Relationship Knowledge And Attitude Of Pregnant Women Aboutanemia Incidence At The Mamboro Community Health Center

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Abstract

      Background. Anemia during pregnancy is still a major problem in the world today because it is one of the causes of maternal death or also known as "Potentional Danger To Mother And Child". The high incidence of anemia in pregnant women is multifactorial, from a pure deficiency of iron, folate, B12, the level of knowledge and attitudes of pregnant women about the incidence of anemia.

      Objective. To determine the relationship between the knowledge and attitudes of pregnant women towards the incidence of anemia at the Mamboro Health Center

Research methods. The type of research used is quantitative research with a Cross Sectional Study approach. The sample is 20 people with the sampling technique using the feeder formula.

      Research result. The results of the study with 20 respondents having good knowledge were 1 respondent (5.0%) with anemia, 8 respondents (40.0%) good knowledge not anemia and as many as 11 respondents (55.0%) lacking knowledge with anemia, Based on data analysis with Fisher's test Relationship between knowledge and The incidence of Anemia obtained p value = .000 <0.05 and the relationship between Attitude and Anemia Incidence with Fisher's test obtained p value = 0.004 <0.05 with the results of a positive attitude study of 1 respondent (5.0%) with anemia, 6 respondents (30.0%) attitude positive without anemia. And as many as 11 respondents (55.0%) have a negative attitude with anemia. 2 respondents (10.0%) had a negative attitude with no anemia.

      Conclusion. there is a relationship between knowledge and the incidence of anemia and there is a relationship between the attitudes of pregnant women and the incidence of anemia.

Keywords: Knowledge, Attitude, Anemia

1. INTRODUCTION

      The Maternal Mortality Rate (MMR) is an indicator to see the health status of women. Until now the high MMR in Indonesia is a priority problem in the health sector, besides showing the degree of public health, it also describes the level of community welfare and the quality of health services. One of the risk factors for high maternal mortality in childbirth is anemia in pregnancy. Anemia in pregnant women is the main cause of bleeding which is a major factor in maternal mortality in Indonesia (Rizka Angrainy, 2017).

      Anemia during pregnancy is still a major problem in the world today because it is one of the causes of maternal death or also known as "Potentional Danger To Mother And Child" (potential to endanger mother and child) and is a cause of chronic debility. which will have an impact on social welfare, economy, and physical health.

      Based on data from the World Health Organization (WHO), anemia in pregnant women is categorized as a global health problem with a prevalence of 29.6% in 2018, where in Indonesia itself from 2017 to 2019 the prevalence of anemia in pregnant women has increased from 43.2% to 44.2%.6 (WHO 2021 dan RISKESDAS 2018)

The high incidence of anemia in pregnant women is multifactorial, from a pure deficiency of iron, folate, B12. In addition, several factors are thought to be closely related to the incidence of anemia in pregnant women, one of which is the level of knowledge and attitudes of pregnant women about the incidence of anemia. Someone who is well-informed certainly acts well towards his health and vice versa.

Pregnant women who have a low level of knowledge about anemia, where things that cause anemia mean a lack of understanding about the meaning of anemia, things that cause anemia, signs and symptoms of anemia, things that are caused by anemia when anemia occurs. In line with research conducted by Bagu et al., 2019 and Widyarni, 2019 said that there is a significant relationship between knowledge about nutrition, food intake and adherence to taking Fe tablets with the incidence of anemia.

Research conducted by Erwin (2017) found that there is a relationship between knowledge of pregnant women about iron deficiency anemia and adherence to consuming iron tablets. Where the better the knowledge of pregnant women about iron deficiency anemia, the more obedient pregnant women take iron tablets.

The level of one's knowledge about iron tablets influences behavior in choosing foods that contain iron. This shows that knowledge plays a very important role in determining compliance in consuming iron tablets. Having knowledge about iron, pregnant women will know how to store and use iron tablets. Improving the consumption of iron tablets is one of the most important assistance that can be done to improve the quality of nutritional status in pregnant women.

The attitude of pregnant women towards iron, namely beliefs, beliefs, ideas and concepts in one object, emotional life or evaluation of an object, tendencies to act, these components together form a complete attitude, in determining this complete attitude, knowledge, thoughts , beliefs and emotions play an important role. Pregnant women who know the importance of iron tablets will always consume them until they run out.

II.   METHOD

The design of this research is quantitative analytic with a cross sectional study approach. This research took place at the Mamboro Health Center and was carried out in October 2022. The sampling technique used the Fedeer formula. The number of samples is 20 pregnant women. The instrument used was a closed questionnaire.

III.   RESEARCH RESULT
Univariate analysis

Tabel 1
Frequency Distribution of Respondent Characteristics

Characteristics	Frekuensi (*n*)	Presentase (%)
Age		
< 20	5	25
20-35	13	65
>35	2	10
Education		
Elementary school	3	15
Junior high school	9	45
Senior High School	6	30
Bachelor	2	10
Employment		
Work	6	30
Doesn't work	14	70
Anemia	12	60
not anemic	8	40

Based on the data table 1 above, it can be implemented where the highest age is 20-35 years as many as 13 respondents (65.0%), and the lowest age data is age > 35 years as many as 2 respondents (10.0%).

The highest educational background category was junior high school, namely 9 respondents (45.5%) and the lowest, S1, with 2 respondents (10.0%).

6 respondents (0.0%) worked and 14 respondents (70.0%) did not work. Anemias category as many as 12 respondents (60.0%) experienced no anemia and as many as 8 respondents (30.0%) experienced anemia.

Table 2
Frequency Distribution of Respondents Based on Knowledge

Knowledge	Frekuensi (n)	Presentase (%)
Good	9	45.0
Deficient	11	55.0
Total	20	100.0

Based on table 2, 11 respondents (55.0%) had less knowledge and 9 respondents (45.0%) had good knowledge.

Table 3 Frequency Distribution of Respondents Based on Attitudes

Attitudes	Frekuensi (n)	Presentase (%)
Positif	7	35.0
Negativ	13	65.0
Total	20	100.0

Based on table 3 as many as 13 respondents (65.0%) have a negative attitude and as many as 7 respondents (35.0%) have a positive attitude.

Bivariate analysis

Table 4.
Knowledge Relationship with Anemia Incidence

Knowledge	Anemia		Tidak Anemia		Total		P
	n	%	n	%	n	%	
Good	1	5.0	8	40.0	9	45.0	0,000
Deficient	11	55.0	0	0.0	11	55.0	
Total	12	60.0	8	40.0	20	100	100

Based on table 4 above, it shows that from the results of the study with 20 respondents having good knowledge, there was 1 respondent (5.0%) with anemia, 8 respondents (40.0%) with good knowledge, not anemia. And as many as 11 respondents (55.0%) lack knowledge about anemia.

Based on data analysis with Fisher's test, the value of p = .000 <0.005 is obtained, which means that there is a relationship between knowledge and the incidence of anemia.

Table 5.
Relationship between Attitude and Anemia Incidence

Attitude	Anemia		No anemia		Total		P
	n	%	n	%	n	%	
Positif	1	5.0 %	6	30.0%	7	35.0	0,004
Negatif	11	55.0%	2	10.0%	13	65.0	
Total	12	60.0%	8	40.0%	20	100.0	

Based on table 5 above, it shows that from the results of the study with 20 respondents, 1 respondent (5.0%) had a positive attitude with anemia, 6 respondents (30.0%) had a positive attitude with no anemia. And as many as 11 respondents (55.0%) have a negative attitude with anemia. 2 respondents (10.0%) had a negative attitude with no anemia.

Based on data analysis with Fisher's test, it was obtained p value = 0.004 <0.05, which means that there is a relationship between attitude and the incidence of anemia.

IV.   DISCUSSION
Relationship between Knowledge and Anemia

The researcher used Fisher's test technique and found p = 0.000. This means that Ha is accepted and H_o is rejected. Thus there is a relationship between knowledge and the incidence of anemia.

This research is in line with that conducted by Bagu et al., 2019 and Widyarni, 2019 saying that there is a significant relationship between knowledge about nutrition, food intake and adherence to taking Fe tablets with the incidence of anemia.

Also research conducted by Erwin (2017) that there is a relationship between knowledge of pregnant women about iron deficiency anemia towards adherence to consuming iron tablets. Where the better the knowledge of pregnant women about iron deficiency anemia, the more obedient pregnant women take iron tablets.

The level of one's knowledge is influenced by information and sources of information. Pregnant women who have less knowledge will tend to ignore their health and in the end will have actions that will be harmful to themselves. Lack of knowledge can be exacerbated by a lack of information due to wrong assumptions or perceptions about anemia. Information is one of the factors that influence one's knowledge (Notoatmodjo, 2012). Sources of information can be obtained from print media (newspapers, leaflets, posters), electronic media (television, radio, videos), family, and other sources of information. As a support, a pregnant woman must also have general knowledge regarding the prevention, treatment and treatment of anemia. Knowledge is influenced by several things, namely education, work, age, experience, culture and information.

The researcher assumes that anemia can occur due to a lack of knowledge and information about the causes of anemia.

Relationship between Attitudes and Anemia Incidence

Respondents who experienced mild anemia were 1 respondent (5.0%) with a positive attitude and as many as 11 respondents (55.0%) with a negative attitude. Meanwhile, 6 respondents (30.0%) who were not anemic had a positive attitude and 2 respondents (10.0%) had a negative attitude.

By testing using Fisher's Test technique obtained $p = 0.004$. This means that Ha is accepted and H_o is rejected. Thus there is a relationship between attitude and the incidence of anemia.

Negative attitudes are influenced by various factors such as being influenced by knowledge and awareness to improve health status that is lacking or unwilling to accept knowledge about health, this can also be due to dislike, knowing, avoiding efforts to treat hyperemesis gravidarum because it is considered normal without requiring treatment specifically so that it creates a negative attitude on the respondent.

Consumption of Fe tablets is a direct factor that causes anemia during pregnancy, because pregnant women's need for Fe increases for the formation of the placenta and red blood cells by 200-300%. Iron needed during pregnancy is 1040 mg. Of this amount, 200 mg of Fe is retained by the body during childbirth and the remaining 840 mg is lost. As much as 300 mg of iron is transferred to the fetus, with details of 50-75 mg for the formation of the placenta, 450 mg for increasing the number of red blood cells, and 200 mg lost during delivery. This amount is impossible to be fulfilled only by going through a diet. Because of this, iron supplementation needs to be implemented, even for women who are well nourished (Arisman, 2005). Pregnant women who drink less iron tablets or consume only one tablet a week have a twelvefold risk of developing anemia compared to pregnant women who consume regular tablets every day (Khatijah, 2010).

The author assumes that the better the level of knowledge of pregnant women about hyperemesis gravidarum, the more positive the attitude shown towards hyperemesis gravidarum. However, the less the level of knowledge of pregnant women about hyperemesis gravidarum, the more negative the attitude shown towards hyperemesis gravidarum. This shows that one's attitude is influenced by one's knowledge of a particular object.

V.   CONCLUSION

From the results of research that has been carried out at the Mamboro Health Center in 2022, the results obtained with the Fisher test are as follows:

1.   The results of the study show that there is a relationship between knowledge and the incidence of anemia with a value of $p = .000 > .005$

2.   The results showed that there was a relationship between attitude and the incidence of anemia with $p = .004 > .005$

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