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EARLY DETECTION AND INTERVENTIONS TO PREVENT ANEMIA IN PREGNANT WOMEN AT POSYANDU APEL

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Abstract

The coverage of pregnant women without anemia at Posyandu Apel I and II in 2023 is 60%, while the expected target for pregnant women without anemia is 90%. In the field, it shows that pregnant women with anemia are 40%. One of the solutions to overcome anemia in pregnant women is by carrying out early detection and providing educational interventions. This community service aimed to educate pregnant women about the importance of paying attention to hemoglobin levels during pregnancy. This community service works by collecting data, determining problem priorities, checking HB levels on 15 pregnant women, preparing educational materials, conducting an extension directly to the group of pregnant women with anemia at Posyandu Apel 2, and giving blood-boosting vitamin tablets. An evaluation was carried out by discussion or question and answer. Based on the results, the implementation of this community service extension was attended by 15 pregnant women with anemia and 25 additional participants including lecturers, midwives, and cadres. This activity was carried out together with the team. The participants were very active during the activity with a question-and-answer session.

Keywords: Anemia, Early detection, Intervention, Pregnant women

INTRODUCTION

Iron deficiency anemia is anemia caused by a lack of iron in the body, so the need for iron (Fe) for erythropoiesis is insufficient (Nurbadriyah, 2019). Iron deficiency is the most common cause of anemia in pregnancy (Wulandari et al., 2021). Anemia is defined as a decrease in blood levels below normal, which is in pregnant women Hb 11gr/% (Milah & Ana, 2019). The Indonesian government's program to prevent anemia in pregnant women is to provide 90 tablets of Fe supplements during pregnancy. However Sivanganam & Weta (2017) many pregnant women refuse or do not comply with this recommendation for various reasons so the prevalence of anemia in pregnant women is still high (Indrayani et al., 2023). Many efforts have been made by the government to overcome anemia in pregnant women, but the results are still unsatisfactory as many pregnant women refuse or do not comply with this recommendation for various reasons so the prevalence of anemia in pregnant women is still high. This can be proven by the results of Riskesdas (National Basic Health Research) in 2018 showing that the number of pregnant women with anemia is 48.9% while the proportion of pregnant women who receive iron tablets is 73.2%. Among pregnant women who receive iron tablets, 61.9% consume the iron tablets for <90 days and 38.1% consume the iron tablets for ≥ 90 days (Aprisia & Simbolon, 2022).

Besides giving iron tablets, it is also necessary to provide an extension to pregnant women to increase their knowledge about iron tablets. Knowledge is the result of knowing and occurs after people sense a certain object through the senses, namely the senses of sight, sound, smell, taste, and touch.

Most of human knowledge is obtained through the eyes and ears (Notoadmodjo, 2012). Knowledge is a factor related to the attitude of pregnant women in consuming iron tablets (Rahman, 2020). Knowledge of the benefits of something can influence the intention to participate in an activity (N. Rahmawati, 2021). Knowledge of the advantages and disadvantages of something will form an attitude, then from that attitude, it will determine whether the activity will be carried out or not (Yuliawati & Tika Veriyani, 2022).

This community service aimed to carry out early detection and interventions in pregnant women to prevent anemia.

By carrying out community service activity at Posyandu (Integrated Services Post) Apel 2, it is hoped that it could help pregnant women with anemia understand the importance of increasing hemoglobin levels during pregnancy, and know about non-pharmacological treatment of anemia.

IMPLEMENTATION METHOD

The location for this community service was in Posyandu (Integrated Services Post) Apel, Pasar Minggu, South Jakarta. The time required for community service is 3 weeks. The tools used are educational materials in the form of PowerPoint presentation and mobile phones. This community service works by collecting data, determining problem priorities, checking HB levels on 15 pregnant women, preparing educational materials, conducting an extension directly to the group of pregnant women with anemia at Posyandu Apel 2, and giving blood-boosting vitamin tablets. An evaluation was carried out by discussion or question and answer. Based on the results, the implementation of this community service extension was attended by 15 pregnant women with anemia and 25 additional participants including lecturers, midwives, and cadres. This activity was carried out together with the team.

RESULTS AND DISCUSSION

Planning Stage

The planning stage began with submitting a proposal. The next step was to issue an activity permit. Before starting the activity, the community service implementation team made an initial visit to the location of the activity to identify pregnant women at Posyandu Apel so they can determine the number of participants, prepare a place and facilities for carrying out the activity, prepare materials, prepare extension aids, prepare participants by distributing event invitations to pregnant women, and make plans for implementing the activity.

Implementation Stage

The implementation of community service activity began with preparing educational materials in the form of PowerPoint materials. Next, the community service implementation team carried out

early detection by checking HB levels of pregnant women and then carried out interventions in the form of extension and giving blood-boosting vitamin tablets (iron tablets).

Evaluation Stage

After the implementation phase was complete, an evaluation was carried out to assess how big the impact of the results of the implementation of community service activity is. The evaluation was carried out by discussion or question and answer. Based on the results of the implementation of community service extension, 40 participants attended until the end of the activity. This activity was carried out together with the team. The participants were very active during the activity with a questionand-answer session. The evaluation was carried out by interviews with pregnant women to find out the effectiveness before and after the interventions was given/provided. This community service activity has been well organized and running smoothly according to the activity plan that has been prepared. Of the 15 pregnant women who took part in this community service activity, after the extension about anemia in pregnant women was given, 85% were able to explain the meaning of anemia in pregnant women, 75% were able to describe the causes of anemia in pregnant women, 70% were able to mention risk factors for anemia in pregnant women, 80% were able to inform signs and symptoms of anemia in pregnant women, 70% were able to explain the impact of anemia on pregnant women, and 75% were able to describe the treatment/prevention of anemia in pregnant women. As a result, these pregnant woman participants are willing to consume iron through a nutritious and balanced food composition as needed so they are able to prevent and recognize high risks or complications of anemia in early pregnancy.

Education on the prevention and treatment of anemia in pregnant women is an effort to convey information about the importance of preventing and treating anemia which can increase knowledge and attitude so it is easier for them (pregnant women) to behave healthily, prevent anemia, and—if anemia occurs, they can treat it immediately (Mamuroh & Nurhakim, 2019). Health education provided by health workers can change behavior regarding the prevention of anemia during pregnancy. Health education in the form of extension will provide new knowledge to pregnant women, then generate an inner response in the form of pregnant women's attitude towards materials about anemia which are known/understod. Finally, stimuli arise, namely materials about anemia in the form of action against or in connection with known stimuli or materials about anemia (E. Rahmawati et al., 2023). Health workers are expected to provide intensive extension about anemia using information media such as leaflets or pamphlets for every pregnant woman to prevent anemia in pregnant women, so they (pregnant women) can go through the pregnancy process in a healthy manner and the fetus can grow and develop perfectly.





Figure 1 Photo of early detection in pregnant women



1. Photo of Providing education and interventions to pregnant women



Figure 2 Photo of evaluation of activity and giving door prizes





Figure 3 Photo of giving memento to midwives and cadres

CONCLUSION

Based on the results of community service activity carried out, it can be concluded that early detection extension and anemia prevention interventions are useful for increasing hemoglobin levels in pregnant women.

Community service activities in the prevention and treatment of anemia in pregnant women are carried out through the planning, implementation and evaluation stages. At the planning stage, proposals are submitted and activity permits are issued. The implementation team conducted an initial visit to identify pregnant women and prepare everything needed. At the implementation stage, educational materials were prepared and early detection was carried out by checking HB levels and interventions in the form of expanding and administering iron tablets. At the evaluation stage, an impact assessment of the activity was carried out by means of discussions and interviews. The evaluation results show an increase in pregnant women's knowledge about anemia and the desire to prevent it.

Health workers are expected to be able to provide intensive expansion of anemia by using information media such as leaflets or brochures to every pregnant woman to prevent anemia and to have a healthy pregnancy so that the fetus can grow and develop properly.

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