Factors Related To the Compliance of Pregnant Mothers in Consuming Fe Tablets at Bpm Vera Year 2021

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ABSTRACT

Family support is the closest and inseparable part of the sufferer because with this support it will raise his confidence to face or manage the problems he faces better, as well as people who must obey the suggestions given by the family to support the management of the problem faced. This study aims to determine the factors related to the compliance of pregnant women in consuming Fe tablets at BPM Vera in 2021. This type of research is an analytical survey research with a cross sectional method approach. The population is all pregnant women at BPM Vera, totaling 36 pregnant women. The number of samples used were 36 people obtained by using total sampling technique. Data analysis technique using chi square. The results obtained in this study were from 36 pregnant women who received family support in compliance with consuming Fe tablets as many as 7 people (19.4%) and 29 people did not receive family support (80.6%), there is a relationship between family support and compliance of pregnant women in consuming Fe tablets with p value = 0.012 <0.05. there is a relationship between age and adherence to consuming Fe tablets, there is a relationship between education and adherence to consuming Fe tablets, there is a relationship between work and adherence to consuming Fe tablets, there is a relationship between family support and adherence to consuming Fe tablets. It is recommended for health workers to increase family support for pregnant women in consuming Fe tablets.

Keywords: Factors, Compliance, Fe Tablets

INTRODUCTION

Maternal Mortality Rate (MMR) is one indicator to see the success of maternal health efforts. MMR is the ratio of maternal deaths during pregnancy, childbirth and postpartum caused by pregnancy, childbirth, and postpartum or its management but not due to other causes such as accidents in every 100,000 live births (Kemenkes, 2018).

According to a report by the World Health Organization (WHO), it is estimated that 289,000 women died in 2013 due to complications of pregnancy and childbirth. In 2011 in the ASEAN region there were 5 countries with a Maternal Mortality Rate of 15 -199 per 100,000 live births, namely:
Brunei Darussalam (24), the Philippines (99), Malaysia (29), Vietnam (59), and Thailand (48) as well as 4 countries have a Maternal Mortality Rate of 200-499 per 100,000 live births, including Indonesia. Laos is the country with the highest maternal mortality rate in ASEAN with 470 per 100,000 live births, while the MMR in Indonesia is 359 per 100,000 live births (Kemenkes RI, 2020).

The number of maternal deaths by province in 2018-2019 where there was a decrease from 4,226 to 4,221 maternal deaths in Indonesia based on reports. In 2019, the most common causes of maternal death were bleeding (1,280 cases), hypertension in pregnancy (1,066 cases), infection (207 cases) details per province. Efforts to accelerate the decline in MMR are carried out by ensuring that every mother is able to access quality maternal health services, such as health services for pregnant women, delivery assistance by trained health workers in health care facilities, postnatal care for mothers and babies, special care and referrals in case of complications, and family planning services including postnatal family planning (Kemenkes, 2018).

**RESEARCH METHOD**

This type of research is an analytical survey research with a cross sectional method approach. where the purpose of the study is to explain the relationship between one condition and another in the same population, namely, factors related to compliance with pregnant women in consuming Fe tablets at BPM Vera in 2021.

The sample is part of the population that can be used as a representative of the total population as the object of research (Notoatmodjo, 2017). The sample in this study was 36 pregnant women at BPM Vera. The type of data used in this study consists of primary data. Primary data is data collected directly from respondents using a questionnaire.

**RESULTS AND DISCUSSIONS**

The results of the study entitled "Factors Associated with Obedience of Pregnant Women in Consuming Fe Tablets at BPM Vera in 2021." With a frequency of distribution with a sample of 30 people, the Distribution of Respondents Characteristics about Family Support for Obedience of Pregnant Women in Consuming Fe Tablets at BPM Vera in 2021 from 30 pregnant women respondents based on age. The majority are aged 20-35 years as many as 18 people (50%) and the minority is aged < 20 years as many as 8 people (22.2%), the majority of respondents with PT education as many as 14 people (38.9%) and the minority of respondents with elementary education as many as 5 people (13.9%) and the majority of respondents working as civil servants as many as 12 people (33.3%) and the minority of respondents worked as laborers as many as 6 people (16.7%).

Pregnant women who received family support for compliance with pregnant women in consuming Fe tablets were 7 people (19.4%) and 29 people did not support (80.6%). Pregnant women who were obedient in consuming Fe tablets were 8 people (22.2%) and 28 people (77.8%) were not obedient.

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<th>Table 1. Results of Bivariate Analysis of the Relationship of Family Support to Obedience of Pregnant Women in Consuming Fe Tablets</th>
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Family support is the closest and inseparable part. A person will feel happy and at ease when he gets attention and support from his family, with this support will raise his confidence to face or deal with the problems he faces better, and people who must comply with the suggestions given by the family to help manage the problems they face. Meanwhile, according to Sarafino (2018), family support is a form of social support from three parties, namely husband, family and health workers.

Compliance in taking iron tablets is the compliance of pregnant women in carrying out the recommendations of health workers to take iron tablets. Compliance with taking iron tablets was measured from the accuracy of the number of tablets consumed, the accuracy of how to take iron tablets, the frequency of consumption per day.

The results showed that from 36 pregnant women who received family support in adherence to Fe tablets, 7 people (19.4%) were obedient in consuming Fe tablets as many as 3 (8.3%) and 4 people did not comply in consuming Fe tablets. people (11.1%) and did not receive family support as many as 29 people (80.6%) with frequency of adherence in consuming Fe tablets as many as 5 people (13.9%) and 24 people not complying in consuming Fe tablets (77.8%)).

Based on statistical tests conducted with Chi-Square to determine the relationship between family support and adherence to pregnant women in consuming Fe tablets, it shows that the p value = 0.012 <0.05, so it can be said that there is a relationship between family support and adherence to Fe tablet consumption in pregnant women.

The results of this study are similar to the research conducted on the Relationship between Family Support and Obedience of Pregnant Women Consuming Fe Tablets at the Sukasari Health Center, Sumedang Regency in 2019. The results showed that there was a relationship between family support and the compliance of pregnant women in consuming Fe tablets (Lestari, 2019).

CONCLUSION

From the results of the study, it was found that 36 pregnant women who received Family Support for Obedience of Pregnant Women in Consuming Fe Tablets supported 7 people (19.4%) and 29 people did not support (80.6%). Pregnant women who were obedient in consuming Fe tablets were 8 people (22.2%) and 28 people (77.8%) were not obedient. From the results of statistical tests with Chi-Square showing p = 0.012 < 0.05, then there are factors related to the compliance of pregnant women in consuming Fe tablets at BPM Vera in 2021. It is hoped that it can add insight for respondents to further increase knowledge and compliance in consuming Fe tablets.

References