

FACTORS AFFECTING PREGNANT WOMEN IN CONSUMPTING FE TABLETS IN PAYA PEUNAGA VILLAGE MEREUBO DISTRICT, WEST ACEH DISTRICT

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Abstract

Iron is one of the important minerals needed during pregnancy. Pregnant women who do not comply with taking Fe tablets may have the potential for anemia. This research aims to determine the factors that influence the compliance of pregnant women in consuming Fe tablets in Paya Peunaga Village, Meureubo District, West Aceh Regency. The type of research used is an analytical survey with quantitative methods, cross sectional design. The population of all pregnant women in this study was 71 people with a total sampling of 71 people. Data collection uses primary data by distributing questionnaires. The research results showed that there was no effect of age on the consumption of Fe tablets in pregnant women, $p\text{-value } 0.307 > \alpha (0.05)$. There is an influence of education on the consumption of Fe tablets in pregnant women $p\text{-value } 0.037 < \alpha (0.05)$. There is an influence of work on the consumption of Fe tablets in pregnant women $p\text{-value } 0.023 < \alpha (0.05)$. There is an influence of knowledge on the consumption of Fe tablets in pregnant women $p\text{-value } 0.002 < \alpha (0.05)$. There is no effect of parity on consumption of Fe tablets in pregnant women $p\text{-value } 0.115 > \alpha (0.05)$. Maternal knowledge is the dominant factor influencing consumption of Fe tablets in pregnant women ($p=0.012$, $OR=2.905$). It is hoped that it can increase pregnant women's knowledge about the importance of consuming Fe tablets regularly so as to reduce the prevalence of anemia.

Keywords: *Age, Education, Fe Consumption, Knowledge, Occupation, Parity*

1. INTRODUCTION

Anemia is still the main indirect cause of obstetric maternal deaths today. Pregnancy-related anemia may have a negative impact on the mother during pregnancy, delivery, the postpartum period, and the postpartum period. Anemia can cause a number of problems, including longer labor due to uterine inertia, postpartum hemorrhage due to uterine atony, shock, and infections (both intrapartum and postoperative). Iron (Fe) deficiency in pregnant women can cause disruption or obstacles to the development of the body and brain cells of the fetus. Iron (Fe) deficiency during pregnancy can result in miscarriage, low birth weight (LBW) newborns, bleeding before and after birth, and even death of the mother and baby. (Dep.Kes.RI, 2008). The Indonesian government is trying to create a program to provide free Fe pills to all pregnant women to reduce the incidence of anemia and prevent bleeding problems after giving birth, considering the high incidence of anemia in this country. To prevent this, every pregnant woman is expected to receive a minimum of 90 blood supplement tablets (TTD) during pregnancy. This amount is thought to be able to prevent mothers from experiencing Fe deficiency which can cause anemia in pregnant women (RI Ministry of Health, 2017).

However, the fact is that in Indonesia there are still many pregnant women who do not get Fe. The 2016 PSG results showed that only 40.2% of pregnant women received TTD of at least 90 tablets, lower than the 2016 national target of 85% (RI Ministry of Health, 2017). In 2021 in Aceh Province, the percentage of giving Fe tablets to pregnant women is 81%, which means it has not reached the national target of 85%. The highest number of pregnant women who received Fe was in

Lhokseumawe City at 96% and the lowest was in Aceh Singkil Regency at 63% while West Aceh Regency was in the seventh lowest at 76%. (Dinkes, 2021).

Data for August 2023 from the West Aceh Health Service from a total of 13 sub-districts in West Aceh Regency, the Meureubo sub-district health center gave Fe-90 to pregnant women, namely 63 people (9%). In Paya Peunaga village, the percentage of pregnant women who received blood supplementation tablets (TTD) of at least 90 tablets in September 2023 was 59 people (89.39%).

According to a report from the Meureubo Community Health Center in 2022, there were 693 pregnant women who made their 1st visit, 558 (81%), and 530 (76%) who made their 4th visit. Meanwhile, in 2023 the data only reaches April, namely, there are 700 pregnant women who made their 1st visit as many as 199 (28%) and 153 (22%) who made their 4th visit. Apart from that, from January to May 2023 the number of pregnant women is 700 people. In Paya Peunaga village, there were 3 T1 pregnant women who were anemic with Hb levels of 8-11 mg/dl, 1 T1 pregnant woman who was anemic with Hb levels <8 mg/dl, 3 T3 pregnant women who were anemic with Hb levels of 8 -11 mg/dl and 3 T3 pregnant women who were anemic with Hb levels <8 mg/dl.

Based on an initial survey conducted by researchers by interviewing 5 pregnant women from Paya Peunaga village, who came to visit the Meureubo Community Health Center to have their womb checked. Almost (60%) pregnant women said that it is not every day that pregnant women do not take Fe tablets because they forget and are lazy to take Fe tablets because of the fishy smell of the medicine.

Based on the phenomenon in the background above, researchers are interested in conducting research on "Factors that Influence Pregnant Women in Consuming Fe Tablets in Paya Peunaga Village, Mereubo District, West Aceh Regency".

1) Knowledge

Knowledge is the result of human curiosity about anything through certain methods and with certain tools. This knowledge is of various types and nature, some are direct and some are indirect, some are impermanent (changes), subjective and specific, and some are permanent, objective and general. The type and nature of this knowledge depends on the source and with what means and tools the knowledge is obtained, and there is true knowledge and there is false knowledge. Of course what is desired is true knowledge (Darsini et al., 2019).

Knowledge is the result of knowing, and this occurs after people sense a particular object. Sensing occurs through the five human senses, namely the senses of sight, hearing, smell, taste and touch. Most human knowledge is obtained through Notoatmodjo's eyes and ears (Darsini et al., 2019).

According to (Budiman & Riyanto, 2013) A person's knowledge is determined according to the following things:

- a. Brobot I: knowledge and understanding stage.
- b. Brobot II: stage of knowing, understanding, application and analysis
- c. Brobot II: stages of knowledge, understanding, application, analysis, synthesis and evaluation

2) Education

Education is a system that must be implemented in an integrated manner with other existing systems in order to achieve the stated goals of improving the quality of human life in all aspects of life. Judging from the process, education will take place continuously along with the dynamics of changes in the social and cultural settings of society from time to time according to (Syafe'i, 2015) in (Student et al., 2021).

Education level is a basic stage that is determined based on the level of development of students, the goals to be achieved and the abilities developed (UU No. 20,

2003). The level of education is the stage of education that is determined based on the level of development of students, the goals to be achieved and the will to be developed. A higher level of education will provide more information and implement it in daily behavior and lifestyle. So with a high level of education it will be easier to understand the use of accounting information(Nirwana & Purnama, 2019).

3) Jobjaan

PeWork is a necessity that must be done primarily to support one's life and family life. Work is generally an activity that takes up time and can provide experience and knowledge both directly and indirectly. The work environment can form knowledge due to the exchange of information between friends in the work environment(Wawan & Dewi, 2013).

4) Parity

Parity is the number of children born to a mother, either alive or stillborn. The higher the parity, the higher the maternal mortality and the risks that will occur both during pregnancy and the postpartum period(Anggraini et al., 2018).

Parity classification according to(Varney & Helen, 2006)The term parity is divided into three types, including:

- a) Primiparity is the birth of a live baby for the first time to a woman.
- b) Multiparity or pleuriparity is the birth of two or more live babies to one woman.
- c) Grande-multiparity is the birth of 5 or more children to one woman.

5) Age

The mother's age to experience a good pregnancy and childbirth is 20-35 years because it is the ideal age and there is no risk, while women who are <20 years old or too young, the development and function of their reproductive organs are not yet optimal and their emotional and psychological maturity is low. less so that complications occur more often during pregnancy. On the other hand, when a mother is too old, there is a decline in the physiological function of the reproductive organs in general, so that adverse consequences for the baby and pregnant mother more often occur, so that the age of <20 or >35 years is a vulnerable age and is at risk of pregnancy.(Anggraini et al., 2018).

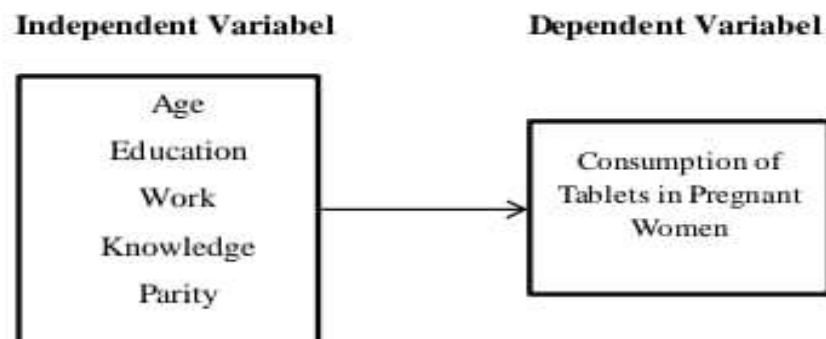
6) Consumption of Fe Tablets

Compliance in consuming iron tablets is the obedience of pregnant women to carry out recommendations from health workers to consume iron tablets. Compliance with consuming iron tablets is measured by the accuracy of the number of tablets consumed, the accuracy of how to consume iron tablets, and the frequency of consumption per day. Iron supplementation or giving Fe tablets is an important effort to prevent and treat anemia, especially iron deficiency anemia. Iron supplementation is an effective method because the iron content is supplemented with folic acid which can prevent anemia due to folic acid deficiency. Pregnant women's non-compliance with taking iron tablets can have a greater chance of developing anemia according to Afnita, 2004 in(Purwanti & Amin, 2016).

Medication adherence is a term used to describe a patient's behavior in taking medication correctly, including dose, time and frequency. Meanwhile, patient compliance in consuming iron is pregnant women who consume iron tablets every day, taking at least 90 tablets every day in a row during pregnancy.(RI Ministry of Health, 2014).

7) Conceptual Framework

Based on the problem formulation and research objectives, the researcher developed the following conceptual framework:



8) Hypothesis

- a) There is an influence of age on the consumption of Fe tablets in pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.
- b) There is an influence of education on the consumption of Fe tablets among pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.
- c) There is an influence of work on the consumption of Fe tablets in pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.
- d) There is an influence of knowledge on the consumption of Fe tablets among pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.
- e) There is an influence of parity on the consumption of Fe tablets among pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.

2. IMPLEMENTATION METHOD

1) Research sites

The location of this research is Paya Peunaga Village, Mereubo District, West Aceh Regency.

2) Population and Sample

Population

Population is a generalized area consisting of objects/subjects that have certain characteristics determined by researchers to be studied and then conclusions drawn. The population is all the subjects studied. The population in this study were all pregnant women in the second and third trimesters of pregnancy in Paya Peunaga Village, Mereubo District, West Aceh Regency, namely 71 people.

Sample

According to (Notoatmojo, 2012), the method of sampling in this research was total sampling, namely the technique for determining the sample as a whole. So the number of samples selected was 71 pregnant women with the second and third trimesters of pregnancy in Paya Peunaga Village, Mereubo District, West Aceh Regency.

3) Data analysis method

Data analysis used the Chi-Square test to see the influence of variable X on variable Y and the Logistic Regression test to see which factors most influence the consumption of Fe Tablets.

3. RESULTS AND DISCUSSION

3.1 RESULTS

A. Univariate Analysis

Table 4.2 Frequency Distribution of Respondents Based on Mother's Age

Age	Frequency	Percent (%)
At Risk (<20 or >35 Years)	13	18.3
No Risk (20->35 Years)	58	81.7
Total	71	100

Based on Table 4.2, it can be seen that most respondents are not at risk due to age 20->35 years as many as 58 people (81.7%), while the fewest respondents were at risk due to age <20 or >35 year as many as 13 people (18.3%).

Table 4.3 Frequency Distribution of Respondents Based on Mother's Education

Education	Frequency	Percent (%)
Elementary (Elementary, Middle School)	25	35.2
Intermediate (High School)	34	47.9
High (Graduated College)	12	16.9
Total	71	100

Based on table 4.3, it can be stated that there were 34 respondents with high school education (47.9%). Meanwhile, the fewest respondents are those with education High (graduated from tertiary education) as many as 12 people (16.9%).

Table 4.4 Frequency Distribution of Respondents Based on Mother's Occupation

Work	Frequency	Percent (%)
Work	36	50.7
Doesn't work	35	49.3
Total	71	100

Based on table 4.4 above, it can be stated that there are 36 respondents who work (50.7%). Meanwhile, 35 respondents (49.3%) did not work.

Table 4.5 Frequency Distribution of Respondents Based on Mother's Knowledge

Knowledge	Frequency	Percent (%)
Less (<56%)	39	54.9
Fair (56-75%)	14	19.7
Good (76-100%)	18	25.4
Total	71	100

Based on table 4.5, it can be stated that respondents have knowledge Less (<56%) as many as 39 people (54.9%), respondents who have knowledge Enough (56-75%) as many as 14 people (19.7%) and respondents who have knowledge Good (76-100%) as many as 18 people (25.4%).

Table 4.6 Frequency Distribution of Respondents Based on Mother's Parity

Parity	Frequency	Percent (%)
At risk (Primipara or Grandemultipra)	27	38.0
No Risk (Multipra)	44	62.0
Total	71	100

Based on table 4.6, it can be stated that respondents who At risk (Primipara or Grandemultipra) as many as 27 people (38.0%). Meanwhile, respondents who were not at risk (Multipra) were 44 people (62.0%).

Table 4.7 Frequency Distribution of Respondents Based on Fe Tablet Consumption

Consumption of Fe Tablets	Frequency	Percent (%)
Not obey	43	60.6
Obedient	28	39.4
Total	71	100

Based on table 4.7, it can be stated that respondents who not obey as many as 43 people (60.6%). Meanwhile, 28 respondents complied (39.4%).

B. Bivariate Analysis (Chi Square)

Table 4.8 Summary of Bivariate Analysis

Variable	P (Value)	Description
Age	0.307	No effect
Education	0.037	Influential
Work	0.023	Influential
Knowledge	0.002	Influential
Parity	0.115	No effect

Based on the table above, a summary of the results of the research bivariate analysis shows that there is an influence of education, employment and knowledge variables on the consumption of Fe tablets with a p-value < α (0.05). Apart from that, there was no influence of age and parity variables on the consumption of Fe tablets with a p-value > α (0.05) in pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency.

C. Multivariate Analysis (Logistic Regression)

Table 4.13 Multivariate Candidate Selection of Fe Tablet Consumption of Pregnant Women in Consuming Fe Tablets in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency

Variable	Consumption of Fe Tablets					
	Model 1	Model 2	Model 3	Model 4	Model 5	Model 6
	OR 95%CI P	OR 95%CI P	OR 95%CI P	OR 95%CI P	OR 95%CI P	OR 95%CI P
Age	2,027	2,132				
Risky	(0.359-	(0.386-				
No Risk	11.447)	11.788)				
	0.424	0.385				

Education	1,243					
Base	(0.447-3.457)					
Intermediate	0.677					
Tall						
Work	10,838	11,097	10,581	8,442	3,562	
Work	(2,511-	(2,560-	(2,464-	(2,092-	(1,303-	
Doesn't work	46,786)	48,133)	45,430)	34,063)	9,739)	
	0.001	0.001	0.002	0.003	0.003	
Knowledge	3,785	4,136	4,596	4,456		2,905
Not enough	(1,477-9,702)	(1,783-	(2,008-	(1,980-		(1,554-
Enough	0.006	9,718)	10,519)	10,025)		5,430)
Good		0.001	0,000	0,000		0.001
Parity	4,269	4,388	4,024			
Risky	(1,124-	(1,157-	(1,089-			
No Risk	16,281)	16,644)	14,870)			
	0.033	0.030	0.037			
R2	0.469	0.467	0.457	0.394	0.118	0.221

3.2 DISCUSSION

A. Bivariate Analysis

a) Effect of Age on Fe Tablet Consumption in Pregnant Women

The results of statistical tests showed no effect of age on the consumption of Fe tablets in pregnant women Paya Peunaga Village Area, Meureubo District, West Aceh Regency. These results indicate that the age at risk of pregnant women has no effect on the consumption of Fe tablets in pregnant women and vice versa. Pregnant women of age at risk may not always have the opportunity to be disobedient and vice versa, pregnant women of age who are not at risk may not always have the opportunity to comply with taking Fe Tablets.

The research results are not in line with research (Anggraini et al., 2018) also said that the mother's age to experience a good pregnancy and childbirth is 20-35 years because it is the ideal age and there is no risk, while women who are < 20 years old or too young, the development and function of their reproductive organs are not yet optimal and their emotional maturity and poor mental health so complications occur more frequently during pregnancy. On the other hand, when a mother is too old, there is a general decline in the physiological function of the reproductive organs, so that adverse consequences for the baby and pregnant mother occur more often, so that the age of <20 or >35 years is an age that is vulnerable and at risk of pregnancy.

b) Effect of Education on Fe Tablet Consumption in Pregnant Women

The results of statistical tests show the influence of education on the consumption of Fe tablets among pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency. Based on the results of observations made by researchers, the education possessed by pregnant women greatly influences attitudes and behavior which have an impact on regular consumption of Fe tablets. This is because the education of pregnant women influences the information that pregnant women have, such as information about the importance of consuming Fe tablets.

This is in line with research (Hariati & Agustini, 2013) The most recent education received by the mother, the education with the largest respondents was at the level of education of mothers who did not go to school as many as 12 people (40%), followed by mothers who had graduated from high school, academy and tertiary education as many as 10 people (33.3%) and lastly mothers with an education level of completing elementary and middle school as many as 8 people (26.7%). It can be seen that the research results show

that the highest educational background of pregnant women is not going to school, which is what triggers or is one of the background factors for a person's attitude. The higher a person's level of education, the higher the level of understanding and the easier it is to accept new information that is applied in life. A low level of education causes difficulty in absorbing new information or ideas, whereas someone who has a high level of education will be more open to accepting new ideas.

c) Effect of Work on Consuming Fe Tablets in Pregnant Women

The results of statistical tests show the influence of work on the consumption of Fe tablets among pregnant women in the Paya Peunaga Village Area, Meureubo District, West Aceh Regency. The results of interviews with pregnant women show that most pregnant women have jobs including traders, teachers, farmers, seamstresses, laborers and civil servants. Respondents' busy work lives greatly influence behavior that affects the health of pregnant women and they have less time to find out about their own health. This shows that the work of pregnant women has an impact on the consumption of Fe tablets in pregnant women.

The results of this research are in line with this opinion (Angraini et al., 2018), Pregnant women who do not work should have more time to pay attention to their health during pregnancy, one of which is being obedient in consuming iron (Fe) tablets which can affect the health of themselves and their babies. Besides that, (Daulay, 2007) also said that doing heavy work while pregnant would be one of the causes of reducing the body's ability to meet the nutritional needs of the mother and fetus she is carrying. Energy reserves are depleted to fulfill the activities of pregnant women. The energy that should be obtained from consuming food turns out not to be obtained, because pregnancy is considered normal.

d) The Effect of Knowledge on Consuming Fe Tablets in Pregnant Women

The results of statistical tests show the influence of knowledge on the compliance of pregnant women in consuming Fe tablets in the Paya Peunaga Village area, Meureubo District, West Aceh Regency. This is supported by the results of questionnaire calculations which show that the question most often answered incorrectly by pregnant women is about the time to consume Fe tablets, who answered that consuming Fe tablets in the morning to reduce nausea. Due to a lack of understanding by pregnant women about the right time to consume Fe Tablets, many pregnant women do not comply with taking Fe Tablets because they often feel nauseous. You should consume Fe tablets at night before bed to avoid nausea and not consume them together with tea, coffee and milk which can inhibit iron absorption.

The results of this research are in line with research conducted by (Mardhiah & Marlina, 2019) obtained, knowledge based on table 2 results of cross tabulation between knowledge and the environment of Fe tablet consumption in pregnant women obtained good knowledge of 43 respondents (59.7%), good knowledge of 17 respondents (23.6%), and compliant knowledge of 17 respondents. (23.6%) and 26 respondents (36.1%) with knowledge of non-compliance. On the other hand, 4 respondents (5.6%) were in the compliant category, 25 respondents (34.7%) were in the non-compliant category, and 29 respondents (40.3%) stated they did not understand. The chi square statistical test obtained a p value of $0.036 < \alpha$ value of 0.05, which indicates that the respondent's knowledge influences the compliance of pregnant women in taking Fe pills.

The results of this research are also in line with the opinion of (Notoadmojo, 2010) in (Hendrawan et al., 2019) says that knowledge or cognitive is a very important domain for the formation of a person's actions (overt behavior). From experience and research it turns out that behavior is based on knowledge.

e) Effect of Parity on Fe Tablet Consumption in Pregnant Women

The results of statistical tests showed no effect of parity on the consumption of Fe tablets in pregnant women Paya Peunaga Village Area, Meureubo District, West Aceh Regency. From the results of interviews conducted by researchers with several pregnant women, it can be concluded that there are primiparous and grandemultiparous pregnant women who are compliant and non-compliant in consuming Fe tablets and multiparous pregnant women are compliant and non-compliant in consuming Fe tablets. It can be concluded that respondents who are at risk (primipara or grandemultipara) do not necessarily have low levels of Fe tablet consumption. On the other hand, respondents who are not at risk (multipre) do not necessarily have a high level of Fe tablet consumption.

This is not in line with the opinion of (Anggraini et al., 2018) meny. However, the higher and lower the parity, the higher the risk that will occur during pregnancy. This means that mothers with primiparous or grandemultiparous parity will be more at risk of not complying with Fe consumption because primiparous mothers have no previous experience regarding Fe consumption and grandemultiparous mothers have repeatedly consumed Fe, resulting in boredom or boredom in consuming Fe compared to multiparous mothers who are parities. which is ideal and not risky.

B. Multivariate Analysis

The statistical test results are based on the OR knowledge value, which is equal to 2.905, it can be concluded that knowledge is the factor that most influences the consumption of Fe tablets in pregnant women in Paya Peunaga Village Area, Meureubo District, West Aceh Regency. Pregnant women's knowledge has opportunities 2,905 times more non-compliant with consuming Fe tablets compared to other variables. These results indicate that the knowledge a person has greatly influences changes in the health behavior of pregnant women, especially in consuming Fe tablets, because pregnant women with low knowledge do not know the importance of consuming Fe Tablets and do not know the impact that occurs if pregnant women are not compliant in consuming Fe Tablets. From this, pregnant women who have low knowledge are likely to be disobedient in consuming Fe tablets.

4. CONCLUSION

From the results of research conducted on 71 pregnant women regarding the factors that influence pregnant women in consuming Fe in the Paya Peunaga Village area, Meureubo District, West Aceh Regency and the data processing carried out, the following conclusions can be drawn:

1. There is no influence between age and consumption of Fe tablets in pregnant women in Paya Peunaga Village, Meureubo District, West Aceh Regency. Proven by the results of the Chi-Square test, the p-value was obtained $0.307 > \alpha (0.05)$.
2. There is an influence between the level of education and the consumption of Fe tablets among pregnant women in Paya Peunaga Village, Meureubo District, West Aceh Regency. Proven by the results of the Chi-Square test, the p-value was obtained $0.037 < \alpha (0.05)$.
3. There is an influence between work and the consumption of Fe tablets in pregnant women in Paya Peunaga Village, Meureubo District, West Aceh Regency. Proven by the results of the Chi-Square test, the p-value was obtained $0.023 < \alpha (0.05)$.
4. There is an influence between the level of knowledge and the consumption of Fe tablets among pregnant women in Paya Peunaga Village, Meureubo District, West Aceh Regency. Proven by the results of the Chi-Square test, the p-value was obtained $0.002 < \alpha (0.05)$.

5. There is no influence between parity and consumption of Fe tablets in pregnant women in Paya Peunaga Village, Meureubo District, West Aceh Regency. Proven by the results of the Chi-Square test, the p-value was obtained $0.115 > \alpha (0.05)$.
6. The knowledge factor is the dominant factor influencing the consumption of Fe tablets in pregnant women. Pregnant women's knowledge has a 2.905 times higher chance of not adhering to consuming Fe tablets compared to other variables.

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