

The Effect Of Educational Videos About Anemia On The Knowledge Of Pregnant Women In The Working Area Of The Satellite Health Center Of Bandar Lampung

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Article Info	ABSTRACT
<p>Keywords: Anemia, Pregnant Women, Educational Video, Knowledge</p>	<p>Anemia during pregnancy is a serious health problem and has a negative impact on maternal and fetal health. Data from the Bandar Lampung Health Office in 2022 shows anemia 10.08% of 19,592 pregnant women. One of the provisions of health education to increase pregnant women's knowledge about anemia is by providing education using video media to help pregnant women understand about anemia and obtain proper information. This study aims to determine the effect of educational videos about anemia on pregnant women's knowledge. The research method used Pre-Experimental with One Group Pre-Posttest Design approach. The population in this study were all Primigravida pregnant women at the Satelit Public Health Center Bandar Lampung, totaling 15 people, while the samples taken were 15 people using Total Sampling. This research was conducted in August 2024 in the Working Area of Satelit Public Health Center Bandar Lampung. Data analysis in this study used T-Test. The results of the study obtained questionnaire data before and after the intervention with average results before (70.33) and after (93.00). The analysis results showed a significant increase in pregnant women's knowledge about anemia. Statistical analysis showed a p-value of 0.000 ($P < 0.05$), concluding that there is an effect of Educational Video About Anemia on Pregnant Women's Knowledge in the Working Area of Satelit Public Health Center Bandar Lampung. The results of this study show that visual media such as educational videos can be effective in increasing pregnant women's health knowledge. Therefore, it is expected that officers can apply more broadly in public health programs, one of which is conducting educational counseling using videos.</p>
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INTRODUCTION

Current health problems in Indonesia include high maternal and infant mortality rates, infectious diseases, degenerative diseases, and nutritional issues. Nutrition and food issues are crucial as they determine the quality of human resources and have the potential to improve health status. Anemia is one of four major nutritional problems that remain unaddressed in

Indonesia. Indonesian women experience anemia due to iron and folic acid deficiencies in their bodies, along with additional risks such as infectious diseases, worm infections, and long-term illnesses (Eni, 2021). Anemia during pregnancy is a public health problem, particularly in developing countries, which has negative effects on pregnancy (Stephen et al., 2018).

One indicator of a country's development achievement shown by the Human Development Index (HDI) is the maternal mortality rate (MMR), which reflects the number of maternal deaths related to pregnancy, childbirth, and postpartum periods. Iron deficiency anemia in pregnant women is closely related to anemia, which can lead to higher maternal mortality rates. Additionally, anemia increases the frequency of pregnancy and childbirth complications in pregnant women. Maternal mortality rates, prematurity, low birth weight, and perinatal mortality increase (Nila & Fery, 2020).

WHO states that anemia is considered important or becomes a public health problem if population studies find a prevalence of 5.0% or higher. The highest prevalence of anemia is found in pregnant women in Sub-Saharan Africa (SSA) at 57%, followed by pregnant women in Southeast Asia at 48%, and the lowest prevalence at 24.1% is found in pregnant women in South Africa (SSA) (Stephen, et al., 2018).

According to Basic Health Research (Riskesdas) in 2018, anemia in pregnant women was 48.9 percent in Indonesia (Margawati, et al., 2023). Data obtained from the Lampung Provincial Health Office in 2018 showed that 100 out of 500 pregnant women experienced anemia (33.29%) (Susmita, et al., 2023). In 2022, data from the Bandar Lampung Health Office showed anemia in 10.08% of 19,592 pregnant women, and the prevalence of pregnant women with high-risk factors was found to be 4,402, with 1,975 pregnant women experiencing anemia (Lampung Provincial Health Office, 2023).

Technical and non-technical factors are several causes of low iron (fe) consumption rates, according to Fajrin 2020. Non-technical factors include pregnant women not knowing the schedule, time, and place of activities or services, inadequate facilities, and unsupportive transportation. Technical factors include pregnant women's lack of knowledge about schedules, times, and places of activities or services. These factors also include the level of education, knowledge, and attitudes of pregnant women. The government is currently improving family nutrition to reduce anemia. The government established policies on anemia in midwifery service standards, standard 6, which regulates midwives' roles in handling anemia in pregnancy. Midwives can find, prevent, and refer anemia (Komang & Kadek, 2021).

In developing countries, factors contributing to anemia during pregnancy vary depending on geographical location, diet, and season. These factors include anemia caused by parasites, such as malaria and hookworms, or chronic infections, such as TB and HIV. Deficiencies in micronutrients iron, folate, and vitamins A and B12 are also included. However, one of the main causes of anemia in pregnant women in Sub-Saharan Africa is low iron intake (Stephen et al., 2018).

It is reported that anemia during pregnancy endangers maternal and child health and increases the risk of maternal and perinatal death. Negative effects on maternal health include fatigue, poor work capacity, impaired immune function, increased risk of heart disease, and death. Additionally, anemia in pregnancy is associated with possible premature birth and low

birth weight babies. Infant mortality in developing countries is still dominated by LBW and premature infant deaths. This is also associated with the risk of Intrauterine Fetal Death (IUFD), low APGAR scores within 5 minutes, and Intrauterine Growth Restriction (IUGR), all of which increase the likelihood of stunting in infants under two years of age (Stephen et al., 2018).

Tanzania has taken steps to reduce the burden of anemia during pregnancy, including screening and treatment of anemia during pregnancy, providing a combination of folic acid and iron supplements for three months, providing deworming medication, Intermittent Prophylactic Treatment (IPTp) with Sulphadoxine Pyrimethamine (SP) for 14 weeks, and provision (Stephen, et al., 2018).

The Indonesian government prevents and controls anemia by providing iron tablet supplementation of one pill daily (60 mg iron and 0.400 mg folic acid) for at least 90 days during pregnancy. They also increase consumption of foods high in iron and protein, eat balanced and nutritious meals, use footwear to prevent hookworm infection, and visit areas where anemia frequently occurs (Ministry of Health, 2020).

In 2022, Sungkar stated that this program faces many challenges, including poor knowledge about anemia, low compliance with iron tablets, low antenatal visits, micronutrient deficiencies, and poor health education. One factor that influences pregnant women's compliance with iron tablet use is their knowledge about the importance of adequate iron intake during pregnancy (Zhagira, 2023).

Putri (2022) states that knowledge is one factor that can encourage or promote health behavior. Pregnant women who know and understand the effects or consequences of not consuming iron tablets properly will exhibit good health behavior to prevent anemia in pregnancy. Good perception or positive behavior towards iron supplements is another factor affecting pregnant women's compliance with iron supplements. Many pregnant women make mistakes in consuming iron tablets; this can include taking iron tablets in ways that don't align with the mother's wishes, taking iron tablets incorrectly, or experiencing nausea without support from the mother's partner or family. Non-compliance of pregnant women with iron tablet consumption can indicate how severe anemia will be experienced by pregnant women, so it's important for pregnant women to know the benefits of iron tablets (Zhagira, 2023).

Compliance is a multifaceted expression that includes self-perception, which differs between therapists and patients. The idea of compliance is used in clinical practice, but its meaning varies, even among healthcare practitioners. Healthcare practitioners often interchange the words "compliance" and "adherence," although there are many differences between the two terms. While compliance typically indicates passive action where patients follow a doctor's list of orders, adherence involves patients actively choosing to follow prescribed treatment because they are responsible for their own health. In other words, compliance is the act of patients following orders. Conversely, adherence is a more proactive and positive habit where patients change their lifestyle (Thummak et al., 2023).

Safitri says that although many efforts have been made to address anemia in 2020, there has been no significant decrease. By knowing about anemia during pregnancy, it is hoped that pregnant women who experience it will realize how important it is to maintain

their own and their fetus's health. To help pregnant women deal with anemia they experience, health professionals often use audiovisual media, also known as video, to provide health education (Rusliana, et al., 2023).

Education must support the dissemination of health education. Education increases everyone's awareness. One way to prevent, control, and treat anemia is by changing individual behavior through health promotion programs. These efforts not only include providing iron tablets during pregnancy that must be given at least ninety tablets, but health workers have also emphasized the importance of counseling, information, and education (Zhagira, 2023).

utilization of information technology in terms of equipment and management is very important in the modern era to improve teaching and learning effectiveness (Ahmaddien et al., 2022). If there is doubt, information is usually given verbally, mentioning the benefits and risks of procedures for patients. However, some patients do not fully understand these procedures due to their complexity. Most information materials available to patients are written in difficult-to-understand language, according to research.

Regardless of their education level, people prefer to use clear and easily understandable language. Besides leaflets or verbal information, the use of health technologies such as educational videos and audio can help fill gaps caused by other ineffective types of communication (Grilo et al., 2022). In this case, videos with moving images and sound can be used to increase appeal and convey messages or information more easily using more than one human sense (Zhagira, 2023).

Research results (Damayanti & Futriani, 2024) show that mothers' awareness about anemia must be increased by improving counseling services to inform mothers about anemia during pregnancy. Pregnant women will exhibit good health behavior to avoid various consequences and risks of anemia if they know and understand the consequences and ways to prevent anemia. Proper education is also important to improve health workers' skills. By using IEC materials such as leaflets, brochures, and video media, information can be provided to mothers and family members about anemia and how to prevent it, especially regarding Fe tablet supplementation during pregnancy.

According to other research (Rusliana et al., 2023), interventions using audiovisual media to teach about anemia can help pregnant women better understand anemia and obtain accurate information. Additionally, this health education is a good way to spread health messages to the community so they can improve their health in daily life. At the Satelit Public Health Center Bandar Lampung, initial pre-survey data was conducted in January, February, March, and April 2024. From the health center register, 62 pregnant women were found to be at high risk, of whom 21 experienced anemia. 9 of these pregnant women were primigravida, and 12 others were multigravida.

Researchers used knowledge factors about pregnant women's experiences to measure the incidence of anemia. They conducted research with primigravida pregnant women who were giving birth for the first time, as pre-survey data showed that 42% of pregnant women with high-risk status experienced anemia.

Results from interviews conducted with 25 pregnant women during antenatal care (ANC) showed that most problems faced by pregnant women were because they did not know about their health problems and did not comply with preventive measures given by health workers at health facilities. For example, health workers tell pregnant women that iron tablets are blood-adding tablets, but they don't know that these are tablets intended for pregnant women. Therefore, health education aimed at increasing knowledge (cognitive), feelings (affective), and skills (psychomotor) must be given.

Based on the description of the background of the problem entitled "The Effect of Educational Video About Anemia on Pregnant Women's Knowledge in the Working Area of Satelit Public Health Center Bandar Lampung," it draws the author's attention to conduct this research.

METHODS

This is a quantitative research using a pre-experimental design with a One Group Pretest and Posttest Design approach. The population in this study consisted of 15 primiparous pregnant women, using a total sampling technique at the Satelit Public Health Center Bandar Lampung with a sample size of 15 people. The research instrument used a questionnaire to measure respondents' knowledge. Bivariate analysis in this study used a paired T-test.

RESULTS AND DISCUSSION

Frequency Distribution of Pregnant Women's Characteristics Based on Age, Education, Trimester, Occupation, and Experience in Receiving Information

Table 1 Frequency Distribution of Pregnant Women's Characteristics Based on Age, Education, Trimester, Occupation, and Experience in Receiving Education

Characteristics	Frequency	Percentage (%)
Age		
17-20 years	3	20 %
21-25 years	6	40%
26-30 years	2	13,33%
31-35 years	4	26,67%
Total	15	100%
Occupation		
Housewife	8	53,33 %
Self-employed	3	20 %
Others	4	26,67%
Total	15	100%
Education		
Elementary School	2	13,33%
Junior High School	5	33,33%
Senior High School	7	46,67%
Higher Education	1	6,67%

Total	15	100%
Trimester		
I	8	53,37%
II	4	26,67%
III	3	20%
Total	15	100%
Experience in Receiving Education		
Yes	5	33,33%
No	10	66,67%
Total	15	100%

Based on Table 1, age characteristics show that most respondents were aged 21-25 years, comprising 6 respondents (40%). Occupational characteristics show that most respondents were housewives, with 8 respondents (53.33%). According to Nursalam, 2010 in (Tri dan Dwi, 2020), working is generally a time-consuming activity, and working for mothers will have an influence on family life.

Educational background characteristics show that most respondents had completed high school education, with 7 respondents (46.67%). This indicates that education is one of the factors influencing knowledge, as education is related to the development and behavioral changes of a person. Education affects the learning process; the higher one's education level, the easier it is to obtain information (Mubarak, 2018).

Pregnancy age characteristics show that most were in trimester I with 8 respondents (53.33%). Gestational age can affect hemoglobin levels in pregnant women, where increasing gestational age will decrease hemoglobin levels in pregnant women. Therefore, doctors or midwives recommend pregnant women consume at least 90 iron tablets during pregnancy, provided through health centers or integrated health posts to prevent the surge in anemia cases among pregnant women. These research results are reinforced by the opinion of (Vernissa et al., 2017).

Experience characteristics, which indicate whether they have received health education about anemia or not, show that more respondents had never received health education, with 10 respondents (66.67%). Where an individual as someone who receives experience, people who receive responses or appreciation usually do not release the experience they are currently experiencing

Average Knowledge Level Before Being Given Health Education About Anemia Using Educational Video

Table 2 Average Knowledge Before Given Educational Video Intervention

Knowledge	N	Mean	SD	Min-Max
Pre-Test	15	70,33	18,465	35-100

Based on Table 2, the mean knowledge of primigravida pregnant women about anemia before being given health education through educational video was 70.33 with a standard deviation of 18.465. The lowest score was 35 and the highest was 100 at the Satelit Public

Health Center Bandar Lampung. According to the health workers' reference assessment, the average knowledge score of pregnant women about anemia is categorized as poor knowledge.

Based on the research results, it was found that there were still pregnant women who did not know about anemia. This is evident from the research questionnaire results, where 70.33 of pregnant women did not know about conditions considered as anemia, vitamins that help iron absorption, and proper ways to prevent anemia. Knowledge is the result of knowing and occurs after people sense a particular object. Sensing occurs through human senses: sight, view, smell, taste, and touch. Most human knowledge is acquired through the eyes and ears. Knowledge is a very important domain for the formation of someone's actions (Juwita, 2023).

Knowledge is the main factor that is very important for the formation of someone's actions (over behavior). Based on experience and research, it is proven that behavior based on knowledge will last longer than behavior not based on knowledge. Knowledge can form certain beliefs so that a person behaves according to those beliefs. Knowledge is the result of sensing an object. This sensing mostly comes from sight and hearing (Juwita, 2023).

Health promotion is intended to provide enlightenment and change society toward better conditions as aspired, an effort to disseminate new things so that people can be interested in implementing them in their daily lives, an activity to educate something to the community, give them knowledge, information, and new abilities, so they can form attitudes and life behaviors according to what should be. This research aligns with research conducted by (Nuraeni, et.al, 2023) on the Effectiveness of Audio Visual Education in Increasing Knowledge about Anemia in pregnant women, where the average knowledge of pregnant women before being given health education was 56.7%.

Based on the research results obtained, the researchers assume that before being given health education with the educational video media method about anemia, there were still pregnant women who had low knowledge. This is because pregnant women have not been exposed to information about anemia, so they do not yet understand about anemia.

Average Knowledge Level After Being Given Health Education About Anemia Using Educational Video

Table 3 Average Knowledge After Given Educational Video Intervention

Knowledge	N	Mean	SD	Min-Max
Post-Test	15	93,00	4,928	85-100

Based on the research results, it was found that the mean knowledge of primigravida pregnant women about anemia after being given health education through educational video media was 93 with a standard deviation of 4.928. The lowest score was 85 and the highest was 100 at the Satelit Public Health Center Bandar Lampung. Thus, according to the health workers' reference assessment, the average knowledge score is categorized as good knowledge.

Many efforts to overcome anemia have been made, but haven't shown significant decrease due to mothers' lack of knowledge about anemia. Therefore, with this health

education about anemia using educational video media, during pregnancy, pregnant women are expected to pay attention to how important health is for both the mother and fetus, so that the incidence rate in pregnant women does not increase each year. And to improve health education by motivating communities to cooperate in the development and implementation of health services and health education programs and providing counseling to pregnant women about how to maintain health during pregnancy and increase mothers' awareness about possible high risks or pregnancy/delivery complications and how to recognize these complications early.

In health education, the more senses used, the more and clearer knowledge obtained. This shows that the presence of props or media aims to direct as many senses as possible to an object to facilitate understanding, such as using educational video media. The increase in pregnant women's knowledge after being given health counseling occurs because the health counseling is accompanied by media such as educational videos and lecture methods. So after providing health education using video media, it can increase pregnant women's knowledge about anemia. Audio-visual learning media is better for providing information visually, visual recognition, and for learning procedures and is very good for developing information and developing attitudes, opinions, and motivation of pregnant women.

This research aligns with research conducted by (Nuraeni, et.al, 2023) on the Effectiveness of Audio Visual Education in Increasing Knowledge about Anemia in pregnant women, where the average knowledge of pregnant women after being given intervention showed an increase in average post-test scores to 91.7%.

Based on the research results obtained, the researchers conclude that there was an increase in the mean knowledge of pregnant women. This occurs because when providing health education with educational videos, pregnant women can receive information by thinking about and reflecting on it, so this already good knowledge should be maintained by exploring deeper knowledge about anemia through providing information about anemia. The use of video media delivery method is one way that is widely used to increase knowledge levels effectively for both high and low educated targets, the place for implementing health education activities is more organized, and the material delivered is in accordance with health education objectives. The lecture method will generate audio-visual activity in health education participants, making information delivery more optimal.

The Effect of Educational Video About Anemia on Pregnant Women's Knowledge

Table 4 The Effect of Educational Video About Anemia on Pregnant Women's Knowledge in the Working Area of Satelit Public Health Center Bandar Lampung

Knowledge	N	Mean	SD	Min-Max	<i>p-value</i>
Pre-Test	15	70,33	18,465	35-100	0,000
Post-Test	15	90,00	4,928	85-100	

Based on the research results, the normality test using the Shapiro-Wilk test showed that before health education using video media was given, with df 15 and statistical value 0.983. The Shapiro-Wilk test of normality results obtained a p-value = 0.984, meaning at $\alpha > 0.05$, it was concluded that the normality test results were normal. Similarly, the results after

health education using video media showed df of 15 and statistics 0.896. The Shapiro-Wilk test of normality results obtained a p-value = 0.082, meaning at $\alpha > 0.05$. Therefore, it was concluded that the normality test results showed Sig. > 0.05, meaning the research data was normally distributed.

Based on the T-Test results, the statistical t-test results obtained a p-value = 0.000, meaning at $\alpha = 0.05$, it was concluded that there was an effect of Educational Video About Anemia on Pregnant Women's Knowledge in the Working Area of Satelit Public Health Center Bandar Lampung. Seeing the increasing problem of anemia cases in pregnant women and its rapid spread, programs are needed that can help reduce anemia cases in pregnant women. An effective strategy to facilitate behavior change for anemia prevention in pregnant women and reduce risk behavior is providing health education about anemia to pregnant women through direct counseling to groups of pregnant women. The cause of increasing prevalence of anemia in pregnant women is due to lack of understanding about anemia during pregnancy.

According to Azwar in general health conception, health education is defined as health education activities carried out by disseminating messages and instilling beliefs. Thus, the community is not only aware, knowing and understanding but also willing and able to follow health-related recommendations. With this understanding, health education officers must master communication science and have a complete understanding of the message to be conveyed. Health education aims to change unhealthy behavior to healthy behavior.

This research aligns with research conducted by (Rusliana, Norhapifah, dkk, 2023) on the Effect of health education using audiovisual media about anemia on pregnant women's knowledge level, which found an effect of health education using video media on changes in knowledge of pregnant women (p-value = 0.000).

The use of video as an educational medium can attract attention, clarify material by showing images from several different angles, and stimulate effective, cognitive, and psychomotor domains. Researchers prove that audio-visual or video media education has a positive impact on pregnant women with increased knowledge. The video media provided will be easier to digest and remember and easily accessible. Audiovisual media includes aspects that can be heard and seen. Examples include sound slides, films of various sizes, video recordings, and more. Because it combines visual and auditory media aspects, this media is considered more capable and interesting. Video messages have the power to evoke strong emotions and have direct effects that cannot be done by other media. Additionally, video content can increase knowledge because it stimulates and motivates thinking.

From the above research results, there was an effect of health education using educational video media on primigravida pregnant women's knowledge about anemia because the health education was provided with lecture methods and educational video media, which is one way widely used to increase clearer information knowledge to pregnant women, making information delivery more optimal. Furthermore, the strengthening effect of health education on knowledge is also influenced by education. Health education is an activity or effort to convey health messages to individuals or groups where it is expected that groups or individuals can obtain knowledge about health.

CONCLUSION

Based on the results obtained regarding the Effect of educational video about anemia on pregnant women's knowledge in the working area of Satelit Public Health Center Bandar Lampung, the following conclusions can be drawn: The average knowledge before being given health education using educational video about anemia was 70.33 (Poor knowledge). The average knowledge after being given health education using educational video about anemia was 93 (Good knowledge). There was an Effect of Educational Video About Anemia on Pregnant Women's Knowledge in the Working Area of Satelit Public Health Center Bandar Lampung with a p-value of 0.000 (<0.05).

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