Level of Knowledge of Pregnant Women Anemia Working In the Health Mrican Kediri

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I. Introduction

Anemia in pregnancy is maternal condition with hemoglobin levels below 11 g% on trimester 1 and 3 or content of 10.5 gr% trimester 2. The limit values and the difference to the condition of non-pregnant women occur due to hemodilution, especially in the second trimester (Prawirohardjo 2010: 281). Normally during pregnancy, there is erythroid hyperplasia of the bone marrow, and increased RBC (Red Blood Cell). However, the disproportionate increase in plasma volume results leadhemodilution (Proverawati, 2011: 127). Hemodilution is a condition in which an increase in blood cells is less than the increase in the plasma, causing the blood thinning. When hemoglobin mother before pregnancy...
11 gr% then by the hemodilution will result in physiological pregnancy anemia, and maternal Hb would be ± 10,5g% (Preventive and Care Medical Center, 2011).

The frequency of pregnant women with anemia in Indonesia is relatively high, at 63.5%, whereas in the US only 6%. Malnutrition and lack of attention to pregnant mothers predisposes deficiency anemia pregnant women in Indonesia. Anemia due to iron deficiency is a major cause of anemia in pregnant women in comparison with other nutritional deficiency. Therefore, nutritional anemia in pregnancy is often associated with iron deficiency anemia. About 70% of pregnant women in Indonesia suffer from nutritional anemia. Iron deficiency anemia is the most common nutritional problem in the world and affects more than 600 million people. With a frequency that is still quite high ranging from 10% to 20%. High prevalence of anemia among pregnant women have a negative effect on the fetus and the mother in a state of pregnancy, childbirth and postpartum, among others will be born low birth weight (LBW), prematurity, postpartum hemorrhage prolonged labor and others (Prawirohardjo 2010 : 280).

Anemia is a major cause of death and the fetus of pregnant women during childbirth, because of bleeding. Maternal mortality in Indonesia is the highest in ASEAN, which is about 307 from 100 thousand births. Other ASEAN countries, such as Malaysia, only 40-50 of about 100 thousand births, that means 8 times lower than Indonesia (Azkah, 2012).

In 2012 BATTERY in East Java province at 97.43 per 100,000 live births. In terms of cause of death, 25.09% of maternal deaths are caused by hemorrhage, preeclampsia /eclampsia amounting to 34.71%, 4.98% infection, heart 8.25%, and the other - the other 26.98% (Prog 2012).

Based on the results Report Accountability of Government Performance (LAKIP) Kediri in 2012 states that the number of digits Dead the mother gave birth in 2012 was 19.93% per 100,000 live births (Bappeda Kediri City, 2013).

While the coverage of the data anemia Kediri City Health Office in 2013 from 15 pregnant women were examined in each Puskesmas Mrican of Kediri, there were 13 pregnant women (86, 67%) of the Village Mrican, the Dermo village there are 11 pregnant women (73.33%), and 13 pregnant women (86.67%) of the Village Ngampel, as well as from Gayam village there are 14 pregnant women (93.33%) all of which are anemic.

The impact of anemia can cause harm to the mother and fetus, as may increase the likelihood of miscarriage, premature birth, postpartum hemorrhage, babies born with low birth weight, birth defects and death of the mother and fetus if anemia late addressed the effects of anemia for the mother and fetus varies from mild to severe. Whenhemoglobin levels lower than 6 g / dl, significant complications can arise in the mother and fetus. That low hemoglobin levels can not meet the needs of the fetus of oxygen and can lead to heart failure.
in the mother. Some studies have also found an association between maternal anemia on the 
first and second trimester with preterm birth (less than 37 weeks). So the impact of anemia in 
pregnancy varies considerably from minor complaints to the continuity of pregnancy 
disorders, disorders labor, puerperal disorders, and disorders of the fetus (Rukiyah, et al, 2009: 
116).

To prevent anemia during pregnancy undergo the most important is 
get adequate iron intake. Eat foods that have nutritional balance and add more foods that have a 
high iron content (Lathif Nurdiansyah, 2013). Then add revenue iron in the body by drinking 
iron tablet and treat diseases that cause or aggravate anemia, such as intestinal worms, malaria, 
and tuberculosis (Fadlun, 2012: 38). One way to reduce maternal mortality due to anemia is a 
way increase knowledge of pregnant women about the importance of anemia during 
pregnancy.

Research Based on the purpose of the research is descriptive. Descriptive study aimed 
to describe (explain) important events that will occur in the present. Descriptive events carried 
out systematically and more emphasis on factual data rather than inference. The phenomenon 
is presented as it is without manipulation and researchers did not try to analyze how and why 
this phenomenon occurs, therefore the study of this type do not require the presence of a 
hypothesis. Descriptive research results are often used or followed by an analytical study 
(Nursalam, 2011: 80).

II. Method

The population in this study is all pregnant women in the area of the City Health 
Center Mrican Kediri totaling 81 respondents, Criteria Samples can be divided into two parts, 
namely: the criteria for inclusion in this study are:

1) Pregnant women who are willing to become respondents
2) Pregnant women who can read and write

Exclusion criteria in this study are:

1) Pregnant women who are illiterate
2) Pregnant women who are not willing to become respondents
3) Sample Collection Techniques

Sampling techniques (sampling) is the process of selecting the portion of the 
population to be able to represent the population. How sampling will be used in this research 
is purposive sampling. The variable in this study is a Knowledge Level About Pregnancy 
Anemia in Puskesmas Mrican Kediri. there is research, research instrument used was a 
questionnaire.
III. Results

1. General data

a. Maternal characteristics by age in Puskesmas Mrican of Kediri

Table IV.1. Maternal characteristics by age in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Age</th>
<th>Amount</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>15-25 years</td>
<td>17</td>
<td>30.9</td>
</tr>
<tr>
<td>2.</td>
<td>26-45 years</td>
<td>35</td>
<td>63.6</td>
</tr>
<tr>
<td>3.</td>
<td>&gt; 45 years</td>
<td>3</td>
<td>5.5</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on Table IV.1, show from 55 respondents surveyed there were 35 respondents (63.6%), aged 26-45 years and 3 respondents (5.5%) aged over 45 years.

b. Characteristics Based on Latest Education Mrican Pregnant at the health center of Kediri

Table IV.2. Characteristics Based on Latest Education Pregnancy in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Pendidikan</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>SD / equivalent</td>
<td>2</td>
<td>3.6</td>
</tr>
<tr>
<td>2.</td>
<td>SMP / equivalent</td>
<td>12</td>
<td>21.8</td>
</tr>
<tr>
<td>3.</td>
<td>High School / equivalent</td>
<td>30</td>
<td>54.5</td>
</tr>
<tr>
<td>4.</td>
<td>College</td>
<td>11</td>
<td>20</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100</td>
</tr>
</tbody>
</table>

Based on Table IV.2, can show from 55 respondents who examined a total of 30 respondents (54.5%) who had high school and 2 respondents (3.6%) were educated from elementary school.

c. Characteristic Information About Anemia Ever obtained by pregnant women in the Puskesmas Mrican of Kediri

Table IV.3. Characteristics Resources Ever About Anemia obtained by pregnant women in the Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Resources</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Mass media</td>
<td>18</td>
<td>32.7</td>
</tr>
<tr>
<td>2.</td>
<td>Health workers</td>
<td>22</td>
<td>40.0</td>
</tr>
<tr>
<td>3.</td>
<td>Friend</td>
<td>8</td>
<td>14.5</td>
</tr>
<tr>
<td>4.</td>
<td>You</td>
<td>2</td>
<td>3.6</td>
</tr>
<tr>
<td>5.</td>
<td>neighbor</td>
<td>3</td>
<td>5.5</td>
</tr>
<tr>
<td>6.</td>
<td>Never</td>
<td>2</td>
<td>3.6</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Based on Table IV.3, can show from 55 respondents surveyed there were 22 respondents (40%) to get information about the anemia of health workers and 2 respondents (3.6%) were never informed about anemia.

Endah Luqmanasari (Level of Knowledge of Pregnant Women .....)
2. Custom Data

Table IV.4. Distribution Frequency Rate of Knowledge Capital Pregnant About Anemia General in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Good</td>
<td>13</td>
<td>23.6</td>
</tr>
<tr>
<td>2.</td>
<td>Enough</td>
<td>40</td>
<td>72.7</td>
</tr>
<tr>
<td>3.</td>
<td>Less</td>
<td>2</td>
<td>3.6</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Based on Table IV.7. show that in general from 55 respondents, 40 respondents (72.7%) know enough about anemia in pregnancy and 2 respondents (3.6%) are not informed about anemia in pregnancy.

While specifically shows the results of research data obtained as follows:

a. Knowledge About Pregnancy Anemia In the realm of "Know" (C1)

Table IV.5. Distribution Frequency Rate of Knowledge Capital Pregnant In the Realm of Tofu (C1) About Anemia in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Good</td>
<td>19</td>
<td>34.5</td>
</tr>
<tr>
<td>2.</td>
<td>Enough</td>
<td>31</td>
<td>56.4</td>
</tr>
<tr>
<td>3.</td>
<td>Less</td>
<td>5</td>
<td>9.1</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100.0</td>
</tr>
</tbody>
</table>

From Table IV.5. showed that of the 55 respondents, at most 31 respondents (56.4%) have a level of knowledge in the realm out with sufficient criteria and at least 5 respondents (9.1%) who have this level of knowledge in the realm out with less criteria.

b. Maternity understanding of Anemia in Sphere "Understanding" (C2)

Table IV.6. Distribution Frequency Rate of Knowledge Capital Pregnant In the sphere Got Pregnant (C2) About Anemia in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Good</td>
<td>20</td>
<td>36.4</td>
</tr>
<tr>
<td>2.</td>
<td>Enough</td>
<td>31</td>
<td>56.4</td>
</tr>
<tr>
<td>3.</td>
<td>Less</td>
<td>4</td>
<td>7.3</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td>55</td>
<td>100.0</td>
</tr>
</tbody>
</table>

From table IV.6. showed that of the 55 respondents, at most 31 respondents (56.4%) have a level of knowledge in the realm of understanding with the criteria fairly and at least 4 respondents (7.3%) who have this level of knowledge in the realm of understanding with less criteria.
c. Application of Anemia in Pregnancy on Sphere "Apply" (C3)

Table IV.7. Distribution Frequency Rate of Knowledge Capital Pregnant In Application Realm (C3) About Anemia in Puskesmas Mrican of Kediri

<table>
<thead>
<tr>
<th>No.</th>
<th>Knowledge</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Good</td>
<td>15</td>
<td>27.3</td>
</tr>
<tr>
<td>2.</td>
<td>Enough</td>
<td>32</td>
<td>58.2</td>
</tr>
<tr>
<td>3.</td>
<td>Less</td>
<td>8</td>
<td>14.5</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td>55</td>
<td>100.0</td>
</tr>
</tbody>
</table>

From table IV.7. showed that of the 55 respondents, at most 32 respondents (58.2%) have a level of knowledge in the realm of application with sufficient criteria and at least 5 respondents (9.1%) who have this level of knowledge in the realm of applications with less criteria.

Discussion

1. Knowledge Level In Pregnant Women Know Domains (C1) About Anemia in Puskesmas Mrican of Kediri

From table IV.5. showed that of the 55 respondents, at most 31 respondents (56.4%) have a level of knowledge in the realm out with sufficient criteria and at least 5 respondents (9.1%) who have this level of knowledge in the realm out with less criteria.

Knowledge interpreted as considering a previously learned material. Included in this is the level of knowledge recall (recall) of a specific of all the materials studied or stimuli that have been received. Therefore know this is a low knowledge level, to quantify that people know about what they learned, among others: mention, describe, define, express and so on (Notoatmodjo, 2007: 139).

Knowledge is the first step for someone to understand something. Knowledge can be gained through a variety of media. Either directly or indirectly. Usually the knowledge gained directly is easier to get into the mind and easier to remember. To further deepen the knowledge can be done by recall by including the entire senses of human beings such as for example the knowledge it heard first, remember, pronounced back and do the deed. Such knowledge is usually in the form of theory or understanding of something.

As knowledge about anemia usually informed through the theories that have been advanced by others. People are more familiar with anemia as anemia. Most assume if they feel weak, dizziness, pale face is the early signs of anemia. It's most often they do is to consume foods that they perceive can quickly raise blood pressure such as satay. From this it can be seen that the level of their knowledge was limited to theory or understanding of sentences directly. It also applies to pregnant mothers. They also assume that anemia blood pressure is reduced. Hence the need for the provision of more information to pregnant women to increase their knowledge about anemia.

Based on knowledge about anemia of pregnant women in the realm of idea can be seen that most have sufficient knowledge of the level of knowledge which is concerned with the education of the respondents, but less educated respondents do not necessarily have a low knowledge as well. They are biased just received information from various sources, such as mass media, communication with others and the environment.

Based on Table IV.3. can show from 55 respondents surveyed there were 22 respondents (40%) to get information about the anemia of health workers and 2 respondents (3.6%) were never informed about anemia.

According Ann.Mariner quoted Nursalam (2010), The environment is a whole condition which is around humans and influence that may affect the development and behavior of individuals or groups.
Knowledge is also affected by whether or not one's ever got the information. Information is the main source to improve one's knowledge. While resources is a motivation for people to always remember the object that has been studied. Advances in technology will be available an assortment of media that can influence people's knowledge of new innovation. As a means of communication, various forms of mass media such as television, radio, newspapers, magazines, and others have great influence on the formation of opinions and beliefs of people. In the delivery of information, mass media brought with it the message that contains suggestions that can direct one's opinion.

In addition through the media, promiscuity someone also affect the level of information it receives. With whom they associate every day of their new available information they can. People who stay at home, get a little more information from people who are often outside the home. Because the number of people they meet are also less. Or even perhaps only certain people they encounter.

Based on Table IV.2. can show from 55 respondents who examined a total of 30 respondents (54.5%) who had high school and 2 respondents (3.6%) were educated from elementary school.

Factors that affect the knowledge of one of them is education. Education can affect a person, including a person's behavior will be the pattern of life, especially in the attitude of motivation to participate in health development. Education is a process of increasing knowledge made formally, the higher the education, the knowledge and information gained will be more and more and will be more easily and vice versa. Until now, education plays an important role in any behavioral changes to achieve the desired objectives. With the high level of education a person is expected to be higher a person's knowledge so as to facilitate the receiving of information and knowledge that is positive. (Nursalam 2010: 18).

However, it should be emphasized that a low education does not mean absolute knowledge also lower. Increased absolute knowledge is not acquired in formal education, but also can be obtained in non-formal education. One's knowledge of an object also contains two aspects: positive and negative. The second aspect is what will ultimately determine one's attitude toward a particular object. The more positive aspects of the object is known, will foster a more positive attitude towards the object. Not everyone can afford to have a college education because they have a different perception for, in addition to the cost of education will increase if the study is done to a higher level.

From these results, the majority of pregnant women in the Puskesmas Mrican of Kediri has knowledge of anemia with sufficient criteria. The criteria are obtained from the questionnaires distributed in 55 pregnant women with a number of about 20 grains. Number questionnaire items 1-6 shows the criteria of knowledge about the understanding of anemia. Of the 55 respondents, the result of 56.4% of respondents answered correctly. This indicates that most respondents knew about the understanding of anemia.

2. Knowledge Level Domains Pregnancy In Understood (C2) About Anemia in Puskesmas Mrican of Kediri

From table IV.6. showed that of the 55 respondents, at most 31 respondents (56.4%) have a level of knowledge in the realm of understanding with the criteria fairly and at least 4 respondents (7.3%) who have this level of knowledge in the realm of understanding with less criteria.

Understanding is defined as an ability to explain properly about the object known and can correctly interpret the material. People who have understood the object or material must be able to explain, to mention an example, concluded, predicting and so forth of the object has been studied (Notoatmodjo 2007:139).

It is understandable that the understanding is kemampun in properly understand or know about something. The ability to understand is an important part to know or learn something. Learn to expect anything good results, it is not enough merely mangetahui capabilities. A person has knowledge or know something, but not sure the people understand. However,
someone who has an understanding, it is definitely the person to know. So, the understanding is still higher rank than knowledge.

Lack of knowledge causes pregnant women often suffering from anemia is due to everyday eating less food containing iron, such as spinach, papaya leaves, spinach, leaves Katu, cassava leaves, sweet potato, and liver and nuts. It can also be due to the growth of the fetus so that the need for iron increases while food eaten less iron to meet the needs. Frequent vomiting early so that the food you eat have not been absorbed by the body but must go out and many more causes.

After knowing the definition of anemia, to better understand people will find out the cause of the anemia. This is where a person's level of understanding to be increased. Once he knew he was thinking about what he was doing so he better understand the knowledge in to get it.

From the results of the study conducted by researchers most expectant mothers have a sufficient understanding of anemia, so that pregnant women are quite capable of understanding what should be done to reduce the risk of anemia in pregnancy. Although only enough to understand about anemia in pregnancy, but if it is further enhanced understanding will be able to help and reduce the risks that occur in the future.

Based on the research that the level of knowledge about anemia of pregnant women in the realm of understanding is the majority of respondents aged 26-45 years as many as 35 respondents (63.6%).

The level of knowledge is also influenced by age. Age is the age of individuals who counted begain when he was born until her birthday. Medium according Hunclok (1998) Getting enough age, level of maturity and strength of a person will be more mature in thinking and working. In terms of public trust someone more mature than people who do not believe high maturity. It will be part of the experience of maturity off(Nursalam, 2010: 18).

The more mature age of a person, the greater its ability to absorb information and understand the information obtained. This is because they have a lot of experience and also their wider relationships. The more mature a person is getting wise anyway he's addressing the problems that happen to him. So he has the ability to think that it is better to determine what action to do if trouble. Such as anemia, if people who are old enough will not be easy to panic when exposed to anemia in pregnant condition. They will not rush to make a decision and will consult with the midwife.

The survey results revealed that the age can also affect the level of knowledge for each specific age acceptance of different information. At an older age would be easier to understand all the information obtained. Additionally, increasing age will automatically be more and more experience is gained, so also will add information about anemia in pregnancy. Someone older will be more trustworthy than people who are not old enough maturity. It is also influenced by a little amount of experience possessed. The older age will be the more experience gained, so it will be easier for them to accept and understand the information obtained.


From table IV.7. showed that of the 55 respondents, at most 32 respondents (58.2%) have a level of knowledge in the realm of application with sufficient criteria and at least 5 respondents (9.1%) who have this level of knowledge in the realm of applications with less criteria.

The application or the application is defined as the ability to use materials that have been studied on the circumstances or the real conditions (in fact). Application here can be defined a application or use of the laws, formulas, methods, principles and so on in the context or other situations, for example, can use statistical formulas in calculations results, it can use the principles of problem solving cycle (Nursalam 2010: 18).

Implementation can occur several factors, including the person's interest in knowledge and understanding of an object that has been obtained so that the desire to perform and
practice the object appears. In addition, traditions and beliefs factors may also influence the onset of the application to an object, the application will be harmful to the respondent if the knowledge and understanding gained one.

One way to gain knowledge is based on experience. Knowledge of a person against a particular object can be influenced by the experience of a number of events or events of the same or different. From these facts are then used to understand or know the signs that will appear. Experience is a good teacher, so the saying goes. This proverb says something that the experience was a source of knowledge, or experience that is one way to gain knowledge of the truth. Therefore, pribadipun experience can be used as an attempt to gain knowledge. This is done by means of repeated experiences that have been obtained in solving the problems faced in the past.

From the research results have been quite a lot of pregnant women who apply their knowledge when they are anemic. They already want to drink blood booster tablets, eat foods containing iron as spinach and other green vegetables. They consult with their midwife if you experience tamda for anemia. But there are also women who have not applied their knowledge of anemia. This is because the information obtained is less. Therefore people nearby such as mother or husband also should provide knowledge and a better understanding to the hamie mother.

IV. Conclusion

Based on the results of research and discussion in Chapter IV can be concluded that out of 55 respondents, as many as 40 respondents pregnant women (72.7%) know enough about anemia in pregnancy. Further knowledge about anemia in pregnant women wilayah Puskesmas Mrican Kediri City in 2014 can be described as follows, The level of knowledge about anemia in the realm of "know" is 31 respondents (56.4%). The level of knowledge about anemia in the realm of "understanding" is 31 respondents (56.4%). The level of knowledge about anemia in the realm of "application" is 32 respondents (58.2%).

The suggestion after reviewing the results of research and discussion, the suggestions submitted are as follows. The results of this study suggested can train the writer's ability to communicate with patients, add insight and knowledge about anemia and hone the abilities and skills of researchers in the field of research. Can be used as a reference for comparative studies in future research on levels of knowledge, understanding, and application to pregnant women about anemia in pregnancy. In the case of pregnant women is expected to be able to increase the understanding and application of the knowledge of anemia in pregnancy in order to apply the already didapat. Selain it also, as an input to further improve services to pregnant women by providing information about the IEC or anemia. The results of this study can be used as additional reading material literature to broaden in particular on the knowledge, understanding and application of anemia in pregnancy and increase knowledge about anemia. Disarankan reader reader not only make this study as a reference, but also look for other literature to support.

References

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