

How to Cite:

Juniarti, S., Yuriah, S., & Sepriani, P. (2024). Women's empowerment model in treatment of pregnant women at risk of anemia in Indonesia: Literature review. *International Journal of Health Sciences*, 8(S1), 1680–1689. <https://doi.org/10.53730/ijhs.v8nS1.15357>

Women's empowerment model in treatment of pregnant women at risk of anemia in Indonesia: Literature review

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Abstract--Anemia in pregnancy has remained a major problem in Indonesia over the past decade. The women's empowerment model in the health sector can be a solution to the problem of pregnant women who are at risk of anemia and towards accelerating the SDGs achievement target in the third "Decade of Action" goal in 2030. Objective: to find out the evidence based on the women's empowerment model in handling pregnant women at risk of anemia in Indonesia. Method: Literature review search using article 2014-2024 with database (pubmed, sciencedirect, and google scholar) relevant to the keywords used maternity; obstetrics and pregnancy; women's empowerment; prevention; anemia. There were 10 articles used in this study which will then be extracted data, as well as compiled, summarized and reported the results. Results: The study showed that the women's empowerment model of knowledge, attitudes, family and community roles, diet, health services and health worker professionalism is effective in handling mothers at risk of anemia. Conclusion: The importance of p support government and midwife in giving quality midwifery services, access to credible sources of information, and encouraging the involvement of women, families and communities to realize women's health and well-being globally.

Keywords---Anemia, Family Support, Midwife, Midwifery Services, Women's Empowerment.

Introduction

Maternal Mortality Rate (MMR) is one of the important indicators of public health. To improve maternal health and the life expectancy of babies born, Maternal Mortality Rate (MMR) is an important factor that must be considered (Sepanlou et al., 2022). UNFPA data shows that in 2018, the average MMR in Asia-Pacific was 127 per 100,000 compared to developed countries which were only 12 per 100,000 live births and almost 92% occurred in developing countries including Indonesia (Amalia et al., 2022). The results of the Inter-Census Population Survey (SUPAS) in 2020 were 189/100,000 live births with the most common causes being bleeding, preeclampsia, and sepsis and IMR recorded at 16.85 per 1,000 live births with the most common causes being LBW or prematurity and asphyxia. Although each year continues to experience an average decline of 2.9%, the decline that has occurred has not yet reached half of the required figure of MMR below 70 per 100,000 live births and IMR of 12 per 1000 live births to be achieved in 2030 (Widyawati, Jans, Utomo, Van Dillen, et al., 2015).

The cause of maternal death occurs due to delays in treatment which consist of three factors, namely delays in recognizing danger signs, delays in referral, and delays in obtaining optimal services (Amalia et al., 2022). The most common causes of maternal death are bleeding, infection, hypertension in pregnancy (HDK), prolonged abortion, and incompetent abortion, with the main cause of maternal death being bleeding due to anemia, as much as 15-20% are caused by anemia (Yuriah et al., 2024). Based on data from the 2022 World Health Statistics, globally the prevalence of anemia in pregnant women is higher (36.5%) than in other women (29.6%). Based on the results of the 2023 Indonesian Health Survey (SKI), the prevalence of anemia in pregnant women in Indonesia was 27.7%. This is a decrease from 48.9% in the 2018 Basic Health Research (Kasad et al., 2023). Although it has decreased according to the official website of the SGD Resource Center, anemia remains a cause of maternal mortality (MMR), which is one of the world's health problems that must be addressed immediately (Muthoharoh et al., 2022).

Anemia is a condition of decreased hemoglobin levels in anemia sufferers, more often called lack of blood and red blood cell levels of hemoglobin below normal values (Mokam & Zamo Akono, 2022). Anemia in pregnant women if the hemoglobin (HB) or red blood cell levels are <11 g/dl (Yuriah et al., 2022). Anemia is caused by a lack of nutrients for blood formation, such as iron, folic acid, and vitamin B12; however, anemia is often caused by iron deficiency (Awaliyah & Yuriah, 2024). Anemia in pregnant women can increase the risk of low birth weight (LBW), the risk of bleeding before and during childbirth, and can even cause maternal and infant death if the pregnant woman has severe anemia (Rukmaini, Nur Indrawaty Lipoeto, et al., 2019). To find out if someone has anemia, a hemoglobin level check needs to be done (Yuriah et al., 2023). One way that can be done is the Sahli hemoglobin examination method, which is still widely used in laboratories and is the simplest (Purba & Medan, 2019). Maternal

hemoglobin greatly affects the weight of the baby to be born (Hidayana et al., 2022). Pregnant women who experience anemia due to low Hb levels not only endanger the mother's life but also disrupt growth and development and endanger the life of the fetus (Sama, 2017). This is caused by a lack of nutrient and oxygen supply to the fetus which affects the function of the placenta to the fetus (Yuriah et al., 2022).

Nutrition during pregnancy plays an important role in fetal growth because the fetus responds to the mother's diet and food reserves from the beginning of pregnancy and this will contribute to the child's health status (after birth) until adulthood (Hidayana et al., 2022). The first 1000 days of life are called the window of opportunity or golden age, during the 9-month pregnancy until the child is 2 years old, there is a very rapid growth and development process (Erowati et al., 2024a). The health condition of the mother before and after pregnancy greatly determines the health of the pregnant mother, the mother requires special nutritional needs so that her pregnancy is healthy. Pregnant women really need iron tablets to avoid anemia. Prevention of anemia in pregnancy begins from adolescence and when declared pregnant by consuming iron and folic acid supplements (Ningsih et al., 2022). The coverage of the provision of Fe tablets of at least 90 tablets for pregnant women in Indonesia in 2022 was 94.2%, this figure increased compared to 2021 which was 83.6%, but this achievement is still below the restra set in 2019, which was 98% (Yuriah, 2024).

Compliance of pregnant women in consuming iron tablets is an important factor in ensuring increased hemoglobin levels in them. Various factors such as knowledge and attitudes of pregnant women's behavior that are not good about the side effects of iron tablets can trigger someone to not comply with consuming iron tablets properly, so that the purpose of iron tablets is not achieved. Therefore, this literature review was conducted to identify Women's Empowerment Model In Treatment Of Pregnant Women At Risk Of Anemia In Indonesia.

Method

Literature review searchuse article 2014-2024 with pubmed, sciencedirect, and google scholar databases. Articles were also identified by checking bibliographies, relevant texts with the keywords used maternity; obstetrics and pregnancy; women's empowerment; prevention; anemia. The selection of articles was limited to articles published in English and Indonesian. This article focuses on research conducted in Indonesia that discusses the model of women's empowerment in handling pregnant women at risk of anemia. Original research with qualitative and quantitative studies. Some articles taken were excluded because they were review articles and reports, opinion papers. From the results of the screening of article content, population suitability, methods, and results, eight articles were obtained that would be used for literature review. Where six articles discussed the role of the family, one discussed the role of cadres, four articles discussed knowledge and attitudes, three articles discussed services, facilities and health worker professionals.

Results and Discussion

Results

Author/ Year	Country		Sample	Results
(Harahap & Helmi, 2023)	Indonesia	The effect of the family empowerment model on the ability to manage diet and increasing hemoglobin in anemic pregnant women	30 pregnant women	Family empowerment has a significant influence on the ability to regulate diet and increase hemoglobin (Hb) in pregnant women with anemia.
(Erowati et al., 2024b)	Indonesia	Training empowerment of cadres by using control cards to prevent anemia among pregnant women in Singkuang village	Integrated service post cadres	Training for cadres has succeeded in increasing the knowledge and skills of cadres, where cadres can provide education and assistance to pregnant women to consume Fe tablets and prepare foods high in iron.
(Mardiyanti et al., 2024)	Indonesia	The effect of family empowerment on hemoglobin levels in pregnant women	60 pregnant women	The family empowerment model has a significant impact on improving the care and maintenance of pregnant women, facilitating early detection of high-risk pregnancies, and contributing to increased hemoglobin levels.
(Assalamah et al., n.d.)	Indonesia	The effectiveness of women empowerment in Preventing the risk of anemia in the breadfruit District, Malang city	46 women of childbearing age	Empowerment regarding diet as an effort to prevent anemia is effective in changing women's attitudes and knowledge levels.
(Rukmaini, Lipoeto, et al., 2019)	Indonesia	The Analysis of Anemia Prevention Model in Pregnant Women in Banten	258 pregnant women	Anemia in pregnant women is influenced by direct factors, namely family support, knowledge and maternal perception.
(Widyawati, Jans, Utomo, van Dillen, et al., 2015)	Indonesia	A qualitative study on barriers in prevention of anemia during pregnancy in public health centres: perceptions of Indonesian nurse-midwives	23 midwives	The availability of facilities and skilled personnel at the Health Center as well as the husband or family members of pregnant women also play a role in the success of anemia treatment in pregnancy. Midwives and pregnant women need to be empowered in order to achieve optimal anemia treatment results.

Author/ Year	Country		Sample	Results
(Majid et al., 2015)	Indonesia	The model of empowering policy in managing pregnant women At risk of anemia by applying the socio-cultural approach in Coastal area	119 pregnant women	There is a relationship between socio-cultural variables (knowledge, attitudes, actions, eating patterns, parenting patterns, service patterns, and family roles) and the risk of anemia in pregnant women.
(Widyawati, Jans, Bor, et al., 2015)	Indonesia	The Effectiveness of a New Model in Managing Pregnant Women with Iron Deficiency Anemia in Indonesia: A Nonrandomized Controlled Intervention Study	Pregnant women with anemia, husbands and 51 midwives who have undergone training	The Four Pillars approach is effective in increasing hemoglobin levels and frequency of antenatal care visits of participants. The four pillars are a healthy lifestyle during pregnancy, social support from husbands or other family members, adequate obstetric care, and improving the professional attitude of midwives.

Discussion

Empowerment is a process of awareness and capacity building referring to a person's condition and supported by knowledge, skills and information that enables them to have higher self-esteem and facilitates their role as decision makers in society leading to the realization of greater equality (Srinivasa Murthy AT, 2017). Important knowledge that women should have before giving birth is that pregnant women are at risk of anemia, which means that pregnant women need more iron, especially in the second trimester of pregnancy. In this trimester, the fetus has formed along with the formation of bones and brain tissue, and iron is very much needed in this trimester. Pregnant women also really need iron to maintain strong bones and teeth, and to overcome fatigue. During this period, consumption of iron-rich foods, such as vegetables, meat, fish, and eggs, must be maintained to prevent anemia (Harahap & Helmi, 2023).

This study found that the model of providing knowledge about anemia, healthy eating patterns, and intake of iron supplements as an effort to prevent anemia can be declared effective (Assalamah et al., 2019). Women who are exposed to education have a much better understanding of the causes, symptoms, and prevention of anemia. Mothers who have good knowledge about iron supplementation during pregnancy are more than six times more likely to fulfill iron supplementation compared to mothers who have less knowledge (Rukmaini et al., 2019). Therefore, it can be concluded that by providing education to pregnant women about the importance of iron supplementation during pregnancy, it can increase the compliance of pregnant women in consuming iron supplements during pregnancy.

Knowledge is the result of knowing, which occurs after people perceive an object, and individuals are encouraged to understand with their experience of gaining knowledge. A person's attitude towards an object shows that a person's knowledge of the object is a concern. This shows that positive and negative attitudes are formed from the components of knowledge. The more knowledge is obtained, the more positive the attitude that is formed (Margwe & Lupindu, 2018). Attitude is a person's implicit reaction or response to an entity. The manifestation of attitude cannot be observed directly, but can only be interpreted from implied behavior. Attitude is not necessarily shown in action. To change attitudes into real actions, support is needed from various parties or factors that allow this to happen such as facilities, encouragement from people closest to you such as parents, siblings, and husbands is also very important (Majid et al., 2015).

This has been proven by researchers that there is an influence of the family empowerment model (education, assistance and training for families) on the ability to regulate eating patterns and increase Hb in pregnant women with anemia (Mardiyanti et al., 2024). The family is the basic unit of society that has a series of tasks and developments. Family members influence each other through interaction and provide support to each other according to their roles, which are needed to achieve well-being. Interactions between family members depend on the structure and function of the family (Novianti et al., 2017). Family support is an effort to detect early pregnancy at risk in pregnant women that can be realized by helping to overcome problems experienced by pregnant women who have health problems, experiencing anemia and by making decisions to treat or take pregnant women to available health services at the right time, maintaining a diet, and providing Fe tablets every day (Harahap & Helmi, 2023). Family is the closest person and the most valuable support system for pregnant women, especially pregnant women who experience anemia. Pregnant women who receive attention and support from their families tend to accept and follow the advice given by health workers more quickly than pregnant women who receive less support and attention from their families (Novianti et al., 2017). Family support is very important to improve maternal health and can be provided through involvement in maintaining the health of family members during pregnancy.

Pregnant women cadres are part of the community itself so they can help improve the health of pregnant women from a promotive and preventive perspective. Based on the results of the study, after receiving training in the form of lectures with educational media in the form of control cards, presentation handouts, video screenings on pregnant women's nutrition, questions and answers, and role play competitions and food processing for pregnant women, cadres experienced increased knowledge and skills, and also played an active role not only in providing assistance during the implementation of posyandu but also in visiting the homes of pregnant women. Cadres have been able to provide education to pregnant women using educational media such as those obtained during cadre training (Erowati et al., 2024). In Empowering cadres in the program to control pregnant women, cadres play a role in recognizing and early detection of risk factors through measuring the upper arm circumference, measuring hemoglobin (Hb) levels and early detection of anemia in pregnant women. Empowering cadres in the program to control pregnant women through socialization with interactive lecture and discussion methods, as well as providing leaflets can provide changes

in knowledge and attitudes of cadres in preventing and overcoming anemia in pregnant women. Increasing the knowledge of health cadres will be transformed to pregnant women in their area. In addition to being transformed, health cadres will also support and accompany pregnant women in implementing anemia prevention (Rahmawati et al., 2023). A series of community service activities have been carried out in providing training and mentoring to cadres, it is hoped that all pregnant women can understand about preventing anemia in pregnancy and how to prevent it.

The model for improving the quality of maternal and child health services in routine pregnancy check-ups research resulted in positive collaboration between professionals and pregnant women and their families with good results. The availability of facilities and skilled personnel plays a role in the successful treatment of anemia in pregnancy (Widyawati, Jans, Utomo, Van Dillen, et al., 2015). Midwives and pregnant women need to be empowered to achieve optimal anemia treatment results. Building a trusting relationship between midwives and pregnant women is essential to encourage pregnant women to attend antenatal care programs and feel free to discuss their health problems with midwives (Majid et al., 2015). Where midwives as a health profession who in their duties are always involved in providing services and education for women's health have a philosophy that every woman must be empowered through counseling and IEC to make decisions about her own health and that of her family (Hidayana et al., 2022).

In Indonesia, Antenatal Care (ANC) services during normal pregnancies are at least 6 times, with details of 2 times in Trimester 1, 1 time in Trimester 2, and 3 times in Trimester 3. At least 2 times checked by a doctor during the 1st visit in Trimester 1 and during the 5th visit in Trimester 3 (Mokam & Zamo Akono, 2022). Antenatal care helps identify danger signs, symptoms of health problems and provides essential medical services, such as tetanus vaccination, iron supplementation and malaria treatment (Idris & Sari, 2023). One of the series carried out in ANC activities, both K1 or K4, is to provide Fe tablets or iron tablets. Iron tablets (Fe) are additional supplements that are useful for the body in the process of forming red blood cells and hemoglobin and are very much needed by pregnant women. Ensure that pregnant women consume Fe tablets with a dosage of 1 tablet (60 mg iron and 0.25 mg folic acid) for at least 90 days during pregnancy (Yuriah & Kartini, 2022). So one type of health service is received late by the mother pregnant and can prevent and treat pregnant women with anemia.

Conclusion

The women's empowerment model has a positive impact on the handling of mothers with anemia with the existence of compliance behavior in consuming Fe tablets and foods that contain high iron. The risk of anemia during pregnancy needs to be addressed by intensifying promotive and preventive efforts in the form of socialization, advocacy, and education to various elements of society. It must be admitted that without government intervention, it will be difficult to increase public awareness of the fatal impact of anemia on pregnant women. Regulations are needed to enforce continuous and targeted control over public service

providers, including health centers, as an effort to provide a positive influence, both directly and indirectly, on the behavior and function of public and private health centers. The main requirements are the availability of adequate health facilities, trained workers, technology, and sufficient medicines. However, what makes a service cannot be separated from the service pattern because of humans. How much effort the community makes in seeking health-related information reflects their behavioral patterns in utilizing health services, and in a broader sense this shows the level of public knowledge and trust in health services. In other words, if health knowledge can be strengthened with effective methodologies to empower women to take an interest in their own health, seek out their own health information, sort and select information, communicating them to others, and adapting them to their own lives, they will deliver significant contribution to maintaining and improving not only their own health but also the health of their families they. Interventions for young people are essential and it is hoped that interventions to improve health literacy will extend from the preconception period. If women can improve their health, including improving nutrition from preconception, they can prevent perinatal complications, improve birth outcomes, and maintain and improve fetal health.

Conflict of interest statement

The authors declared that they have no competing interests.

Statement of authorship

The authors have a responsibility for the conception and design of the study. The authors have approved the final article.

Acknowledgments

We are grateful to two anonymous reviewers for their valuable comments on the earlier version of this paper.

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