

SUMMARY

The maternal mortality ratio (MMR) in Indonesia remains high 359 per 100.000 live birth (SDKI 2012). MMR is an indicator of mother's health, especially the risk of being death for a mother while pregnancy and delivery. McCarthy and Maine shows three factors that influence maternal mortality, i.e proximate determinant, intermediate determinant and distant determinant. Surabaya city is one of city in the province of East Java which have maternal mortality case still high, so it is necessary to study factor that influence maternal mortality in that city.

Problem reducing maternal mortality in developing countries because of inadequate information. Inadequate information was the lack of statistical data and regular information that can describe maternal mortality. Besides the lack of description of the problem of maternal deaths due to information about maternal deaths have so far only illustrates the magnitude of the problem, but has not been able to describe the level of vulnerability of maternal mortality.

Information about predictors of maternal deaths is limited, so to measure the risk of maternal death, it is necessary to develop an index. Related topics important predictors of maternal mortality to be understood as an effort for the planning and evaluation of maternal and child health programs. The index assesses forecast or predict the risk to maternal mortality has not been done. The index has been used in the early detection of the mother still see the risk of pregnancy and has not looked at the risk of maternal death.

The purpose of this study was to determine the indicators and develop predictive index formula risk factor of maternal mortality.

Type of this research was observational analytic research using case control study. Case in this study is maternal death in Surabaya district and control group was all mother in pregnancy still live up to 42 days postpartum. The sample size in this study were 114 respondents 38 cases and 76 controls. The sampling technique in this study used simple random sampling technique. Data collection techniques done with secondary data obtained through pregnant women cohort registers and mother card. Age, parity, IMT, LILA, anemia status, interval pregnancy, TT immunization, antenatal care, birth attendants, history of contraception, history of illness, history of complication is the independent variable in this study. The dependent variable was maternal mortality.

The result showed that a candidate indicator variables ($p < 0,25$) is age (p value = 0,179), parity (p value = 0,224), anemia status (p value = 0,002), immunization TT (p value = 0,127), antenatal care (p value = 0,127), history of contraception (p value = 0,002), and history of illness (p value = 0,001). The seven variables as indicators of default of risk factor maternal mortality : age, parity, immunization TT, and antenatal care. The predictive index of risk factor of maternal mortality are ($- 1,834 + (2,267^x \text{history of illness}) + (1,597^x \text{history of using contraception}) + (1,597^x \text{anemia status})$).

This index is expected to be considered and utilized as a measuring tool in helping health workers, especially in health centers for screening mother, so early can know that pregnant women have an increased risk of dying either during pregnancy, give birth and parturition.