

# IMPROVING HEALTH INFORMATION OF PREGNANT MOTHERS WITH THE ISLAMIC FAMILY APPROACH THROUGH THE RECOGNITION OF ANEMIA SIGNS

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## IMPROVING HEALTH INFORMATION OF PREGNANT MOTHERS WITH THE ISLAMIC FAMILY APPROACH THROUGH THE RECOGNITION OF ANEMIA SIGNS

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### ABSTRACT

The most direct cause of maternal death is bleeding. Bleeding is divided into two categories, namely antepartum bleeding (vaginal bleeding at 28 weeks of gestation or more) and postpartum hemorrhage (bleeding that occurs within the first 24 hours after delivery). Bleeding occurs due to lack of supervision and examination during pregnancy, including prevention of anemia. Mothers who suffer from anemia in pregnancy will be very susceptible to infection and bleeding, even if the bleeding is only a little. Evidence has shown that maternal death due to bleeding is more common in women who suffer from anemia. Anemia often occurs due to iron deficiency because pregnant women have a twofold increase in iron requirements due to an increase in blood volume without expansion of plasma volume, to meet the needs of the mother (prevent blood loss during childbirth) and fetal growth. Anemia is a condition where the hemoglobin level (>11(gr/L)2), hematocrit (>0.33gr/L), and red blood cell count are below normal values. Anemia in pregnancy is the biggest public health problem that occurs worldwide, especially in developing countries, in low socio-economic groups, and has a very large influence on the quality of human resources. Anemia in pregnancy is called "Potential Danger to Mother and Child" (potentially harmful to mother and child), which contributes to the increasing prevalence of maternal mortality and morbidity. As for infants, it can increase the risk of infant morbidity and mortality, as well as increase the incidence of LBW. Given this, the problem of anemia should be a serious concern for all relevant parties, especially in health services on the front lines. So it is necessary to provide information about anemia signs, namely by providing information and giving Fe tablets, prayers for the good of the mother and fetus, stress management and consumption of green vegetables. Physical and psychological changes are sometimes quite disturbing daily life. Some pregnant women have difficulty regulating emotions because of the changes that occur.

Especially the changes in the first trimester of pregnancy. Family support for pregnant women is very important and has many benefits. Not only from husbands, but also from parents, in-laws, sisters, brothers, relatives, or even close friends.

Keywords: Pregnant women, Family, Anemia.

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## INTRODUCTION

Anemia is a problem in women in Indonesia as a result of iron and folic acid deficiency. Iron deficiency can result in a deficiency of hemoglobin (Hb), so that a person who has a deficiency of Hb caused by a lack of iron in the blood is called iron deficiency anemia. Anemia is still a health problem today and is a type of malnutrition with the highest prevalence in the world so that it is included in the Global Burden of Disease 2004 list by WHO with 1.159 billion sufferers worldwide (about 25% of the world's population). Approximately 50% of all people with anemia have iron deficiency (WHO, 2008). The impact caused by the presence of anemia in pregnant women is a variety of complications to the mother, in the form of disturbances during pregnancy (inadequate gestational weight gain, abortion, prematurity); disorders during labor (uterine atony, prolonged labor, bleeding); as well as disorders during the puerperium (susceptibility to infection and stress due to decreased immunity, low milk production); to the most severe is the death of the mother. Meanwhile, the consequences of anemia in pregnant women on the fetus are immaturity, prematurity, low birth weight, as well as malnutrition or malformations in babies born (Marmi, 2011). One of the government's efforts to reduce maternal mortality is to provide continuous midwifery care (Ningsih, 2017) starting

from pre-delivery namely Antenatal Care (ANC) at least 4 times. However, there are still many pregnant women who do not take advantage of pre-delivery services, especially in rural areas. The role of midwives in preventing postpartum hemorrhage is reducing risk factors by conducting early detection of risk factors, providing counseling to mothers to regulate the mother's healthy reproductive age (20-30 years), parity (2-3 children), pregnancy interval >2-5 years, controlling Hb levels during pregnancy ( $\geq 11\text{gr}\%$ ), and providing ANC examination at least 4 times (TM I = 1 time, TM II = 1 time, and TM III = 2 times) (Kemenkes, 2013).

ANC services in the management of anemia are a series of service activities for pregnant women which include examination or diagnosis of anemia, administration of iron tablets, and nutrition consultation. There are several causes of non-adherence to pregnant women in taking iron tablets, including health workers who have low awareness of pregnancy maintenance, the assumption that iron tablets are therapeutic treatments, and poor follow-up of ANC visits. (Winichagoon, 2002) caused by forgetfulness, fear of the baby growing big, lack of awareness about the importance of iron tablets and the threat of anemia to pregnant women and babies, as well as side effects (nausea or dizziness) caused after taking iron tablets (WHO, 2000). In

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addition, it is also known that the cause of the low adherence of pregnant women to taking iron tablets is due to side effects such as nausea and dizziness after taking iron tablets and lack of understanding about anemia and the benefits of iron tablets for pregnant women (Schultink et al., 1993). Therefore, it is necessary to convey clear information about the benefits of iron tablets and regular supervision, so as to increase the compliance of pregnant women in taking iron tablets. Consultation methods that prioritize an individual approach are considered to be more effective in increasing understanding of the benefits of iron tablets, so as to increase motivation to prevent anemia (Emawati et al., 2000). In addition to the method, it is also necessary to pay attention to supporting consultation tools such as leaflets or anemia flipcharts and the benefits of tablets for pregnant women.

Nutritional anemia is influenced by several factors including insufficient amount of iron in the diet, low iron absorption, increased need, lack of blood, poor diet, socioeconomic status, infectious diseases, low knowledge of iron, and absorption inhibitors. iron in food. A balanced diet consists of a variety of foods in appropriate amounts and proportions to meet a person's nutritional needs. An unbalanced diet will cause an imbalance of nutrients that enter the body and can lead to malnutrition or vice versa, an unbalanced consumption pattern also results in excess of certain nutrients and causes overnutrition (Wahyana, 2010). Lack of nutritional intake in pregnant women during pregnancy in addition to having an impact on the birth weight of the baby will also have an impact on pregnant women, which will cause anemia in pregnant women. To overcome this, the government has made a

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policy in the Regulation of the Minister of Health of the Republic of Indonesia Number 97 of 2014 concerning health services for the period before pregnancy, during pregnancy, childbirth, and the period after giving birth, administering contraception, and sexual health services, included in Chapter II Article 9 which contains providing nutritional supplementation for the prevention of anemia.

The hemodilution process that occurs during pregnancy and the increasing needs of the mother and fetus, as well as the lack of iron intake through food causes the Hb level of pregnant women to decrease. To prevent this incident, the needs of the mother and fetus for iron tablets must be met. Iron deficiency anemia as a result of lack of iron intake in pregnancy not only adversely affects the mother, but also adversely affects the welfare of the fetus. This is confirmed by research conducted which states iron deficiency anemia can cause fetal growth disorders and premature birth. Furthermore, in his research on the biological mechanism of the impact of iron administration on fetal growth and the incidence of premature birth, he reported that anemia and iron deficiency can cause stress for the mother and fetus as a result of the production of corticotropin-releasing hormone (CRH). Elevated CRH concentrations are a risk factor for preterm delivery, pregnancy-induced hypertension. Besides that, it also affects the growth of the fetus (Susiloningtyas, n.d.)

According to (Friedman, 2006) the family functions to carry out health care practices, namely preventing health problems in family members. The ability of the family to provide health care affects the health status of the family. The majority of families in Situbondo Regency are Muslim,

so we are trying to mix and match this community service activity with an Islamic basis which includes education related to prayers for the good of the mother and fetus. The role of the family in caring for and maintaining the health of babies and pregnant women is very significant, the role of health workers is very significant to socialize the importance of doing Antenatal Care during pregnancy to families, especially husbands to provide support to their wives to regularly visit Antenatal Care.

Seeing the background above, it becomes the basis for implementing the implementation of Improving Maternal Health Information with a Family Approach Through Recognition of Anemia Signs which consists of information on the importance of Fe table, food consumption and stress management of pregnant women.

## OBJECTIVES

### *General Purpose*

After the implementation of this community service activity, it is hoped that the target of the activity can understand and apply related to the prevention of anemia as one of the antenatal care activities.

### *Special Purpose*

In accordance with the formulation of the problem stated above, the objectives to be achieved in this service activity are:

1. Increase knowledge, change attitudes and behavior of mothers to understand about antenatal care so that mothers and children are safe and healthy during pregnancy and after childbirth;
2. Reducing the incidence of anemia in pregnant women;
3. Increase knowledge of pregnant women and their families about signs of anemia

in order to anticipate the incidence of anemia.

## PLAN OF ACTION

### *Strategy Plan*

The targets that can be given to solve the problems that have been described in problem identification are as follows:

1. The first problem: Lack of knowledge of pregnant women about pregnancy care, especially the consumption of nutritious food, stress management and consumption of Fe tablets. The way to overcome this is to provide counseling to pregnant women and their families so that they know;
2. The second problem: The number of pregnant women in the Sumberejo area is increasing due to the majority of reproductive age and the absence of regular Hb checks to monitor Hb values in pregnant women. The solution given is to try to be closer to the community, especially pregnant women to always control their pregnancy and to reduce anemia in pregnant women.

### *Implementation*

The main point of this activity is anemia signs with the target of all pregnant women. The purpose of the Implementation of Improving Maternal Health Information with a Family Approach Through Recognition of Anemia Signs is to increase knowledge, change attitudes and behavior of mothers so that they understand about antenatal care so that mothers and children are safe and healthy during pregnancy and postpartum, and reduce the incidence of anemia in pregnant women, increase knowledge of pregnant women and families about signs of anemia in order to anticipate the incidence of anemia.

*Setting*

This community service activity was carried out in the Sumberejo area in November 2019.

*Target*

The target of this activity is pregnant women with a gestational age of 28-38 weeks in the Sumberejo area as many as 19 pregnant women.

**RESULTS AND DISCUSSION**

Implementation of Hb level examination when first contact with pregnant women and then periodic monitoring of consumption of Fe tablets and counseling about consumption of nutritious vegetables and stress management is carried out.



**Figure 1.** Taking Blood Sampling to Measure Hemoglobin Levels before the Implementation of Community Service Activities.

**Table 1.** Classification of Anemia based on Hemoglobin Levels before Implementation of Community Service Activity.

Anemia Classification	Amount
1. Very light (Hb 10 gr% -13 gr%)	4
2. Light (Hb 8 gr% -9 gr%)	7
3. Currently (Hb 6 gr% -7gr%)	8
4. Heavy (Hb < 6 gr%)	0
Total	19



**Figure 2.** Implementation of Health Counseling to Pregnant Women who are the Target of Community Service Activities.



**Figure 3.** Blood Sampling for Measuring Hemoglobin Levels after Implementation of Community Service Activities.

**Table 2.** Classification of Anemia based in Hemoglobin Levels after Implementation of Community Service Activity.

Anemia Classification	Amount
1. Very light (Hb 10 gr% -13 gr%)	9
2. Light (Hb 8 gr% -9 gr%)	10
3. Currently (Hb 6 gr% -7gr%)	0
4. Heavy (Hb < 6 gr%)	0
Total	19

From the results of the pre and post-test <sup>1</sup> meeting 2 there was an increase in the level of Hb knowledge of pregnant women. Based on the results of the examination, pregnant women and their families have been able to apply the prevention of anemia in pregnant women.

<sup>1</sup> The provision of information related to the condition of the mother and fetus can be through a module so that pregnant women

can re-study. Based on research results (Ningsih, 2020) that with the module it can increase the knowledge of pregnant women regarding the condition of themselves and the baby they are carrying and get other information. In addition, there is also an educational media in the form of a LBW risk detection module for pregnant women that can increase the knowledge of pregnant women (Ningsih, 2021b).

Quality relationships between midwives and women are the basis of services provided during pregnancy, childbirth and the puerperium. Quality relationships incorporate all aspects of midwifery care. Several studies have shown that the trusting relationship between midwives and women includes the emotional aspects that are related between the two, especially in the postpartum period, which is an important factor of satisfaction for women after childbirth. Efforts to increase women's satisfaction in quality midwifery services have become part of global efforts to fulfill every woman's right to obtain the best midwifery services during pregnancy, childbirth and the puerperium. (Sandall, 2012). The role of midwives is very important in providing support and a sense of meaning in the relationship between midwives and women in women's center care. When a conducive relationship is fostered there will be mutual respect between the midwife and the woman. The key factor is the reciprocal relationship of giving and receiving. It is evident that women also value the relationship between midwives and women. Meaningful relationships with women are also important for midwives' job satisfaction (Ningsih, 2021a) Besides that, midwives and women also need to build good relationships in order to create a solid partnership (Dewi Andariya Ningsih, 2015)

## CONCLUSION

There is an increase in hb levels so that previously there was an increase in knowledge about anemia in pregnant women. The importance of follow-up activities so that these activities can be carried out again in the future with different pregnant women participants. There is interaction and exchange of experiences between pregnant women or with health workers.

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