

ORIGINAL

Experiences Of Pregnant Women Of The Angkola Batak Tribe In Prevention Of Anemia Of Pregnancy In South Tapanuli District. Phenomenological Study

Experiencias de las mujeres embarazadas de la tribu Angkola Batak en la prevención de la anemia del embarazo en el distrito de Tapanuli Sur. Estudio fenomenológico

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ABSTRACT

Anemia is one of the nutritional problems in pregnancy. Proper handling of anemia in pregnant women is currently needed, so that the problem does not continue. The purpose of this study was to explore in depth the experiences of pregnant women of the Batak Angkola tribe in preventing anemia in South Tapanuli Regency. The methods research design was phenomenology. The data collection method was carried out by in-depth interviews. The purposive sampling method was used to select participants who met the criteria as participants. The participants in this study numbered 10 people consisting of pregnant women, families, cadres, coordinating midwives and heads of health centers in South Tapanuli Regency. The results of the transcribed interviews were analyzed using content analysis. The results of this study found 4 themes that reflected the phenomena studied. These themes are the behavior of pregnant women in preventing anemia, Support for pregnant women, Dalihan Natolu's support in preventing anemia, Cultural influences in preventing anemia. Conclusions It is recommended that the local government of South Tapanuli Regency include the role of families, cadres, coordinating midwives and heads of health centers in the success of prevention of anemia in pregnant women.

Keywords: Anemia Prevention; Pregnant Women; Batak Angkola Tribe.

RESUMEN

La anemia es uno de los problemas nutricionales del embarazo. Actualmente es necesario tratar adecuadamente la anemia en las mujeres embarazadas para que el problema no persista. El objetivo de este estudio fue explorar en profundidad las experiencias de las mujeres embarazadas de la tribu Batak Angkola en la prevención de la

anemia en la regencia de Tapanuli Sur. El diseño de la investigación fue fenomenológico. La recopilación de datos se llevó a cabo mediante entrevistas en profundidad. Se utilizó el método de muestreo intencional para seleccionar a las participantes que cumplían los criterios. Las participantes en este estudio fueron 10 personas, entre las que se encontraban mujeres embarazadas, familiares, cuadros, comadronas coordinadoras y directores de centros de salud de la regencia de Tapanuli del Sur. Los resultados de las entrevistas transcritas se analizaron mediante análisis de contenido. Los resultados de este estudio revelaron cuatro temas que reflejaban los fenómenos estudiados. Estos temas son: el comportamiento de las mujeres embarazadas en la prevención de la anemia, el apoyo a las mujeres embarazadas, el apoyo de Dalihan Natolu en la prevención de la anemia y las influencias culturales en la prevención de la anemia. Conclusiones Se recomienda que el gobierno local de la regencia de Tapanuli del Sur incluya el papel de las familias, los cuadros, las comadronas coordinadoras y los directores de los centros de salud en el éxito de la prevención de la anemia en las mujeres embarazadas.

Palabras clave: Prevención de la Anemia; Mujeres Embarazadas; Tribu Batak Angkola.

INTRODUCTION

Anemia in pregnancy according to the World Health Organization (WHO) it is a state of concentration hemoglobin (Hb) levels of less than 11 g/dL.⁽¹⁾ Anemia in pregnant women is a medical condition that is still a global problem that affects the mother and fetus where there are not enough healthy red blood cells to carry oxygen to the tissues in the body.⁽²⁾ The anemia rate in pregnant women reaches 48,9 percent, while the global nutrition target in 2025 is to reduce the anemia rate in women of childbearing age (WUS) to 50 percent. The same source, Indonesia's target in 2025 must at least reduce the percentage of pregnant women with anemia to 19 percent.⁽³⁾ The high risk of anemia in pregnant women is due to the excess amount of blood produced by the body as a physiological process in hemodilution to help provide nutrition for the baby which occurs at the beginning of the second trimester and reaches its peak at 32 weeks of pregnancy. Mild conditions are easy to treat if detected early, however, they can be dangerous, both for the mother and the baby, if not treated properly.⁽⁴⁾

In addition to physiological processes, 75 %-90 % of cases of anemia in pregnancy are caused by iron deficiency. This is the leading cause of anemia in the United States, and as a result, the most common type of anemia during pregnancy. Approximately 15 % to 25 % of all pregnancies are iron deficient. Iron is a mineral found in red blood cells and is used to carry oxygen from the lungs to the rest of the body, as well as helping muscles store and use oxygen. When too little iron is produced, the body can become tired and resistance to infection decreases. Iron deficiency anemia is still highly prevalent due to low anemia prevention practices in pregnant women. The main factors causing iron deficiency anemia in pregnant women include poor diet during pregnancy, low compliance in taking iron tablets and irregularity in conducting Antenatal check-ups.⁽⁵⁾ Diet during pregnancy including food selection is influenced by knowledge, beliefs and perceptions about nutrition and health.⁽⁶⁾

The incidence of anemia in pregnant women in Indonesia is still relatively high. Based on the 2018 Rikesdas, 43,8 % of pregnant women in Indonesia experience anemia. The incidence of anemia in East Java is 25,3 %. The incidence of anemia in North Sumatra Province in 2015 reached 57,1 %, in 2016 it was 54,5 %, and in 2017 it increased to 58,2 %. The incidence of anemia in Medan City was found to be anemia in toddlers aged 0-5 years of 40,5 %, adolescent girls of 26,5 %, Women of Childbearing Age (WUS) of 39,5 %, in pregnant women of 43,5 %. The incidence of anemia is still quite high in South Tapanuli Regency in 2021 at 42,5 %, an increase from 2019 which was around 41,8 %.⁽⁷⁾

The need for iron during pregnancy increases for the formation of the placenta and red blood cells and the preparation of blood that will be lost during childbirth. This increase in iron needs can reach 100-300 %.⁽⁸⁾ Iron deficiency in pregnant women can result in anemia, prolonged labor and postpartum hemorrhage.⁽⁹⁾ The World Health Organization recommends that iron supplements be given to pregnant women who have iron reserves of 30-60 mg per day and to pregnant women who do not have iron reserves of 120-240 mg per day.⁽¹⁰⁾

Anemia in pregnancy is caused by various problems from birth to old age. In this life cycle process, pregnancy can be a stage resulting from a previous process. Pregnant women usually suffer from anemia not only because of their pregnancy, but also because of anemia after the reproductive period. Anemia occurs because of certain beliefs associated with pregnant women and their children, so that pregnant women follow certain requirements or prohibitions regarding foods that may or may not be eaten, including activities that are recommended or prohibited during pregnancy.⁽¹¹⁾

Several problems were found related to health promotion methods and pregnant women's behavior in preventing anemia. Some pregnant women also still do not know and consume foods containing iron sources

in daily consumption. The behavior of pregnant women in preventing anemia is influenced by many factors. ⁽¹²⁾ Several factors inhibiting iron supplements from being consumed regularly are the existence of a wrong understanding of the benefits of taking iron tablets, prohibitions on *paraji*, and difficult access to obtain iron tablets. Superstition influences the consumption behavior of pregnant women. The perception of anemia that it is a normal thing in pregnancy will influence anemia prevention behavior. ⁽¹³⁾

In overcoming the problem of anemia prevention behavior in pregnant women, it is necessary to develop a health promotion model that is in accordance with the needs of pregnant women. The health promotion model that will be developed is based on the use of the Health Promotion Model and Self-Determination theories. This model focuses on how to increase the mother's commitment in carrying out pregnancy anemia prevention behavior, where the health promotion that will be developed is based on the fulfillment of three basic psychological needs of pregnant women, namely autonomy, competence, and relatedness. Fulfillment of the three psychological needs will increase the intrinsic motivation of pregnant women so that they will be able to facilitate changes in health behavior and maintain it in the long term. ⁽¹⁴⁾

Apart from these approaches, the most important is the behavioral change approach by motivating pregnant women to adopt healthy lifestyle behaviors, which is very important for maintaining good health. In this regard, pregnant women are expected to be able to obtain information about their unhealthy lifestyle behaviors and motivate them to change. ⁽¹⁵⁾

The cultural system is one of the popular cultural components in Indonesia which is known as customs. Culture is a collection of concepts, ideas, values, conventions, regulations. Society consists of the thoughts and opinions of many people who live together. ⁽¹⁶⁾

Concepts are never separate from each other; instead, they are interrelated to form a cultural system. Cultural universals are universal cultural elements that exist in all cultures in the world. Culture unconsciously influences attitudes towards various things. One cultural background that influences equality is the assumption that the more children, the greater the wealth. ⁽¹⁷⁾

The socio-cultural aspects reflected in the knowledge and actions of pregnant women during fasting have been passed down from generation to generation. This knowledge is a form of ancestral heritage that is reflected in norms and values that are considered correct (covert behavior) and behavior that is seen in the form of actions (overt behavior) which is reflected in the reluctance of pregnant women. Consuming foods that are considered harmful to the fetus, even though the food is very beneficial for the fetus. ⁽¹⁸⁾

Based on a preliminary study in South Tapanuli Regency conducted using the interview method with 10 pregnant women, 7 of them... (70 %) said involvement Family in pregnancy care is still very lacking, especially in preventing anemia, pregnant women are required to do housework even though they are pregnant. Various causes of failure to achieve anemia prevention are due to cultural factors, namely food taboos for pregnant women. Pregnant women are prohibited from eating certain foods even though these foods are necessary for pregnant women. Another factor is that the mother feels unable to go through her pregnancy alone without support from her family or those closest to her. Pregnant women do not feel confident in their own ability to care for their pregnancy.

Based on this phenomenon, researchers are interested in conducting research on the experiences of pregnant women of the Batak Angkola tribe in preventing anemia during pregnancy in South Tapanuli Regency in 2024.

METHOD

The type of research used is phenomenology. This study aims to explore and understand the experiences of pregnant women of the Batak Angkola tribe in preventing anemia in pregnancy in South Tapanuli Regency.

The study was conducted in South Tapanuli Regency in May 2024. Participants in this study until data saturation reached 5 pregnant women who were selected through purposive sampling techniques.

Data collection was conducted by researchers as the main research instrument. Data were collected through in-depth interview methods with a voice recorder based on an interview guide with open questions.

RESULTS

Research result

The participants in this study numbered 10 people, with an age range of 31-40 years as many as 5 participants and an age range of 21-30 years as many as 3 participants. 6 participants have high school education, 3 participants have a Diploma education and 1 participant has a Bachelor's degree. 7 participants work as entrepreneurs and 3 participants work as civil servants. The characteristics of the participants in detail will be explained below.

The results of this study found 4 themes, namely: Mother's behavior in preventing anemia, Support for pregnant women, Dalihan Natolu's support in preventing anemia, Cultural influence in preventing anemia. More details can be seen in table 2 below.

Table 1. Participant Characteristics

	Characteristics	Frequency	%
Age	31 - 40 years	6	60 %
	21 - 30 years	4	40 %
Education	Bachelor	1	10 %
	Diploma	3	3,0 %
	SENIOR HIGH SCHOOL	6	60 %
Work	Self-employed	8	80 %
	civil servant	2	20 %

Table 2. Content Analysis Results

Table 2. Content Analysis Results			
1	Theme 1: Behavior Pregnant women in Anemia Prevention		
	Sub themes	Category	
	Benefits of iron	1. Consume foods containing iron to keep the body healthy 2. Overcoming symptoms of anemia and not getting tired quickly 3. Prevent the entry of germs and infections	
	Iron deficiency	1. Discomfort and nausea 2. Fear of big baby and high blood pressure 3. It is difficult to get food containing iron	
	Pregnancy Information	1. Health workers 2. Family 3. Public	
2	Theme 2: Support for Pregnant Women		
	Sub themes	Category	
	Family Support	1. Remind to eat nutritious food 2. Remind to take iron tablets regularly 3. Helps in meeting food needs (cravings)	
	Pregnant women support group	1. Provides information on preventing anemia 2. Reminding that taking iron tablets is important for health 3. Remind to consume nutritious food regularly	
	Health worker support	1. Provides the opportunity to choose a nutritious food menu 2. Men listen to complaints about iron and nutritious food consumed by pregnant women 3. Providing solutions to problems faced	
3	Theme 3: Dalihan Natolu's Support in Preventing Pregnancy Anemia		
	Sub themes	Category	
	Mora	1. Accompanying mothers during pregnancy 2. Giving gifts (giving food) 3. Helping with homework	
	The Great	1. Giving gifts (giving food) 2. Providing support during pregnancy	
	Children of Boru	1. Accompanying mothers during pregnancy 2. Giving gifts (giving food) 3. Helping with household chores	
4	Theme 4: The Influence of Culture in Anemia Prevention		
	Sub themes	Category	
	Pregnancy etiquette	1. Checking pregnancy with a shaman 2. Reluctant to check pregnancy with health workers 3. While pregnant, continue to take care of the household	
	Husband's involvement during pregnancy	1. Helping wife with work 2. Caring for wife during pregnancy	
	Inappropriate nutritional fulfillment behavior	1. Food taboos during pregnancy 2. Prioritize your husband to eat side dishes 3. Eating a lot causes big babies	
	Appropriate nutritional fulfillment behavior	1. Wages 2. Manyonggoti/providing nutritious food	

1. Theme Pregnant Women's Behavior in Preventing Anemia

The behavior of pregnant women in preventing anemia in pregnancy is knowing about the benefits of iron tablets, obstacles in consuming iron tablets and knowing information about pregnancy.

Participant statements about the benefits of iron tablets such as consuming iron to keep the body healthy, overcome symptoms of anemia and fatigue and avoid the entry of germs and prevent infection, namely:

- “That’s to increase blood, you have to take iron tablets given by the health center so that the mother and baby are healthy.”
- “As far as I know, being pregnant makes you feel weak, sometimes you feel a little dizzy, taking iron tablets from the midwife can reduce your weakness and drink lots of water too.”
- “If you take iron tablets, you will be protected from illness, you won’t catch a cold easily, because pregnant women are usually the ones who catch illnesses from other people quickly, such as coughs and colds.”

Participant statements about sources of information about pregnancy were obtained from health workers, families (mora, kahanggi and anak boru), and the community, such as the participant statements below:

- “” often from midwives at the Posyandu, sometimes from cadres I was also told what to do during pregnancy, so I followed it so that my pregnancy and baby would be healthy too.”
- “From Mora and Kahanggi who already have children, for example, giving Advice, sharing experiences when she was pregnant, so that she would be healthy during pregnancy and have a smooth delivery.”
- “Yes, sometimes we meet our neighbor when we’re shopping and she says to eat lots of vegetables and fruits so that you and the child you’re carrying will be healthy, ma’am.”

2. Support Theme for Pregnant Women

Support from family, pregnant women’s groups and health workers for pregnant women consists of: participant statements about family support consisted of reminding pregnant women to consume nutritious food, consume iron tablets regularly and reminding them to maintain personal hygiene during pregnancy.

- “My husband reminds me to eat vegetables and fish, sometimes peels papaya to eat, he says it will make the baby healthy too.”
- “Take blood-boosting medicine from the health center to stay healthy, so you don’t get tired quickly, so you’ll be strong when cleaning the house, that’s what my mother-in-law said.”
- “Even though you are pregnant, you still have to take a shower, wash your hair, change into clean clothes, so that your mind is also healthy, that’s what my sister-in-law said, so even though you are pregnant, you still have to pay attention to your appearance.”

In addition to family support, support from pregnant women groups was also provided by participants to mothers, such as providing information on preventing anemia, reminding them to consume iron tablets and reminding them to eat nutritious food regularly. As conveyed by the following participants:

- “If you meet someone at a shop and ask if they have taken their blood-boosting medication, it is important to prevent anemia so that they are healthy during pregnancy.”
- “Don’t be picky about food, eat everything, vegetables, fish and fruit if you have them so your baby will be healthy, even if you don’t like eating fruit, just eat it so your baby will be healthy.”

The interview results revealed that participants provided health worker support to mothers such as providing opportunities to choose nutritious food menus, listening to complaints about iron and nutritious food consumed by pregnant women, providing solutions to the problems faced. The participant statements are as follows:

- “Yes, when I went to the integrated health post, the midwife said that I had to eat vegetables. I said that I don’t like spinach, you can replace it with other vegetables, ma’am. It doesn’t have to be spinach, the main thing is to eat green vegetables.”
- “Yes, the midwife always reminds us to eat all foods, ma’am, don’t prohibit them. As long as you don’t feel nauseous or have a stomachache, just eat them so that you and your baby are healthy.”
- “Sometimes when taking blood-boosting medicine, you feel nauseous and want to vomit, then the cadre said it’s okay, that’s how the medicine reacts, try taking it when you want to sleep so you don’t feel nauseous, or when taking the medicine, eat an orange or papaya at the same time.”

3. Dalihan Natolu Support Theme in Anemia Prevention

Dalihan natolu (family) support for pregnant women is obtained from the mora family, kahanggi family and anak boru family.

Participants stated that there was support given by Mora to the participant’s family, such as providing wages

and providing copies and helping with housework. The participant's statement is as follows:

- "Yes, my family and my husband's family also came to give me gifts when I was pregnant, giving me a change of clothes."
- "There is Mrs. Mora Kahanggi and the children of Boru and the neighbors who came to give us food. How many times were we fed during pregnancy, ma'am?"
- "There is Mrs. Mora Kahanggi and her children and neighbors who came to give their wages."
- "My husband's family also wants to come and help clean the house"
- Support from Kahanggi was also received by the participant's family, namely by providing wages. As stated by the following participant:
- "There is Mrs. Mora Kahanggi and the children of Boru and the neighbors who came to give us food. How many times will we be fed during pregnancy, ma'am?"
- "There is Mrs. Mora Kahanggi and her children and neighbors who came to give their wages."

Participants also stated that anakboru also provide support such as accompanying mothers during pregnancy, providing wages, providing slings and helping with household chores. As stated by the following participant:

- "My family and yes my husband's family came to accompany me during my pregnancy"
- "There is Mrs. Mora Kahanggi and the children of Boru and the neighbors who came to give their wages."
- "There is Mrs. Mora Kahanggi and the children of Boru and the neighbors who came to give their wages."
- "Yes, if the children help, it does not violate customary rules, especially sisters -in- law, we can ask for any help as long as they are able."
- "If a sister -in -law is usually willing to help us with housework"

4. Theme of Cultural Influence in Prevention of Pregnancy Anemia

Based on the results of participant interviews, it was revealed that culture influences anemia prevention such as pregnancy etiquette, husband's involvement during pregnancy, appropriate nutritional fulfillment behavior, and inappropriate nutritional fulfillment behavior.

Pregnancy etiquette in Batak culture is to check the pregnancy with a shaman, and are reluctant to check the pregnancy with a health worker, the participant's statement is as follows:

- "Just go to a shaman to get checked if you're pregnant, it's usually been like that since ancient times, it's normal for Batak people to go to a shaman"
- "Sometimes I'm too lazy to go to the integrated health post, it's far, I have to queue again, it's better to go to a shaman, if I go to a shaman and get a massage, my aches and pains will go away after the massage."
- "Why go to the health center for a check-up, the one who's healthy is you?"
- Participants expressed appropriate nutritional fulfillment behavior for pregnant women, namely by providing wages or manyonggoti, as in the following statement:
- "Thank God, when my family came, they gave me wages, I ate well, my nutrition improved, there was chicken, eggs and fish too."
- "There are also friends who give me wages, delicious food and clothes."

Participants also stated that participants provided inappropriate nutrition to mothers such as: prohibiting certain foods, prioritizing husbands to eat side dishes and not allowing them to eat a lot as stated in the following statement:

- "You shouldn't eat a lot of fish and eggs or your children will be fishy."
- "Don't eat pineapple and durian, it can cause miscarriage."
- "The husband or man eats the side dishes first, then the rest can be eaten by the pregnant woman or the rest of the family."
- "Don't eat too much, otherwise your baby will have difficulty growing up when you give birth."

DISCUSSION

1. Theme of Mother's Behavior in Preventing Anemia

Pregnant Women's Behavior Theme consists of 3 sub-themes, namely the benefits of iron, obstacles to iron consumption and sources of pregnancy information. The first aspect in this study shows that the knowledge of pregnant women in consuming iron tablets for a healthy body is that the iron requirement required during pregnancy is around 1000 mg.⁽¹⁹⁾ During pregnancy, the fetus uses the mother's red blood cells for growth and development, especially in the last 3 months of pregnancy. If the mother has a lot of iron reserves in the bone marrow before pregnancy, then during pregnancy it can be used for the needs of the fetus and placenta.

If the formation of blood cells is less than the increase in plasma, blood dilution occurs which causes the concentration or Hb level to not reach normal so that anemia will occur. This condition can occur starting from 10 weeks of pregnancy and peaks in 32-36 weeks of pregnancy.⁽²⁰⁾

Pregnant women who suffer from iron deficiency anemia will not be able to meet the nutritional needs of themselves and the fetus in the womb. Therefore, miscarriage, stillbirth, low birth weight, or premature birth are prone to occur in pregnant women who suffer from iron deficiency anemia.⁽²¹⁾

The second sub theme is the obstacles in consuming iron tablets. The side effects of iron that cause nausea and black stools make pregnant women reluctant to consume iron tablets regularly. Many pregnant women are not compliant in taking iron tablets because of the belief that iron tablets only need to be taken when they have health complaints.⁽²²⁾ The commitment of pregnant women in anemia prevention behavior will be better if the mother has a strong determination. With a strong commitment, pregnant women will be able to overcome obstacles in preventing anemia. In accordance with Self Determination Theory (SDT), the expected behavior can last longer when patients are able to internalize values and get satisfaction with the fulfillment of three psychological needs in health services including autonomy, competence, and relatedness.⁽²³⁾

The third sub theme is the source of maternal knowledge about pregnancy obtained from health workers, family and community. Health workers play a very important role in preventing pregnancy anemia. Pregnant women who get information about pregnancy from health workers such as doctors, midwives and nurses and cadres will be able to go through their pregnancy well and understand how to prevent anemia and fulfill good nutrition during pregnancy. Health workers have a big role to provide information and form knowledge related to preventing pregnancy anemia.⁽²⁴⁾ The role of health workers is very important to provide information related to preventing anemia, food consumed during pregnancy and how to consume iron tablets correctly.⁽²⁵⁾

The source of information about pregnancy is also obtained by the mother from the family. In this section, the family referred to is a person who has kinship with the wife other than the husband. The family can play a role in providing information that iron is a substance needed by the body so that the mother and baby are healthy. During pregnancy, mothers always want to get attention from their families, be it husbands, in-laws, or other relatives in the family. So mothers tend to be more spoiled during pregnancy. The experience provided by the family regarding care during pregnancy and prevention of anemia is very helpful for pregnant women in going through their pregnancy.⁽²⁶⁾

This study also found that the community also plays a role in providing information about pregnancy and anemia prevention. Information is obtained when neighbors or friends come to visit during pregnancy to congratulate and give rewards. People who visit will share their experiences about their pregnancy and recommend consuming nutritious food during pregnancy so that the mother and baby are healthy. Social support is defined as an individual's action that is helpful to other individuals' problems involving emotions, providing information, providing instrumental assistance and positive assessments.⁽²⁷⁾

2. Support Theme for Pregnant Women

The theme of support for pregnant women found 3 sub-themes, namely family support, support for pregnant women groups and support from health workers. The first sub-theme is family support, which is one of the factors that influences the incidence of anemia in pregnant women. Family support is support given by the family to pregnant women during their pregnancy. Family support in this case is psychological support. Pregnant women need psychological support that will greatly affect the mother's pregnancy. During pregnancy, mothers always want to get attention from their families, be it husbands, in-laws, or other relatives in the family. So that mothers tend to be more spoiled during pregnancy.⁽²⁸⁾ It is very important for families to provide support, affection, attention and good family support for pregnant women who are indicated as anemia during their pregnancy. Family support allows pregnant women to better regulate their lifestyle. So that pregnant women can enjoy comfort at home, regular eating patterns and a happy heart. Of course this will prevent diseases that come during pregnancy, including anemia.⁽²⁹⁾

The sub-theme of support for pregnant women groups in this study conducted by pregnant women aims to make it easier for mothers to go through their pregnancy, fellow pregnant women remind each other about preventing anemia, consuming iron tablets and eating nutritious food regularly. This support for pregnant women groups is social support, where social support is basically needed by individuals. Social support can be obtained by pregnant women in the process of pregnancy and birth from their closest environment. Pregnant women who do not get social support, it affects their pregnancy and also the fetus they are carrying.⁽³⁰⁾

Social support is obtained from the results of individual interactions with other people in their social environment, and can come from anyone, family, partners (husband/wife), friends, or co-workers. The psychological and emotional comfort that individuals receive from social support will be able to protect individuals from the consequences of stress that befall them.⁽³¹⁾ Social support as a role played by friends and relatives in providing advice, assistance, and some of them to share personal feelings. Social support as a source of emotional, informational or assistance provided by people around the individual to face every problem and

crisis that occurs every day in life including the problem of preventing anemia in pregnancy.⁽³²⁾

Another finding in this study is the sub-theme of health worker support. Health workers as the spearhead of maternal health services, childbirth and maternal and child health care, have a fairly strategic role in efforts to suppress the rate of disease growth after postpartum and KIA/KB services. Health workers are trained to have knowledge about preventing anemia in pregnant women.⁽³³⁾ The role of health workers to improve anemia prevention behavior includes using a persuasive approach to mothers and families in motivating and raising awareness of the importance of iron tablets. Health workers need to increase the provision of counseling on pregnancy anemia and consumption of iron tablets, so that pregnant women are willing to take iron tablets. One of the roles of health workers that must be optimized is midwives. Midwives are health workers who are very close to pregnant women from the beginning of pregnancy, consultations with pregnant women until delivery. Midwives must increase their role in conveying knowledge and counseling on anemia prevention. Every complaint of pregnant women is also a benchmark in conveying knowledge about preventing diseases in pregnant women and solutions related to complaints felt by pregnant women.⁽³⁴⁾

3. Theme In Preventing Pregnancy Anemia

Dalihan Natolu is a kinship or family system in the Batak tribe. Where Dalihan Natolu is divided into 3, namely Mora (wife's family), Kahanggi (husband's family) and Anak Boru (daughter's line in a marriage relationship). Dalihan Natolu/Family has an important role in the success of pregnant women to undergo their pregnancy healthily. This study found that Mora, Kahanggi and Anak Boru provide support to pregnant women in undergoing their pregnancy process. This support is in the form of accompanying mothers during pregnancy, reminding them to consume iron tablets and nutritious food, providing wages, providing sasalin and scarves and helping mothers do housework.⁽³⁵⁾

This study found that Dalihan Natolu provides support in the form of accompanying mothers during their pregnancy. Support for pregnant women can be done by providing comfort, being cared for, appreciated and loved. By providing meaningful support, pregnant women will overcome complaints of emesis gravidarum or complaints of fatigue during pregnancy. Support from the family can reduce stress during pregnancy due to various pregnancy complaints that arise. With family support, it will have a good effect on changes in the behavior of pregnant women in reducing These complaints include anemia in pregnant women. Emotional support is any form of expression of care, attention and empathy obtained from the family. The family is a safe and peaceful place for rest and recovery and helps control emotions. Aspects of emotional support include support that is manifested in the form of affection, trust, attention, listening and being heard.⁽³⁶⁾

The second support from Dalihan Natolu is to provide wages/mambutongi mangan as an expression of gratitude, where this tradition contains prayers and advice from parents, relatives and the Batak indigenous community in the residential environment. In addition to prayers and hopes, the speech in the Mangupa ceremony is usually arranged in a poetic and interesting discourse. So, it can be said that the speech contains aesthetic values, truth, goodness, hope, prayer, and advice. In addition to its specific function, the speech in the Mangupa ceremony also has a general function that is the same as the function of speech in general. In addition to containing aesthetics, truth, hope, prayer, and advice, the speech in the Mangupa ceremony also contains cultural values which are laws or teachings that are important in carrying out its function in society.⁽³⁷⁾

The third support given by dalihan natolu is by giving a sasalin/shawl (a regular carrying cloth) during the gaji-upah event. The event of giving a sasalin or shawl is a form of gratitude from the family for the mother's pregnancy and the imminent addition of a new family member. In general, the mora, kahanggi or anak boru family may give a sasalin, namely clothes for the mother to wear during pregnancy, or also a shawl that is needed during pregnancy.⁽³⁸⁾

Dalihan natolu anak boru support provides assistance in the form of providing attention and empathy, as well as helping with housework, such as cleaning the house, cooking and so on. The parents of the pregnant mother's husband, namely the in-laws, provide more non-material assistance, while the husband provides less non-material assistance but is optimal in providing material support. Socio-cultural factors also play an important role in understanding the attitudes and behavior of families in handling maternal care during pregnancy. From anthropological studies, it was found that problems related to maternal care during pregnancy are not always determined by the husband and wife. But by other relatives who are more senior and experienced in the pregnancy process.⁽³⁹⁾

4. Theme of Cultural Influence in Anemia Prevention

On the theme of cultural influence on exclusive breastfeeding, researchers found 4 sub-themes, namely pregnancy behavior, husband's involvement during pregnancy, inadequate nutritional fulfillment and adequate nutritional fulfillment.

The results of the study revealed that culture will be passed down from generation to generation, including culture related to maternal and child health. Traditional midwives are part of the culture that is trusted by

the community to handle maternal and child health problems. In practice, traditional midwives will follow the beliefs and cultural conceptions that grow in a community.⁽⁴⁰⁾ Traditional midwives have a role in accompanying women during childbirth, monitoring pregnancy, caring for mothers and babies after giving birth. Traditional midwives are known to have special abilities that are assisted by certain mantras that are believed to be able to protect mothers and babies from disturbances from spirits. Some Rituals and ceremonies are held for pregnant and postpartum mothers with a midwife as the ceremony leader.⁽⁴¹⁾ Due to the influence of culture in society, people will return to using traditional midwives rather than health workers.⁽⁴²⁾

In this study, it was found that husbands are involved in preventing anemia during pregnancy. Where the husband accompanies his wife during her pregnancy, the husband reminds his wife to take iron tablets regularly, reminds her to eat nutritious food during pregnancy. The husband reminds his wife to maintain personal hygiene and helps clean the mother during pregnancy. The husband is involved in helping his wife do household chores such as cleaning the house. The husband also plays a role in accompanying the mother to the integrated health post to check her pregnancy regularly.⁽³⁵⁾

Sub-themes of inappropriate nutritional fulfillment such as prohibitions on types of food that can be eaten during pregnancy. The category of food for pregnant women refers to cultural beliefs about foods that are considered good to eat or harmful to you and your fetus and should be avoided. Foods that are considered good are considered recommended, and foods that have bad effects are considered forbidden.⁽⁴³⁾ Food taboos or prohibitions during pregnancy seriously disrupt the supply of nutrients for pregnant women, even though pregnant women must provide sufficient nutrients for themselves and their fetuses.⁽⁴⁴⁾ Pregnant women who continue to abstain from food are often found to have symptoms of anemia. In addition, there are groups of pregnant women who do not comply with existing prohibitions. This can be a reference, that although further evidence is needed, there are pregnant women who abstain from food which can increase the incidence of anemia.⁽⁴⁵⁾ If the mother has a culture of abstaining from eating foods containing iron, then the mother's nutritional needs will be reduced so that the growth of the fetus will not be very good. The lack of nutrients for the mother which are needed for blood formation, and the iron deficiency that occurs can be caused by a culture of abstaining from foods.⁽⁴⁶⁾

The sub-theme of fulfilling the appropriate nutrition is the event of wages/mangalehen mangan, the woman's family or the man's family will bring special food called Indahon Tondi, which means "food for the soul." This food usually consists of yellow sticky rice, roasted chicken called pangupa, chicken eggs, and various types of freshwater fish such as carp, red fish, gala shrimp, labosang, and habaro, vegetables. All of these foods are arranged on one large tray and then served to pregnant women as an expression of hope and prayer for the welfare of the mother and her fetus.⁽⁴⁰⁾ These foods have symbolic meanings. Yellow rice, for example, symbolizes prosperity and well-being that are expected to accompany the family being visited. Roasted chicken, eggs, and fish also have special meanings related to hopes for health and safety for the mother and baby. This ritual is not only intended to celebrate pregnancy, but also to provide spiritual support through prayer and the food served. During pregnancy, a mother needs more nutrition for herself and the development of the fetus in her womb.⁽⁴⁷⁾

CONCLUSION

Pregnancy conditions need to be supported by family support, health workers and the environment. Because in this process, the mother cannot be separated from social and cultural life that colors her new role. The existence of pregnancy rituals in the form of gathering family members, neighbors, friends providing social support makes the mother feel that she is not alone in her role. There is hope and acceptance from the environment that can help calm the mother during her pregnancy. Due to the lack of support, there are still many pregnant women who suffer from anemia. A mother who experiences anemia during pregnancy increases with the amount of family support she receives. Pregnant women experience stress, especially if their psychological health is disturbed. Therefore, it is hoped that the family of the pregnant woman can provide full support so that the pregnant woman can feel calm and comfortable during her pregnancy. In this study, the influence of socio-culture is closely related to the life of the pregnant woman during the pregnancy process, especially the role of the husband, dalihan na tolu (mora, kahanggi, anak boru) who have participated in meeting the nutritional needs of pregnant women, and helping with household chores.

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