


The Relationship Between Health Belief Model (HBM) And Female Adolescents' Compliance In Consuming Fe Tablets In The Working Area Of Uptd Padang Cermin Health Center, Pesawaran District, 2024

Ririn Eka Yuliani¹, Desi Kumalasari², Nopi Anggista³, Riona Sanjaya⁴

¹Program Studi Sarjana Kebidanan, Fakultas Kesehatan, Universitas Aisyah Pringsewu, ^{2,3,4}Universitas Aisyah Pringsewu

| Article Info | ABSTRACT |
|--|---|
| <p>Keywords: Health Belief Model, compliance, Fe tablets</p> | <p>The nutritional problem often experienced by female adolescents is iron deficiency, making adolescent girls during puberty at high risk of iron deficiency anemia. The anemia prevention efforts carried out so far by health workers at Padang Cermin Health Center is the provision of Fe tablets targeting female adolescents aged 12-18 years. Although Fe tablets have been provided, the results of Hb screening in 2023 showed 26.2% with an average Hb level of 9.8 g/dl, categorized as anemic. The research objective was to determine the relationship between HBM and female adolescents' compliance in consuming Fe tablets. This is a quantitative research, with an analytical research design using a cross-sectional approach. The research was conducted from August 1-30, 2024, at 6 adolescent Integrated Service Posts in the working area of UPTD Padang Cermin Health Center. The population consisted of all female adolescents aged 12-18 years totaling 346 people, with a sample size of 78 people. The sampling technique used was stratified random sampling. Data analysis used the chi-square test. The research results showed that the frequency distribution of female adolescents' HBM was higher in the poor category at 51 people (65.4%), and the frequency distribution of female adolescents' compliance in consuming Fe tablets was higher in the non-compliant category at 48 people (61.5%). Chi-square test results showed there is a relationship between HBM and female adolescents' compliance in consuming Fe tablets (p-value = $0.012 < 0.05$). Health workers should be more active in socializing key messages that anemia can be controlled if compliant in consuming Fe tablets regularly, which can be disseminated through social media channels, school counseling, or adolescent integrated service posts using fun game methods to make socialization more attractive according to adolescent characteristics.</p> |
| <p>This is an open access article under the CC BY-NC license</p>  | <p>Corresponding Author: Ririn Eka Yuliani Universitas Aisyah Pringsewu, Jl. A Yani No. 1 A Tambak Rejo, Wonodadi, Kec. Pringsewu, Kabupaten Pringsewu ririnekayuliani86@gmail.com</p> |

INTRODUCTION

The United Nations' Sustainable Development Goals (SDGs) Youth 2030 states that the theme "Youth for the SDGs and the SDGs for Youth" is an initiative aimed at activating young people or adolescents to contribute to achieving sustainable development goals. SDGs Youth has 17 agendas, one of which is ending hunger and achieving food security as well as improving nutrition, including increasing nutritional needs for adolescent girls (United Nations, 2023).

One nutritional problem often experienced by female adolescents is iron deficiency, making adolescent girls during puberty at high risk of iron deficiency anemia (Hb < 12 g/dl), caused by significant iron loss during menstruation. This is worsened by insufficient iron intake, where iron is greatly needed by female adolescents' bodies for accelerated growth and development. Anemia in female adolescents will impact health and academic achievement and will later risk anemia during pregnancy, which can cause suboptimal fetal growth and development and potentially cause pregnancy and delivery complications as well as maternal and child mortality (Ministry of Health RI, 2023).

Research by the World Health Organization (WHO), World Vision International (WVI), Sight & Life, and DSM - Firmenich in 2023 titled "Tackling Adolescent Iron Deficiency Anaemia in Low and Middle Income Countries" found that more than one billion adolescent girls and women worldwide suffer from anemia, and 60% of the total global anemia burden in adolescent females aged 15 to 19 years is caused by iron deficiency. Intermittent Iron Folic Acid Supplementation (IFAS) is recommended for all menstruating adolescent girls and non-pregnant adult women to prevent iron deficiency anemia.

Research conducted by Weyand (2023) titled "Iron Deficiency Goes Unnoticed in Too Many U.S. Female Adolescents" found that many adolescent girls in the United States may not have enough iron in their bodies. The majority of adolescent girls may never know, due to lack of routine Hb testing. Weyand's analysis of blood sample data collected as part of the National Health and Nutrition Examination Survey found that 40% of women in America aged 12-21 years experience anemia due to iron deficiency.

Based on research conducted by Divyamol & Sajna (2023) titled "Prevalence of Anaemia Among Adolescent Girls in a Rural Area of Central Kerala, South India," anemia in adolescent girls has become a significant public health problem. Research results found that the prevalence of anemia among participants was 26.3%. Of the total girls experiencing anemia, 94% had mild anemia (Hb between 10-11.9 g/dl) and the remainder had moderate anemia (Hb between 7-9.9 g/dl).

Indonesia is a country with three nutritional problems (triple burden), namely undernutrition (stunting and wasting), overnutrition (overweight and obesity), and micronutrient deficiencies such as anemia. The prevalence of anemia in adolescent girls in Indonesia remains high and is a public health problem. Based on the 2018 Basic Health Research, the prevalence of anemia in adolescents aged 5-14 years was 26.8% and the prevalence of anemia in adolescents aged 15-24 years was 32%. The Ministry of Health is responsible for achieving specific intervention services that directly target target groups, with

a target of 58% of adolescent girls consuming Blood Supplement Tablets (TTD). However, adolescent girls' compliance in consuming TTD according to standards remains very low at 1.4% (Ministry of Health RI, 2023).

Based on the 2018 Basic Health Research data, Lampung Province ranks first in the Sumatra region with an anemia prevalence in adolescent girls (10-19 years) of 24.3%. The proportion of Female Adolescents Aged 10-19 Years who Obtained Blood Supplement Tablets (TTD) in Lampung Province was 20.9%. Efforts to overcome anemia in female adolescents in Lampung Province are focused on promotion and prevention activities, namely increasing consumption of iron-rich foods, increasing fortification of food ingredients with iron and folic acid, and TTD supplementation. However, the trend of female adolescent coverage receiving TTD in Lampung Province has decreased, from 59.28% in 2020, decreasing to 48.21% in 2021, and further decreasing to 40.78% in 2022 (Lampung Province Health Office, 2022).

Based on hemoglobin (Hb) screening results conducted by the Family Health and Community Nutrition Section of Pesawaran District Health Office for female adolescents (aged 10-18 years) in 2021, 25.3% had an average Hb level of 9.8 g/dl categorized as anemia, in 2022 decreased to 20.3% with average Hb level of 10.6 g/dl categorized as anemia, and in 2023 increased again to 25.5% with average Hb level of 10.2 g/dl categorized as anemia (Family Health and Community Nutrition Section of Pesawaran District Health Office, 2023).

Padang Cermin Health Center is one of the health facilities in Pesawaran District, where anemia prevention efforts carried out so far have been providing Fe tablets targeting female adolescents aged 12-18 years. Fe tablets are distributed by the Health Center to schools and during adolescent integrated service posts with a given dose of 1 tablet per week for a year per female adolescent, and Hb level screening is conducted monthly by Health Center health workers. Although Fe tablet provision has been implemented, Hb screening results for female adolescents in 2021 showed 23.4% with average Hb level of 10.5 g/dl categorized as anemia, in 2022 increased to 25.9% with average Hb level of 10.2 g/dl categorized as anemia, and in 2023 increased again to 26.2% with average Hb level of 9.8 g/dl categorized as anemia (Female Adolescent Anemia Screening Report Padang Cermin Health Center 2021-2023).

Based on preliminary survey results conducted by researchers on April 25, 2024, on 10 female adolescents present during adolescent Integrated Service Post services, digital Hb test examination results showed 7 people (70%) female adolescents had Hb levels < 12 g/dl. Free interview results with these 7 female adolescents revealed that in the last month they had received 3 Fe tablets but 100% of female adolescents did not finish them. The majority of female adolescents said their reason for not wanting to consume Fe tablets was that they often experienced nausea and disliked the taste and aroma of the Fe tablets, causing female adolescents to be non-compliant in consuming distributed Fe tablets. Further interview results found 100% of adolescents had the perception that consuming Fe tablets was not important, as so far even though not consuming Fe tablets regularly did not cause health problems.

So far, the solution implemented by Padang Cermin Health Center health workers to increase female adolescents' compliance in consuming Fe tablets is socialization about Fe tablet benefits conducted during adolescent Integrated Service Post implementation, and monitoring using control cards. Female adolescents' compliance in consuming Fe tablets is health behavior. According to Green & Rosenstock in Irwan (2017), factors related to behavior are predisposing factors including: knowledge, attitudes, beliefs, values; enabling factors including health facilities and health infrastructure; and reinforcing factors including health workers' attitudes and behaviors. Main aspects related to health behavior include perception, age, and education.

Another factor related to health behavior is belief, according to Tarkang and Zotor (2015) in Djannah et al. (2020), a person's consideration before engaging in healthy behavior and disease prevention efforts depends on their beliefs. The model used to describe individual beliefs about healthy living behaviors, diseases, and available means to avoid or prevent disease occurrence is called the Health Belief Model (HBM). Based on research conducted by Annisa (2018) about factors influencing female adolescents' intentions in consuming Fe tablets as anemia prevention efforts at SMK Wachid Hasyim 1 Surabaya. Chi-square test results found significant relationships between Health Belief Model components namely perceived barrier (p value 0.003) and self efficacy (p value = 0.041) with female adolescents' intentions in consuming Fe tablets.

Healthy behavior in this case female adolescents' compliance in consuming Fe tablets is determined by female adolescents' beliefs/convictions or perceptions about anemia and Fe tablet benefits themselves. Based on the description in the background above, researchers are interested in conducting a study to look more deeply and with more in-depth analysis with research titled The Relationship Between Health Belief Model (HBM) and Female Adolescents' Compliance in Consuming Fe Tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District, 2024.

METHODS

This type of research is quantitative with an analytical survey research design using a cross sectional approach. The population in this study was all female adolescents aged 12-18 years in the working area of UPTD Padang Cermin Health Center, Pesawaran District for the period January - July 2024, totaling 346 people. Sample size calculation using Lameshow (1997) yielded a sample size of 78 people. The research instrument used questionnaires and research analysis used chi square. The inclusion and exclusion criteria in this study are:

Inclusion criteria

- a. Female adolescents aged 12-18 years
- b. Can read and write
- c. Able to communicate well
- d. Visiting the Integrated Service Post when research is conducted
- e. Residing in the working area of UPTD Padang Cermin Health Center, Pesawaran District

Exclusion criteria:

- Not bringing control card / supplementation monitoring card
- Refusing to be a respondent

RESULTS AND DISCUSSION

Table 1 Frequency distribution of Health Belief Model (HBM) of female adolescents in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District

| Health Belief Model (HBM) | Jumlah | % |
|---------------------------|--------|-------|
| Kurang baik | 51 | 65,4 |
| Baik | 27 | 34,6 |
| Total | 78 | 100,0 |

Based on table 1, the frequency distribution of Health Belief Model (HBM) of female adolescents was higher in the poor category at 51 people (65.4%).

Table 2 Frequency distribution of female adolescents' compliance in consuming Fe tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District

| Adolescent Compliance | Total | % |
|-----------------------|-------|-------|
| Non-compliant | 48 | 61,5 |
| Compliant | 30 | 38,5 |
| Total | 78 | 100,0 |

Based on table 2, it can be seen that the frequency distribution of female adolescents' compliance in consuming Fe tablets was higher in the non-compliant category at 48 people (61.5%).

Table 3 Relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District

| Health Belief Model (HBM) | Female adolescents' compliance in consuming Fe tablets | | | | Total | P value | OR | C1 95% | | |
|---------------------------|--|------|-----------|------|-------|---------|-------|--------|-------|--------|
| | Non-compliant | | Compliant | | | | | n | % | Lower |
| | n | % | n | % | | | | | | |
| Lower | 37 | 72,5 | 14 | 27,5 | 51 | 100 | 0,012 | 3,844 | 1,438 | 10,280 |
| Upper | 11 | 40,7 | 16 | 59,3 | 27 | 100 | | | | |
| Total | 48 | 61,5 | 30 | 38,5 | 78 | 100 | | | | |

Based on table 3, it can be seen that out of 51 respondents with poor category Health Belief Model (HBM), 37 people (72.5%) female adolescents were non-compliant in consuming Fe tablets, while out of 27 respondents with good category Health Belief Model (HBM), 16 people (59.3%) female adolescents were compliant in consuming Fe tablets. Chi square statistical test results obtained p value $< \alpha$ ($0.012 < 0.05$). This means H_0 is rejected, and it can be concluded there is a relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024. OR value of 3.844 means respondents

The Relationship Between Health Belief Model (HBM) And Female Adolescents' Compliance In Consuming Fe Tablets In The Working Area Of Uptd Padang Cermin Health Center,

Pesawaran District, 2024–Ririn Eka Yuliani et.al

with poor category Health Belief Model (HBM) have a 3.844 times greater risk of being non-compliant in consuming Fe tablets compared to respondents with good category Health Belief Model (HBM).

Discussion

Health Belief Model (HBM)

Based on the research results above, the frequency distribution of Health Belief Model (HBM) of female adolescents was higher in the poor category at 51 people (65.4%). This means the majority of female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 had poor perceptions regarding their beliefs about Fe tablets for anemia prevention.

This result aligns with research by Narsih & Hikmawati (2020) about the influence of perceived susceptibility and perceived benefits on female adolescents' behavior in preventing anemia among female students in classes X and XI at SMA Unggulan Zainul Hasan. Statistical test data analysis found that most female adolescents (76.5%) had low perceived susceptibility and low perceived benefits (77.9%). This result is supported by Janz and Becker's theory in Rachmawati (2019) which states that Health Belief Model is a concept that reveals individuals' reasons for being willing or unwilling to perform behaviors. Health Belief Model is health behavior influenced by individual perceptions regarding their beliefs about illness and available ways to reduce the occurrence of disease symptoms.

According to researchers, the majority of female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 had poor category Health Belief Model (HBM) or had poor perceptions regarding their beliefs about Fe tablets for anemia prevention due to several factors: female adolescents lack knowledge that they are a risk group vulnerable to experiencing anemia, respondents also lack knowledge that anemia has negative impacts both short-term like decreased concentration and academic achievement and long-term negative impacts in the future especially during pregnancy and childbirth. Another factor causing the majority of female adolescents to have poor Health Belief Model is they don't feel the benefits of Fe tablet consumption because they more dominantly feel that Fe tablets have an unpleasant taste and smell, thus deciding to be non-compliant in consuming Fe tablets.

Conversely, according to researchers, female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 who had good category Health Belief Model (HBM) or had good perceptions regarding beliefs about Fe tablets for anemia prevention was due to several factors: female adolescents already know that they are a risk group vulnerable to experiencing anemia, respondents also know that anemia has negative impacts both short-term like decreased concentration and academic achievement and long-term negative impacts in the future especially during pregnancy and childbirth. Another factor is female adolescents have felt health benefits if compliant in Fe tablet consumption so they can ignore the unpleasant taste and smell when consuming Fe tablets.

Female adolescents' compliance in consuming Fe tablets

Based on the research results above, the frequency distribution of female adolescents' compliance in consuming Fe tablets was higher in the non-compliant category at 48 people (61.5%). This means the majority of female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 had Fe tablet consumption behavior < 4 times/month or not according to the dose recommended by health workers.

This result aligns with research by Irwanto, et al. (2021) about the relationship between perceived barriers and self-efficacy with Fe tablet consumption intensity as anemia prevention efforts in the working area of Sidomulyo Health Center, Wates District, Kediri Regency. Univariate test results found that most respondents' Fe tablet consumption intensity was in the weak category at 69 respondents (44.5%). This shows that the majority of respondents' Fe tablet consumption intensity was not in accordance with Ministry of Health recommendations of one tablet once a week.

This result is supported by Ministry of Health RI theory (2023) which states that female adolescents' awareness in consuming Fe tablets remains low even though TTD consumption is very important to support daily iron needs fulfillment for female adolescents. Female adolescents have increased iron needs to prevent anemia because: iron needs increase, as female adolescents are in a rapid growth phase and have more activities. Additionally, female adolescents experience blood loss monthly through menstruation. If various nutrient needs are not met then the risk of anemia in female adolescents increases. Some female adolescents practice incorrect diet patterns to lose weight, by limiting food intake, thus adding to anemia risk.

According to researchers, the majority of female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 were non-compliant in consuming Fe tablets because adolescent characteristics tend to imitate their friends' behavior or called conformity, which is behavior changing attitudes and behaviors according to environment or peer groups. This causes if female adolescents are friends and socialize with individuals or groups that are non-compliant in consuming Fe tablets then other friends will do the same. Additionally, female adolescents' knowledge is poor about Fe tablet benefits; knowledge is the most important domain in forming health behavior in this case compliance in consuming Fe tablets. Fe tablet taste and aroma that can cause nausea can also contribute to causing female adolescents to be non-compliant in consuming Fe tablets according to established doses. Free interview results showed most female adolescents said Fe tablet taste and aroma stimulate nausea occurrence thus stimulating adolescents to be non-compliant in consuming Fe tablets as recommended.

Conversely, female adolescents aged 12-18 years in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 in the compliant category in consuming Fe tablets was because female adolescents are friends and socialize with individuals or groups that are compliant in consuming Fe tablets so will do the same namely being compliant in consuming Fe tablets. Additionally, female adolescents also have good knowledge about Fe

tablet benefits and risks that arise if not consuming Fe tablets regularly so that knowledge is then applied into health behavior in this case compliance in consuming Fe tablets. This knowledge also causes although Fe tablet taste and aroma can cause nausea it does not prevent female adolescents from remaining compliant in consuming Fe tablets according to established doses. Interview results with adolescents compliant in consuming Fe tablets said although Fe tablet taste and aroma stimulate nausea occurrence but remain compliant in consuming Fe tablets as recommended because remembering Fe tablet benefits for health and risks that arise if not consuming Fe tablets regularly.

Relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets

Based on research results it can be known that out of 51 respondents with poor category Health Belief Model (HBM), 37 people (72.5%) female adolescents were non-compliant in consuming Fe tablets, while out of 27 respondents with good category Health Belief Model (HBM), 16 people (59.3%) female adolescents were compliant in consuming Fe tablets. Chi square statistical test results obtained p value $< \alpha$ ($0.012 < 0.05$), meaning H_0 is rejected, it can be concluded there is a relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024. OR value of 3.844 means respondents with poor category Health Belief Model (HBM) have a 3.844 times greater risk of being non-compliant in consuming Fe tablets compared to respondents with good category Health Belief Model (HBM).

This result aligns with research by Annisa (2018) about factors influencing female adolescents' intentions in consuming Fe tablets as anemia prevention efforts at SMK Wachid Hasyim 1 Surabaya. Chi square test results found significant relationships between Health Belief Model components namely perceived barrier (p value 0.003) and self efficacy (p value = 0.041) with female adolescents' intentions in consuming Fe tablets. This result is supported by Tarkang and Zotor's theory (2015) in Djannah et al. (2020) which states that a person's consideration before engaging in healthy behavior and disease prevention efforts depends on their beliefs. The model used to describe individual beliefs about healthy living behaviors, diseases, and available means to avoid or prevent disease occurrence is called Health Belief Model (HBM). In language, Health Belief Model has three main words as a concept, namely health, belief, and model. Health is defined as a perfect state physically, mentally, and socially, and not just free from disease and disability. Belief in English means believe or conviction and model is representation of an object, thing, or ideas in simplified form from natural conditions or phenomena. Health Belief Model is a model that explains a person's consideration before they engage in healthy behavior and has function as disease prevention efforts.

According to researchers, there is a relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets in the Working Area of UPTD Padang Cermin Health Center, Pesawaran District in 2024 because female adolescent respondents who have poor Health Belief Model will have poor perceived susceptibility or don't have belief/conviction that they are vulnerable to experiencing anemia, respondents

have poor perceived severity or don't have belief that anemia will give negative impacts for health now or in the future, respondents also have poor perceived barriers because not making efforts to overcome negative aspects that prevent adolescents from consuming Fe tablets like nausea or unpleasant Fe tablet taste and respondents have poor perceived benefits or not confident about benefits felt if compliant in consuming Fe tablets so don't take action as anemia prevention efforts. Poor perceived susceptibility, perceived severity, perceived barriers and perceived benefits above will stimulate or encourage adolescents to not make anemia prevention efforts, which is applied into non-compliant behavior in consuming Fe tablets.

Conversely, female adolescent respondents who have good Health Belief Model will have good perceived susceptibility or have belief/conviction that they are vulnerable to experiencing anemia, respondents have good perceived severity or have belief that anemia will give negative impacts for health now or in the future, respondents also have good perceived barriers because making efforts to overcome negative aspects that prevent adolescents from consuming Fe tablets like nausea or unpleasant Fe tablet taste and respondents have good perceived benefits or confident about benefits felt if compliant in consuming Fe tablets so take action as anemia prevention efforts. Good perceived susceptibility, perceived severity, perceived barriers and perceived benefits above will stimulate or encourage adolescents to make anemia prevention efforts, which is applied into compliant behavior in consuming Fe tablets.

Based on research results it is also known that although respondents have poor Health Belief Model (HBM) but compliant in consuming Fe tablets and respondents have good Health Belief Model (HBM) but non-compliant in consuming Fe tablets. This is because factors influencing female adolescents' compliance in consuming Fe tablets are not only Health Belief Model. This means although respondents have poor Health Belief Model but get support from parents as Fe tablet medication consumption supervisors, have friend environment that supports regular Fe tablet consumption then will cause respondents to be compliant in consuming Fe tablets. Conversely although respondents have good Health Belief Model but lack support from parents as Fe tablet medication consumption supervisors, have friend environment that lacks support for regular Fe tablet consumption, forget to consume Fe tablets or Fe tablets lost before consumption then will cause respondents to be non-compliant in consuming Fe tablets.

CONCLUSION

Based on the research results, the following conclusions can be drawn: The frequency distribution of Health Belief Model (HBM) of female adolescents was higher in the poor category at 51 people (65.4%). The frequency distribution of female adolescents' compliance in consuming Fe tablets was higher in the non-compliant category at 48 people (61.5%). There is a relationship between Health Belief Model (HBM) and female adolescents' compliance in consuming Fe tablets (p -value = 0.012 < 0.05).

REFERENCE

- Alam. (2021). *Konsep kepatuhan*. dalam www.repository.itsk-soepraoen.ac.id. diakses tanggal 27 April 2024.
- Annisa, FN. (2018). *Faktor yang mempengaruhi niatan remaja putri dalam mengkonsumsi tablet Fe sebagai upaya pencegahan penyakit anemia di SMK Wachid Hasyim 1 Surabaya*. Jurnal Kesehatan Tambusai. Volume 4, Nomor 2, Juni 2023. ISSN : 2774-5848. Dalam www.repository.unair.ac.id diakses tanggal 27 April 2024.
- Dinas Kesehatan PL. (2022). *Profile Kesehatan Provinsi Lampung*. Lampung
- Divyamol & Sajna, SM. (2023). *prevalence of anaemia among adolescent girls in a rural area of Central Kerala, South India*. International Journal of Community Medicine and Public Health. DOI: 10.18203/2394-6040.ijcmph20220226. Dalam www.researchgate.net diakses tanggal 27 April 2024
- Djannah, SN. dkk. (2020). *Buku Ajar Promosi Kesehatan Dan Perubahan Perilaku*. Yogyakarta : CV Mine
- Irwanto, dkk. (2021). *Hubungan persepsi hambatan dan kemampuan diri dengan intensitas konsumsi tablet Fe sebagai upaya pencegahan anemia di wilayah kerja Puskesmas Sidomulyo Kecamatan Wates Kabupaten Kediri*. Jurnal kebidanan. Vol. 10. No. 2. P-ISSN : 2302-3082. Dalam www.akbid-dharmahusada-kediri.e-journal.id diakses tanggal 26 April 2024
- Kemendes RI, (2023). *Remaja Bebas Anemia: Konsentrasi Belajar Meningkatkan, Bebas Prestasi*. Dalam www.ayosehat.kemkes.go.id diakses tanggal 28 April 2024
- Kemendes RI. (2023). *Buku saku pencegahan anemia pada ibu hamil dan remaja putri*. Jakarta : Direktorat Gizi dan Kesehatan Masyarakat
- Narsih, U & Hikmawati, N. (2020). *Pengaruh persepsi kerentanan (perceive susceptibility) dan persepsi manfaat (perceived benefit) terhadap perilaku remaja putri dalam pencegahan anemia pada remaja putri kelas X dan XI SMA Unggulan Zainul Hasan*. Indonesian Journal for Health Sciences Vol. 4, No. 1, ISSN 2549-2748. Dalam www.journal.umpo.ac.id diakses tanggal 26 April 2024.
- Pratama, (2021). *Konsep kepatuhan*. dalam www.repository.itsk-soepraoen.ac.id. diakses tanggal 27 April 2024
- United Nations. (2023). *Youth & 2030 Agenda for Sustainable Development : Youth for the SDGs and the SDGs for Youth!*. Dalam www.un.org diakses tanggal 26 April 2024
- UPTD Puskesmas Padang Cermin. (2023). *Laporan Skrining Anemia rematri Puskesmas Padang Cermin 2021 – 2023*. Padang Cermin. Unit Program Kesehatan dan Gizi keluarga
- Weyand, A. (2023). *Iron deficiency goes unnoticed in too many U.S. female adolescents*. Dalam www.sciencenews.org diakses tanggal 26 April 2024
- World Health Organization (WHO). (2023). *Tackling adolescent iron deficiency anaemia in low and middle income countries*. Dalam www.wvi.org diakses tanggal 26 April 2024