
RELATIONSHIP BETWEEN THE NUTRITIONAL STATUS OF PREGNANT WOMEN AND THE INCIDENCE OF ANEMIA

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Article Info

Article history:

Received Nov 12, 2022

Revised Nov 20, 2022

Accepted Nov 26, 2022

Keywords:

Anemia;
Nutritional status;
Pregnancy.

ABSTRACT

Pregnant women are people who are in the process of being separated to continue offspring. In the body of a pregnant woman there is a fetus that is a body in the womb. monthly MCH book of the Cimalaka Sub-district Health Center, that in 2020 the coverage of anemia to pregnant women was recorded at 76,3%, while the coverage of anemia for pregnant women in 2021 increased to 85,6%. Knowing the relationship between the nutritional status of pregnant women and anemia in the Cimalaka Health Center area in 2022. The type of research to be used is a type of quantitative research with a cross-sectional design. The sampling technique in this study was by means of total sampling with a population of 58 respondents. Nutritional status is in the category of less than 55,2, while the status of anemia is 63,8%. There is a relationship between nutritional status and the incidence of anemia in pregnant women with a p-value of 0,049. From this study there is a significant relationship between the nutritional status of pregnant women and the incidence of anemia in the Cimalaka Health Center Working Area. Suggestions for this research public health centre need to hold activities about the risk of anemia in pregnant women, such as conducting examinations on pregnant women for each trimester, so that the incidence of anemia in pregnant women can be prevented.



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1. INTRODUCTION

Pregnant women are people who are in the process of healing to continue their offspring. Inside the body of a pregnant woman there is a fetus whose body is in the womb. Pregnancy is an important period of life. A pregnant woman must prepare herself as well as possible for the health of the mother, baby, and during the birth process. One of the factors that affect maternal health is the state of nutrition (Waryana, 2010). The body undergoes changes during pregnancy, the amount of blood in the body increases by about 20-30%, thus requiring an increased supply of iron to make hemoglobin. If the nutrients in the body are lacking, it will result in the body not having enough iron to make red blood cells and causing the mother to suffer from anemia. Anemia can cause disturbances in fetal development, fetal death in the womb, abortion, congenital defects, maternal and perinatal death (Waryana, 2017).

According to the World Health Organization, the prevalence of anemia in developing countries is 41.8% of women who suffer from iron deficiency anemia. The mean prevalence was higher in pregnant women 51% than in non-pregnant women 41%. In Indonesia, almost half of pregnant women experience anemia or lack of blood. According to the Indonesian Ministry of Health (2018) as many as 48.9% of pregnant women in Indonesia experience anemia. In West Java the average prevalence of anemia in pregnant

women is 53.8%. The Sumedang District Health Office in 2020 was 9.69%, in 2021 there was an increase of 11.2% from the total number of 35 Puskesmas in Sumedang Regency. At the Cimalaka Public Health Center, the prevalence of anemia in pregnant women was 15.70% in 2021 and there were 23 cases of pregnant women with anemia. A preliminary study conducted on May 10, 2022, obtained from monthly report data from the KIA Puskesmas Cimalaka District, that in 2020 the coverage of anemia for pregnant women was recorded at 76.3%, while the coverage of anemia for pregnant women in 2021 increased to 85.6. %. And based on the results of an interview with one of the midwives, it was true that at the Cimalaka Health Center there was an increase in the incidence of anemia in pregnant women.

2. METHOD

The type of research that will be used is the type of quantitative research. Quantitative research is research by obtaining data in the form of numbers or qualitative data that is numbered. This study uses a cross sectional design (Sugyono, 2019). Cross sectional research only observed once and measurements were made on the subject variables at the time of the study (Notoatmodjo 2010).

3. RESULTS AND DISCUSSION

3.1. Results

a. Univariate Analysis

Table 1. Nutritional Status of Pregnant Woman

Nutritional Status	Frequency (f)	Percentage (%)
Good	26	44,8
Less	32	55,2
Total	58	100

It can be seen that the majority of pregnant women have poor nutritional status as many as 32 people (55.2%).

Table 2. Incidence of Anemia

Incidence of Anemia	Frequency (f)	Percentage (%)
Anemia	37	63,8
Not Anemia	21	36,2
Total	58	100

It can be seen that the majority of pregnant women are affected by anemia as many as 37 people (63.8%).

b. Bivariate analysis

Table 3 Cross Tabulation of Nutritional Status

Nutritional status according to LILA	Anemia Status				Total		P value
	Anemia		Not Anemia				
	f	%	f	%	f	%	
Good	13	50,0	13	50,0	26	100	0,049
Less	24	75,0	8	25	32	100	
Total	37	63,8	21	36,2	58	100	

Based on Table 3 Cross Tabulation of Nutritional Status according to LILA for Pregnant Women in the Work Area of the Cimalaka Health Center in 2022, it can be concluded that from 32 pregnant women with poor nutritional status who are affected by anemia as many as 24 people (75.0%), while those who are not affected by anemia are 8 people. (25%).

By using the Chi square statistical test where the degree of confidence used is 95% and $\alpha = 0.05$, the p value is 0.049 where the p value is < 0.05 . So the null hypothesis is rejected or in other words statistically it means that there is a relationship between nutritional status and the incidence of anemia in pregnant women.

3.2. Discussion

a. Univariate Analysis

The results of this study indicate that most pregnant women in the work area of the Cimalaka Health Center have poor nutritional status, namely 32 pregnant women (55.2%). Nutritional status according to BBIH is measured by adding the ideal body weight before pregnancy by the number of times between gestational age and minimum weight gain of 0.35 kilograms per week and good nutritional status according to LILA is measured by measuring the upper arm using the LILA tape with good nutritional status. expressed by LILA ≥ 23 cm and undernutrition status was expressed by LILA < 23 cm (Maryam Siti, 2016). The results of this study are also in line with research conducted by Tri Susita (2016), which states that most of the nutritional status of pregnant women is lacking, namely 21 respondents (56.8%) and a small proportion of respondents have good nutritional status, namely 16 respondents (43.2) %. The results of this study are also supported by research by Lia Kusumawati (2009), most of the respondents have poor nutritional status as many as 27 people (70.3%) while the least respondents with good nutritional status are 11 people (29.7%).

Based on the assumption of the researcher in this study that the nutritional status of pregnant women at the Cimalaka Health Center is less. Pregnant women with less nutritional status, from the results of the study, it was found that many pregnant women had BBIH and less LILA. Mothers with LILA below 23.5 cm are at risk of CED because pregnant women do not understand the importance of nutrition during pregnancy. Maryam (2016) states that the factors that influence the nutritional status of pregnant women are the first habits and views of pregnant women on food intake. The two factors are high economic status, someone with high economic status is most likely to have the necessary nutrition will be fulfilled. And the third factor is food abstinence, cultural influences, cultural elements can create people's eating habits which sometimes conflict with nutrition science.

The results of this study indicate that the majority of pregnant women in the working area of the Cimalaka Health Center are affected by anemia, namely 37 pregnant women (63.8%). This can be seen from the hemoglobin levels that have been measured and seen from secondary data. Anemia is a medical condition where the number of red blood cells or hemoglobin is less than normal (Atikah, 2011). This study is also in line with the theory of Prawirohardjo (2002), which states that low iron content in food, bleeding and reabsorption disorders are the most common cases of anemia in pregnancy.

This study is in line with research conducted by Apriyanti (2009) in the Work Area of the Mataram Baru Health Center, East Lampung Regency, from 223 pregnant women who became respondents there were 171 pregnant women (76.6%) who experienced anemia. The results of this study are also in line with research conducted by Hartati (2008), which stated that of the 74 respondents who were affected by anemia, 24 pregnant women (58.33%). Based on the assumption of the researcher that of the 58 pregnant women in the Cimalaka Health Center Work Area, 37 pregnant women (63.8%) were affected by anemia. This is due to the poor nutritional status of pregnant women. Anemia in pregnant women is not only caused by lack of nutritional status, but can also be influenced by the age of pregnant women during pregnancy.

The relationship between nutritional status and the incidence of anemia in pregnant women in the Work Area of the Cimalaka Health Center. Based on the analysis of the chi-square statistical test with a 95% confidence level, it was found that the p value was $0.049 < 0.05$, it can be concluded that there is a relationship between nutritional status and the incidence of anemia. anemia in pregnant women.

Anemia is a condition in which there are reduced red blood cells (erythrocytes) in the blood circulation or the mass of hemoglobin so that it is unable to fulfill its function as an oxygen carrier throughout the tissues (Tarwoto, 2007). This study is in line with research conducted by Anis Ervina (2015), which states that the results of statistical tests using chi-square obtained a p value of 0.000 which means that there is a statistically significant relationship between nutritional status and anemia in pregnant women. This study is also in line with research conducted by Nurvianti Soleha (2018), which states that the statistical test results obtained a p value of 0.002, which means that there is a relationship between nutritional status and anemia in pregnant women.

Based on the researcher's assumptions regarding the relationship between nutritional status and the incidence of anemia in pregnant women, namely there is a significant relationship between nutritional status and pregnant women, this is because the majority of pregnant women have poor nutritional status caused by one of them, namely the habits and views of pregnant women on food intake, lifestyle and lack of examination during pregnancy, causing the risk of developing anemia. Mothers who have poor nutritional status will be more at risk of developing anemia compared to mothers who have good nutritional status.

4. CONCLUSION

From the results of research conducted in the Work Area of the Cimalaka Health Center regarding the Relationship between Nutritional Status and the Incidence of Anemia in the Work Area of the Cimalaka Health Center, it can be concluded that:

1. The nutritional status of pregnant women in the Work Area of the Cimalaka Health Center is in the less category as many as 35 people (60.3%).
2. Anemia in pregnant women in the Work Area of the Cimalaka Health Center of 58 pregnant women affected by anemia as many as 37 people (63.8%).
3. There is a significant relationship between the nutritional status of pregnant women and the incidence of anemia in the Work Area of the Cimalaka Health Center.

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