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RELATIONSHIP OF KNOWLEDGE LEVEL OF FE TABLET WITH COMSUMPTION OF FE TABLET COMPLIANCE IN TRIMESTER III PREGNANT WOMEN AT PUSKESMAS JATIBARANG BREBES

Siti Fatimah¹,Umi Solikhatun²

1,2 Sekolah Tinggi Ilmu Kesehatan Brebes

Corresponding author: Siti Fatimah Email: helga.abhinaya@gmail.com

ABSTRACT

One of the important nutritional elements when pregnant is iron. The increase in blood volume during pregnancy will increase the need for iron , the amount needed by pregnant women to prevent anemia is 500 mg which functions for the needs of the fetus, placenta, and the mother's own hemoglobin. Jens and the research design used was descriptive analytic, amounting to 163 pregnant women. The sampling technique used *simple random sampling* of 116 respondents. The analysis used was the frequency distribution and the bivariate rank Spearman analysis. The results of the study with the *Rank Spearman* correlation test using the SPSS 17 program obtained *R* count = 0.223 with a level of significant (α) = 0.05, then *R* table = 0.1824 which means *R* count> *R* table and obtained *p value* = 0.016 which indicates that the *p value* <from α (*p value* 0.016 <0.05). Pregnant women should increase their knowledge about iron tablets as a supplement to iron by actively following health education and pregnancy examinations, so they always consume Fe tablets during pregnancy by taking 1 tablet per day to avoid the incidence of pregnancy anemia. Pregnant women should increase their knowledge about iron tablets as a supplement to iron by actively participating in health education on antenatal care.

Keywords: Knowledge, pregnant women, obedient, Fe tablets

Introduction

Anemia in pregnancy is a common problem because it reflects the value of the socioeconomic welfare of the community and has a very large effect on the quality of human resources. Pregnant anemia is called "Potential danger of mother and child" (potential danger of mother and child), that's why anemia requires serious attention from all parties involved in health services on the next day. According to the World Health Organization (WHO), most anemia is caused by iron deficiency and acute bleeding. In fact, it is not uncommon for the two to interact with each other and pregnant women who experience iron deficiency around 35% -75% and it increases with gestational age¹.

Anemia in pregnancy can adversely affect pregnancy, childbirth, and childbirth. The effect of anemia in pregnancy for the mother can result in late fetal development with various clinical manifestations, causing hyperemesis gravidarum, placenta previa, dystocia due to uterine inertia, postpartum hemorrhage due to uterine atony. At the time

of delivery it can result in prolonged labor, fetal distress, labor with surgery and amniotic fluid embolism. Meanwhile, the conception share will result in perinatal death, prematurity, congenital disabilities, and others².

Given the dangerous effects of anemia, it is necessary to tackle iron deficiency in pregnant women immediately. The Ministry of Health of the Republic of Indonesia implements a technical policy on iron administration, starting with the provision of one additional blood tablet (Fe tablet). Health workers distributed iron tablets to pregnant women free of charge³.

Provision of Fe tablets is based on with the hope that every pregnant woman will regularly go to the Puskesmas and posyandu during pregnancy. However, there are problems faced in supplementing iron tablets, namely pregnant women find it difficult to take them every day because of forgetting, the stomach feels sore and nauseous⁴.

The knowledge of pregnant women about Fe tablets will affect the compliance of pregnant women in consuming Fe tablets during pregnancy, this is in accordance with 5 that knowledge is a very important domain for the formation of one's actions because from experience and research it turns out that behavior based on knowledge will be more than behavior not based on lasting knowledge. This study aims to determine the relationship between the level of knowledge about Fe tablets and compliance with consuming Fe tablets in third trimester pregnant women in the Jatibarang Public Health Center, Brebes Regency. The aim of this study was to determine the correlation between the level of knowledge about Fe tablets and the compliance with consuming Fe tablets in pregnant women trimester III in the Jatibarang Community Health Center, Brebes Regency.

Methods

This type of research is descriptive analytic research. The design used is *cross sectional*. The population in this study were TM III pregnant women in the Jatibarang District Health Center Brebes, amounting to 163 pregnant women. Measurements using a questionnaire.

Results and Discussion

Table 1. Frequency distribution of the level of knowledge of pregnant women about Fe tablets

knowledge of pregnant women about 1 e tablets						
Knowledge level	Frequency	Percentage				
Less	33	28.4				
Enough	58	50				
Good	25	21.6				
Total	116	100				

Table 1 shows that respondents with less knowledge were 33 respondents (28.4%), respondents with sufficient knowledge were 58 respondents (50%) and respondents with good knowledge were 25 respondents (21.6%).

Table 2. Frequency distribution of compliance with

Compliance level	Frequency	Percentage
Not obey Obey	31 85	26.7 73.3
Total	116	100.0

Table 2 shows that the level of compliance of respondents, namely respondents who obeyed to consume Fe tablets were 85 respondents (73.3%) and respondents who did not comply with consuming Fe tablets were 31 respondents (26.7%).

Table 3. The relationship between the level of knowledge about Fe tablets and compliance with consuming Fe tablets

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Knowledge level	Adherence to consuming Fe Tablets					R		
	Not obey	%	Obey	%	Qty	%	count	p xalue
Less Enough	15 11	45.5 19.0	18 47	54.5 81.0	33 58	100 100	0.223	0.016
Good	5 31	20.0	20	80.0	25	100		
Total	31	26.7	85	73.3	116	100		

Based on table 3, it can be seen that pregnant women who have knowledge about Fe tablets in the less category are mostly obedient to consuming Fe tablets, namely 18 respondents (54.5%), respondents with a sufficient level of knowledge are mostly obedient to consuming Fe tablets, amounting to 47 respondents (81, 0%) and respondents with a good level of knowledge were mostly obedient to consuming Fe tablets, namely 20 respondents (80.0%).

To determine the relationship between the level of knowledge about Fe tablets and the compliance with consuming Fe tablets in pregnant women in the third trimester in the Jatibarang Community Health Center, **Brebes** Regency, the Rank by using Spearman correlation test using the SPSS 17 (the are program results attached). the R count = 0.223 with a level of significance (α) = 0.05, then R table = 0.1824 which means R count> R table and the obtained p value = 0.016 which indicates that p *value* < of α (p*value* 0.016 <0.05). This shows that Ho is rejected and Ha is accepted, which means that there is a relationship between the level of knowledge about Fe tablets and compliance with consuming Fe tablets in third trimester pregnant women.

The level of knowledge of pregnant women about Fe tablets, most of them have sufficient knowledge (50%). This is because pregnant women are actively checking their pregnancies with health personnel and are given information that pregnant women must add iron supplements by consuming Fe tabets. To avoid anemia, postpartum mothers find out by fulfilling the nutritional needs of pregnancy, especially the need for blood additives. because pregnant women need nutritional intake and supplementation with blood.

Knowledge is obtained from both oral and written information, such as seeing and hearing through communication tools and from experiences based on critical thinking⁸.

From the results of the study, it is known that the compliance of respondents in consuming Fe tablets is 85 respondents (73.3%) who are

obedient to consuming Fe tablets and 31 respondents (26.7%) who do not comply with consuming Fe tablets.

Obedience is like to obey orders, obey orders or rules. Meanwhile, obedience is behavior according to the rules and discipline. A person is said to be obedient to treatment if he wants to come to a health worker who has been determined according to a predetermined schedule and is willing to do what the officer recommends.

The factors that cause low compliance of pregnant women to consume iron tablets include the fact that the individual does not feel sick, is ignorant of the symptoms or signs and the impact, negligence of pregnant women or low motivation of pregnant women to consume iron every day until time. which is quite long, there are side effects such as nausea, and pain in the stomach and lack of acceptance of taste, color and several other characteristics of iron supplements .

Based on the results of statistical tests, it shows that there is a relationship between the level of knowledge about Fe tablets and compliance with consuming Fe tablets in third trimester pregnant women (p value = 0.016 and Rhitung = 0.223).

Factors that influence the compliance of pregnant women in consuming iron tablets include the knowledge of pregnant women about anemia and the use of iron obtained from counseling given by midwives when pregnant women perform examinations. In addition to the knowledge of the educational background of pregnant women, it also greatly influences the pregnant compliance of women consuming iron tablets.

According to the theory of behavior, before people adopt new behaviors in that person, a process occurs sequential including awareness, interest, weighing, trying and adapting besides these factors there are also factors that interfere with health behavior due to laziness, lots of busyness, fatigue, the large number of children or families who are in the house or also because of the side effects of Fe tablets which cause nausea and nausea and a fishy smell so that respondents cannot take Fe tablets according to schedule⁵.

Conclusion

There is a significant relationship with the strength of a very weak relationship between the level of knowledge about Fe tablets and adherence to consuming Fe tablets in third trimester pregnant women. This is evidenced by the *Spearman Rank* correlation test using the SPSS 17 program, then the obtained R count = 0.223 with a level of significant (α) = 0.05, then R table = 0.1824 which means R count> R table and get P value = 0.016 which shows that the P value <from α (P value 0.016 <0.05).

The level of knowledge of pregnant women about iron tablets in the Jatibarang Community Health Center area is mostly sufficient (50%). Most of the pregnant women were obedient to consuming Fe tablets during pregnancy (73.3%).

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