://doi.org/10.35816/jiskh.v10i2.397>
- Marthen, T., Raegen, H., & Yulion, Z. (2022). View of Distance Learning during COVID-19 in South Sumatera\_ Challenges and Government Strategy.pdf. *International Conference on Social Sciences and Humanities (ICOSH4)*, 81–88.
- Mayopoulos, G. A., Ein-Dor, T., Dishy, G. A., Nandru, R., Chan, S. J., Hanley, L. E., Kaimal,

- A. J., & Dekel, S. (2021). COVID-19 is associated with traumatic childbirth and subsequent mother-infant bonding problems. *Journal of Affective Disorders*, 282(November 2020), 122–125. <https://doi.org/10.1016/j.jad.2020.12.101>
- Merdeka.com. (2021). *Vaksinasi Ibu Hamil Dimulai dari Usia Kandungan 13 Minggu*. Www.Merdeka.Com. <https://www.merdeka.com/sehat/vaksinasi-ibu-hamil-dimulai-dari-usia-kandungan-13-minggu.html>
- Palembang, M. K. (2021). *Dinkes Palembang Prioritaskan Vaksinasi Ibu Hamil*. Infopublik.Id. <https://infopublik.id/kategori/nusantara/558269/dinkes-palembang-prioritas-vaksinasi-ibu-hamil>
- Preis, H., Mahaffey, B., Heiselman, C., & Lobel, M. (2020). *Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID- 19 . The COVID-19 resource centre is hosted on Elsevier Connect , the company ' s public news and information. January.*
- Putra, A. D., Norhuda, N., & Chandra, R. (2020). Gerakan Sosial Masyarakat Tegal Binangun Kabupaten Banyuasin Provinsi Sumatera Selatan. *Ampera: A Research Journal on Politics and Islamic Civilization*, 1(1), 1–13. <https://doi.org/10.19109/ampera.v1i1.5205>
- Qiao, J. (2020). What are the risks of COVID-19 infection in pregnant women? *The Lancet*, 395(10226), 760–762. [https://doi.org/10.1016/S0140-6736\(20\)30365-2](https://doi.org/10.1016/S0140-6736(20)30365-2)
- Ramadhan, L. A., Izomiddin, I., & Zalpa, Y. (2022). Political Will Pemerintahan Kabupaten Banyuasin dalam Meningkatkan Industri Pangan di Kecamatan Tungkal Ilir. *Jurnal Prodi Ilmu Politik*, 1(1), 18–29. <https://doi.org/https://doi.org/10.19109/jsipol.v1i1.12433>
- Ropik, A., Beriansyah, A., & Wijaya, W. (2018). Rekrutmen Calon Kepala Daerah dalam Era Pilkada Langsung dan Serentak di Kabupaten Musi Banyuasin. *Intizar*, 24(2), 71–80. <https://doi.org/10.19109/intizar.v24i2.2693>
- Ropik, A., & Qibtiyah, M. (2021). Millennial Political Concerns and Political Preferences towards Presidential Election in 2019: Evidence from Palembang. *Jurnal Studi Sosial Dan Politik*, 5(2), 189–202.
- Sahu, K. K., Lal, A., & Mishra, A. K. (2020). COVID-2019 and pregnancy: A plea for transparent reporting of all cases. *Acta Obstetricia et Gynecologica Scandinavica*, 99(7), 951. <https://doi.org/10.1111/aogs.13850>
- Sholihin, E. B., Harahap, R., & Zalpa, Y. (2022). DOES THE PANDEMIC DECLINE OR MAINTAIN DEMOCRACY ? TWO SIDES EFFECTS OF PANDEMIC ON. *The Sunan Ampel Review of Political and Social Sciences*2, 01(02), 16–39.
- Sirozi, M., & Yenrizal. (2020). Preventing Religious Radicalism on College Student in the Islamic State Higher Education (PTKIN) Case Study of Islamic State University (UIN) in Indonesia. *PalArch 's Journal of Archaeology of Egypt/ Egyptology*, 17(6), 7062–7084.
- Susilowati, I. H., Nugraha, S., Alimoeso, S., & Hasiholan, B. P. (2021). Screen Time for Preschool Children: Learning from Home during the COVID-19 Pandemic. *Global Pediatric Health*, 8. <https://doi.org/10.1177/2333794X211017836>
- Sutrisno, S., Widowati, A. R., & Suprobo, N. R. (2021). Anxiety Levels and Behavioral Changes among Pregnant Women Amidst the Coronavirus Disease-19 Pandemic at Fauziah Mother and Child Hospital Tulungagung, East Java. *Open Access Macedonian Journal of Medical Sciences*, 9(B), 1441–1445. <https://doi.org/10.3889/oamjms.2021.7299>

- Syawaludin, M. (2021). Transformation of Islamic Values in Political Interests and Moderate Awareness in Indonesia After the Fall of New Order 1998. *Turkish Journal of Computer and Mathematics Education (TURCOMAT)*, 12(9), 3017–3026.
- Syawaludin, M., & Sirajudin Fikri, M. (2019). Tradisi Politik Melayu : Analisis Pengangkatan dan Pergantian Kekuasaan di Kesultanan Palembang. *Tradisi Politik Melayu: Analisis ...*, 53(9), 1689–1699.  
[http://repository.radenfatah.ac.id/id/eprint/6853%0Ahttp://repository.radenfatah.ac.id/6853/1/3.Tradisi Politik Islam Melayu %28 BUKU 3%29.pdf](http://repository.radenfatah.ac.id/id/eprint/6853%0Ahttp://repository.radenfatah.ac.id/6853/1/3.Tradisi%20Politik%20Islam%20Melayu%28%20BUKU%29.pdf)
- Wang, E. W., Parchem, J. G., Atmar, R. L., & Clark, E. H. (2021). SARS-CoV-2 Vaccination during Pregnancy: A Complex Decision. *Open Forum Infectious Diseases*, 8(5), 1–6.  
<https://doi.org/10.1093/ofid/ofab180>
- World Health Organization. (2020). *Coronavirus disease (COVID-19) Weekly Epidemiological Updates and Monthly Operational Updates*. Www.Who.Int.  
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>
- World Health Organization WHO. (2021). *Health Sector Strategic Preparedness and Response Plan for COVID-19 Revised 2021 Syrian Arab Republic. February, 2*.  
<http://www.emro.who.int/images/stories/syria/health-sector-2021-strategic-preparedness-response-plan-covid-19.pdf?ua=1>
- Yenrizal, Y. (2021). Environmental communication for the rice field conservation in Semende Darat, South Sumatra. *Jurnal Kajian Komunikasi*, 9(2), 149–160.  
<https://doi.org/https://doi.org/10.24198/jkk.v9i2.33453>
- Zalpa, M. & Y. (2019). Film dan propaganda politik (studi atas film “g-30s/pki” dan “jagal”). *Tamaddun: Jurnal Kebudayaan Dan Sastra Islam*, 19(2), 70–91.  
<https://doi.org/10.19109/tamaddun.v19i2.4470>
- Zhang, L., Dong, L., Ming, L., Wei, M., Li, J., Hu, R., & Yang, J. (2020). Severe acute respiratory syndrome coronavirus 2(SARS-CoV-2) infection during late pregnancy: a report of 18 patients from Wuhan, China. *BMC Pregnancy and Childbirth*, 20(1), 1–7.  
<https://doi.org/10.1186/s12884-020-03026-3>
- Zhang, Y., Luo, X., & Ma, Z. F. (2021). Willingness of the general population to accept and pay for COVID-19 vaccination during the early stages of COVID-19 pandemic: a nationally representative survey in mainland China. *Human Vaccines and Immunotherapeutics*, 17(6), 1622–1627.  
<https://doi.org/10.1080/21645515.2020.1847585>