Jurnal Kesehatan
Vol. 17, No. 1, Juni 2024, pp. 12~24
p-ISSN: 1979-7621, e-ISSN: 2620-7761, DOI: 10.23917/jk.v17i1.2527

Determinants of Compliance Behavior in Consuming Blood Supplement Tablets in Adolescent Girls

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How to Cite: Mukharomah, U., & Budiono, I. Determiants of Adherence to Consumption of Blood Supplement Tablets in Female Adolescents. *Jurnal Kesehatan*, *17*(1), 12–24. https://doi.org/10.23917/jk.v17i1.2527

Article Info

Article History:
Submission: 18 August 2023
Acceptance: 5 September 2023

Keywords: *A*nemia, compliance, adolescent girls, blood suplement tablets

ABSTRACT

Introduction: Anemia is a condition where the body experiences a lack of iron levels which appears when blood hemoglobin (Hb) is less than normal (12 g/dl), with the age group that has the greatest risk, one of which is young women. Tried to intensify preventive efforts by administering blood supplement tablets (BST), but these efforts have not worked as expected. This research was conducted to determine the factors that correlate with adherence to consuming blood supplement tablets (BST) in young women. **Method**: The research took place at SMAN 6 Semarang, this research used observational analytics with a cross sectional design. The sample determined was 221 female students of class 11 science and 11 social studies, taken using simple random sampling calculations. Research data was obtained from the results of systematic questionnaire scores including knowledge, BST distribution, attitudes, teacher support, parent support and peer support. Data analysis used univariate tests, bivariate tests with chi-square statistical tests, and multivariate tests with logistic regression analysis. **Results**: The data in this research shows that the variables that have a significant correlation with adherence to consuming blood supplement tablets are knowledge, BST distribution, teacher support, and peer support with a p-value (<0.05). Variables that have no correlation with compliance with blood supplement tablet consumption are parental attitudes and support with a p-value (>0.05). The most dominant correlated variable is peer support. **Conclusion**: Compliance with the consumption of blood supplement tablets (BST) among young women at SMAN 6 Semarang is still predominantly low, which is influenced by knowledge, distribution of BST, teacher support and peer support.

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INTRODUCTION

Anemia according to (WHO (World Health Organization), 2011) occurs when a person's body lacks hemoglobin (Hb) levels, namely <12.0 g/dl in women's bodies and

<13.0 g/dl in men's bodies. Anemia is prone to occur in one age group, namely teenage girls (Anggoro, 2020). The reason why many young women suffer from anemia is the menstrual period, the loss of blood during the menstrual process results in a loss of iron levels in the body. In addition, teenagers need high levels of iron for growth and development. This condition causes an increase in iron intake in young women(Jamnok et al., 2020).

The statement is in sync with (Habtegiorgis et al., 2022) (World Health Organization et al., 2016)that an increase in iron intake, iron loss during menstruation, infection rates, and early marriage and teenage pregnancy are causes of high levels of anemia in teenagers. In accordance with research conducted at University College Cork, Ireland, which states that anemia occurs more frequently in adolescent girls due to menstruation. The menstrual period causes blood loss resulting in iron deficiency (McLoughlin, 2020). Previously, research in Eastern Africa explained that the impact of adolescent girls suffering from anemia could cause problems in development, physical performance and body immunity.(Shaka and Wondimagegne, 2018).

According to WHO 2011 data, anemia is 43% globally in children, 38% in pregnant women, 29% in non-pregnant women and 29% in women of childbearing age.(WHO (World Health Organization), 2011). This data means that anemia is still a national nutritional problem that needs to be watched out for. The prevalence of anemia based on the results of the National Health Survey states that 18.4% of anemia occurs at the age of 15-24 years. It was recorded that there was an increase in the prevalence of anemia compared to previous survey data in 2007, the prevalence of anemia was 6.9% at the age of 15-24 years.(Ministry of Health, 2008) (Ministry of Health, 2013). This means that there has been an increase in anemia rates of almost 3 times in the last 5 years. Data from the Semarang City Health Service in 2019, it was reported that there was an increase in cases of anemia in adolescent girls from 13.1% in 2018 to 17.4% in 2019. As many as 43.75% in Semarang City were recorded as having anemia in their teens.(Semarang Health Service, 2019).

The high increase in the prevalence of anemia in adolescents has caused the government to make frantic efforts to overcome this problem. This was proven by the ratification of the 2015-2019 RPJMN which focused on maintaining and improving the health of mothers and children. The program carried out is the distribution of blood supplement tablets (BST) in educational institutions (junior high schools and high schools/equivalent) through UKS/M. In fact, these efforts have not worked as expected, this is proven by the 2018 Basic Health Research which shows that consumption of blood supplement tablets (BST) among young women is only 1.4% (Indonesian Ministry of Health, 2018). Data from the Central Java Provincial Health Service in 2019 stated that only 47.13% of teenage girls took blood supplement tablets and it is very likely that teenagers only took them once (Semarang Health Service, 2019). Achieving relatively low consumption of blood supplement tablets in young women will have an impact on increasing anemia rates. It's the same with research (Anjarwati and Ruqoiyah, 2020) which states that the incidence of anemia is influenced by the consumption of blood supplement tablets.

Mini observations carried out by researchers in one of the Semarang City schools, namely in 2 classes 11 science and 11 social studies at SMAN 6 Semarang, the school had been exposed to a program for distributing blood supplement tablets (BST) to female students. Blood supplement tablets (BST) are obtained from local health centers every month, but only 17.2% of female students regularly consume them. Information obtained from UKS supervisors at SMAN 6 Semarang, anemia in adolescent girls in 2019 was 2.4%. This statement proves that the awareness rate of female students regarding consuming BST

is still low. As a result of interviews with UKS supervisors at SMAN 6 Semarang, many female students stated that they forgot, felt nauseous when taking blood supplement tablets (BST), and did not have good intentions so they often skipped consuming blood supplement tablets. The explanation is the same as previous research which stated that people rarely consume blood supplement tablets (BST) as recommended due to various causes, such as low knowledge, forgetfulness, and side effects resulting from consuming blood supplement tablets (BST) (Shofiana et al., 2018).

There are many factors that cause young women to be reluctant to take blood supplement tablets (BST), teacher support, attitudes, culture and family support are the driving factors (Arniti et al., 2021) (Nurjanah and Azinar, 2023). In accordance with previous research, consumption of blood supplement tablets is influenced by knowledge, family support, friend support, and attitudes (Utomo et al., 2020). Based on these problems, there has been a lot of research related to factors that correlate with compliance with the consumption of blood supplement tablets (BST) in young women. The influewusncing variables are knowledge, attitudes, teacher support, family support and peer support. However, considering the situation at SMAN 6 Semarang which is still low in implementing the practice of consuming blood supplement tablets (BST), it is necessary to conduct research specifically related to this topic. Research to analyze factors that correlate with compliance with consuming blood supplement tablets (BST) among young women at SMAN 6 Semarang needs to be carried out so that it can be used as input and educational material for preventing anemia.

LITERATURE REVIEW

Knowledge

Knowledge is defined as the result when someone has carried out a sensation of an object which ultimately creates knowledge (Notoatmodjo, 2018). A person's knowledge can be seen from levels, namely knowing, understanding, application, analysis, synthesis and evaluation (Notoatmodjo, 2018). Knowledge assessment can be determined by holding a question and answer or adding a questionnaire containing questions related to the topic about which knowledge is to be known (Notoatmodjo, 2016). A person's knowledge can be influenced by aspects of education level, information and environment (Notoatmodjo, 2016).

Attitude

Attitude is an individual's hidden view of an object and cannot be observed spontaneously (Rajaratenam et al., 2014). Three components underlie individual attitudes, namely cognitive, affective and conative (Azwar, 2015). A person's attitude can be influenced by personal experience, environmental factors, and emotional factors (Azwar, 2015). Attitude assessments can be calculated using a Likert scale, namely by using response dissemination as the basis for determining the scale value (Azwar, 2015).

BST distribution

The explanation regarding distribution according to (Ministry of Health, 2015) is the process of supplying BST fromcenter to the area where BST is distributed to the target. Distributing blood supplement tablets through schools to young women is an efficient step. Schools are suitable locations for providing explanations about health services to adolescents (Noviazahra, 2017). According to (Risonar et al., 2008) in (Noviazahra., 2017) the program that has been intensified is the provision of weekly school-based iron tablets.

Support

Support is explained as information such as directions that aim to help, either in verbal or behavioral form provided by a group of people closest to them so that changes in behavior occur (Lubis, 2013). The closest people to young women are their parents, school

or teachers, and peer groups. According to (Lubis, 2013) in (Pratiwi, 2018) states that the amount of support can be assessed based on the presence or absence of social support, social ties, and the support implemented. According to (Notoatmodjo, 2010) in (Noviazahra, 2017) explains that support is divided into four types, namely informative, emotional, assessment, and physical.

Obedience

ExplanationCompliance in the health sector is how accurate the patient is in using medication intervals and dosages according to the doctor's prescription (Zeber et al., 2013). Compliance assessment regarding the consumption of blood supplement tablets is seen based on calculating the number of tablets consumed. The assessment is said to be compliant if they consume ≥ 75% of all tablets distributed (Nuradhiani et al., 2017). In accordance with the instructions given (Ministry of Health, 2015), the dose of BST for women of childbearing age is one tablet per week and one tablet per day during menstruation.

METHOD

The research uses observational analytics using a cross sectional design. This research was conducted in July 2023 using respondents of 221 female students in class 11 science and 11 social studies at SMAN 6 Semarang which has a population of 517 female students. The number of respondents was selected using a simple random sampling technique along with inclusion and exclusion criteria. The inclusion criteria in this study were active female students at SMAN 6 Semarang, already menstruating, and agreeing to be respondents. Exclusion criteria were respondents who did not answer the questionnaire completelyand do not live in the same house with parents. Data was taken by filling in a structured questionnaire from research (Utomo et al., 2020) by respondents regarding knowledge, attitudes, distribution of blood supplement tablets (BST) at SMAN 6 Semarang, support from female students' parents, teacher support, and peer support. The frequency distribution data for each variable is determined using univariate analysis. To determine the correlation between variables, bivariate analysis is used with the chi-square statistical test which is said to be significant if the p-value is <0.05. The most dominant variable in adherence to BST consumption was determined using multivariate analysis tested by logistic regression. This research has passed the ethical test Number: 174/KEPK/EC/2023 published by the Health Research Ethics Committee of Semarang State University.

RESULTS AND DISCUSSION

PResearch was conducted on female students at SMAN 6 Semarang involving 221 respondents.The data in Table 1 shows that 221 female students were respondents, the number of respondents aged 15 years was 2 (0.9%), aged 16 years 184 respondents (83.3%), and aged 17 years 35 respondents (15.8 %). More class interests chose science as many as 156 respondents (70.6%) and social studies as many as 65 respondents (29.4%).

Table 1 also explains that pRespondents' knowledge about anemia and blood supplement tablets (BST) tended to be good at 167 (75.6%) and respondents with poor knowledge were 54 (24.4%). Most respondents already know about the topic of anemia and one way to prevent it is by dutifully consuming blood supplement tablets (BST).

The majority of respondents' attitude towards the phenomenon of anemia and blood supplementation tablets (BST) was positive, namely 195 (88.2%), while 26 (11.8%) of respondents had a negative attitude. Many respondents had a positive attitude regarding statements regarding the rules for consuming blood supplement tablets, how to minimize the impacts that occur when consuming blood supplement tablets, and preventing anemia. The majority of respondents had a negative attitude regarding untrue statements regarding

anemia. Distribution of blood supplement tablets (BST) at SMAN 6 Semarang, there were several respondents who received blood supplement tablets (BST) every 1 tablet/week, namely 116 (52.5%). There were also 105 respondents who received blood supplement tablets (BST) every 7-10 tablets/month (47.5%). However, centrally, namely from the school UKS, it distributes it once a month.

Table 1. Distribution of Respondent Characteristics Data (n=221)

Characteristics	n	%
Age		
15 years	2	0.9
16 years	184	83.3
17 years	35	15.8
Class		
11 IPA	156	70.6
11 Social Studies	65	29.4
Knowledge about anemia and BST		
Not enough	54	24.4
Good	167	75.6
Attitudes towards anemia and BST		
Negative	26	11.8
Positive	195	88.2
Distribution of blood supplement tablets (BST)	105	47.5
7-10 tablets/month	116	52.5
1 tablet/week		
Parental Support		
Not enough	193	87.3
Good	28	12.7
Teacher Support		
Not enough	75	33.9
Good	146	66.1
Peer Support		
Not enough	173	78.3
Good	48	21.7
Compliance with Blood Supplement Tablet (BST) Consumption		
Not obey	163	73.8
Obedient	58	26.2

Table 1 data also includes data on parental support, as many as 28 respondents (12.7%) received good support while 193 respondents (87.3%) did not receive support from their parents to regularly consume blood supplement tablets (BST). The majority of respondents did not receive good support from their parents to comply with the consumption of blood supplement tablets. Apart from parental support, there was support from teachers for consuming blood supplement tablets (BST), namely 146 respondents (66.1%) received good support. As many as 75 respondents (33.9%) received less support from teachers. The majority of teachers have provided full support to always remind them of the consumption of blood supplement tablets and provide health information, one of which is related to anemia and how to prevent it.

Data related to peer support in table 1, states s48 respondents (26.1%) received good support while 173 respondents (78.3%) did not receive support from peers. The number of respondents who complied with taking blood supplement tablets (BST) was 58 female

students (26.2%) and those who did not comply with consuming blood supplement tablets (BST) were 163 female students (73.8%). The majority of respondents did not comply with taking blood supplement tablets (BST) distributed by the school.

Table 2. Results of Bivariate Analysis on the Variables Knowledge, Attitude, BST Distribution, Parental Support, Teacher Support, and Peer Support on Adherence to Blood Supplement Tablet Consumption

Variable	Compliance with Blood Supplement Tablet (BST) Consumption						p-Value	POR
	Not obey		Obedient		Total			95% CI
	n	%	N	%	n	%		
Knowledge							**0.001**	5,973
Not enough	50	92.6	4	7.4	54	24.4		(2,051-
Good	113	67.7	54	32.3	167	75.6		17,394)
Attitude							0.270	2,106
Negative	22	84.6	4	15.4	26	11.8		(0.694-
Positive	141	72.3	54	27.7	195	88.2		6.395)
Distribution							**0.001**	3,157
7-10 tablets/month	89	84.8	16	15.2	105	47.5		(1,643-
1 tablet/week	74	63.8	42	36.2	116	52.5		6,067)
Parental Support							0.056	2,397
Not enough	147	76.2	46	23.8	193	87.3		(1,057-
Good	16	57.1	12	42.9	28	12.7		5,433)
Teacher Support							**0,000**	7,978
Not enough	70	93.3	5	6,7	75	33.9		(3,031-
Good	93	63.7	53	36.3	146	66.1		21,004)
Peer Support							**0,000**	15,077
Not enough	149	86.1	24	13.9	173	78.3		(7,072-
Good	14	29.2	34	70.8	48	21.7		32,147)

Table 2 shows that there is a significant correlation between the knowledge variable and compliance with the consumption of blood supplement tablets as proven by the p-value of 0.001 (<0.05). Same as research results (Murnariswari et al., 2021) which explains that a significant correlation was obtained between knowledge and compliance with the consumption of blood supplement tablets with a p-value of 0.002 (<0.05). Knowledge is defined as the output of someone who already knows and senses certain objects (Putri and Kurnia Astuti, 2023).

Based on research results, the dominant respondents had good knowledge of anemia and compliant consumption of blood supplement tablets (BST) was 54 (32.3%). When compared with respondents with less knowledge and compliant consumption of blood supplement tablets (BST), only 4 (7.4%). The same goes for research (Runiari and Hartati, 2020)which explains that the dominant respondents have good knowledge, namely (34.2%). The OR value is 5.973 (2.051-17.394), which means that there is a 5.793 times greater risk for respondents with poor knowledge of not complying with taking blood supplement tablets (BST) when compared to respondents with good knowledge.

The main cause that influences a person's level of knowledge is formal education, one of which is related to anemia and blood supplement tablets. This research explains that the respondents' education level is the same, but each respondent's absorption capacity for information is different. The influencing causes are the type of media and information obtained. Based on research data, respondents with good knowledge about anemia were more obedient in taking blood supplement tablets. Same as the research carried out (Utomo et al., 2020)that behavior is influenced by knowledge. The behavior in question includes

lifestyle and eating habits. For this reason, knowledge among young women regarding anemia and consumption of blood supplement tablets needs to be increased.

The attitude variable explains the output that respondents with a negative attitude and adherently consuming blood supplement tablets are 4 respondents (15.4%). There were 54 respondents with a positive attitude and obediently consuming blood supplement tablets (27.7%). The results of the p-value analysis were 0.270 (>0.05), meaning that there was no significant correlation between attitude and compliance with consuming blood supplement tablets. This research is the same as the research results (Putri and Kurnia Astuti, 2023)which shows that there is no significant correlation between attitude and compliance with blood supplement tablet consumption with a p-value of 0.293 (>0.05). Attitude is defined as a person's first response to a particular object. Attitudes cannot be seen instantly, they usually have to be interpreted through behavior.

Research data shows that 22 respondents (84.6%) had a negative attitude and did not comply with taking blood supplement tablets (BST). Meanwhile, respondents who had a positive attitude and did not comply with taking blood supplement tablets were 141 (72.3%). The OR value is 2.106 (0.694-6.395), which means that respondents with a negative attitude have a 2.106 times greater risk of not complying with taking blood supplement tablets (BST) when compared to respondents with a positive attitude.

A positive attitude about health topics does not guarantee that real action will result. There are many factors that can ultimately turn this into a real action, such as a supportive environment (Notoatmodjo, 2012). Most respondents' attitudes towards the anemia phenomenon were positive, many respondents already knew information related to anemia and how to prevent it. In theory, respondents already understand the benefits of blood supplement tablets, however, there is still a lack of compliant behavior in consuming BST. Many factors encourage someone to change behavior to comply with regulations. Attitude is a person's first view of a particular topic or phenomenon. This shows that a person's positive attitude cannot necessarily change behavior.

The data in Table 3 shows that there is a significant correlation between the distribution of blood supplement tablets (BST) and compliance with the consumption of blood supplement tablets, namely a p-value of 0.001 (<0.05). The results of this research show that 42 respondents (36.2%) received blood supplement tablets once a week and adhered to consuming blood supplement tablets. Meanwhile, 16 respondents (17.6%) received blood supplement tablets every 7-10 tablets/month and adhered to taking blood supplement tablets. The results of this research are in accordance with the previous one which stated that there was a significant correlation between the distribution of blood supplement tablets and compliance with the consumption of blood supplement tablets in young women with a p-value (0.006). Female students who receive blood supplementation tablets 7-10 tablets/month will be at risk of not consuming blood supplementation tablets 3.411 times greater than young women who receive blood supplementation tablets 1 tablet/week(Noviazahra et al., 2017)

The OR value in the study was 3.157 (1.643-6.067), meaning that there was a 3.157 times greater risk of respondents who received BST every 7-10 tablets/month not complying with consumption when compared to respondents who were given blood supplement tablets every 1 tablet/week.This is in line with recommendations(Ministry of Health, 2020)which states that consuming blood supplement tablets every 1 tablet/week is more effective in preventing anemia compared to consuming 7-10 tablets/month or every day during menstruation. Distribution of blood supplement tablets to respondents was obtained from the school UKS who received them from the local health center. The health center will distribute 7-10 blood supplement tablets to schools every month for each female

student. UKS, with the help of homeroom teachers, will distribute blood supplement tablets to respondents every month. This research data shows that 6 classes distributed blood supplement tablets every 1 tablet/week with a total of 116 respondents (52.9%) and 6 other classes with a total of 105 respondents (47.5%) distributed 7-10 tablets every month. The distribution is not done equally because it is in accordance with the policy of each homeroom teacher. The blood supplement tablets given to respondents contained iron of (60 mg FeSO4) and folic acid (0.25 mg), which means that they are in accordance with the recommended standards by(WHO (World Health Organization), 2011)as an effort to prevent anemia with BST supplementation.

The variable parental support in the chi-square statistical test shows that there is no significant correlation between parental support and compliance with blood supplement (BST) consumption with a p-value of 0.056 (>0.05). The dominant respondents did not receive good support from their parents 193 (87.3%). The results in other research are similar, which shows that there is no significant correlation between parental support and compliance with the consumption of blood supplement tablets (BST) with a p-value of 0.313 (>0.05).(Nisa et al., 2023).

Parents are the first role models for a child, every action a parent takes towards their child will have an impact on their life. Parental support is all forms of behavior and motivation that can encourage children to be better than their previous personality(Budiati and Muhadi, 2022). Research data shows that 12 respondents (42.9%) had good parental support and were obedient to consuming blood supplement tablets. Respondents with less parental support and compliant consumption of blood supplement tablets were 46 (23.8%). The OR value is 2.397 (1.057-5.433), meaning that there is a 2.397 times greater risk for respondents who lack parental support to disobey consumption when compared to respondents who are supported by their parents.

According to the data obtained, the majority of parents do not understand the need to consume blood supplement tablets as a form of preventing anemia. Many parents only remind them without ensuring that the respondent actually takes blood supplement tablets, so they are less motivated to comply with taking blood supplement tablets (BST). The majority of respondents' parents never provided advice and information regarding consuming blood supplement tablets at home. The support provided is by reminding and inviting people to take blood supplement tablets together. The hope is that parents will be more active in playing a role in maintaining their children's health because parents are role models.

The results of the chi-square test on the teacher support variable show that there is a significant correlation with compliance with the consumption of added tablets with a p-value of 0.000 (<0.05). Research data shows that 53 female students (36.3%) received good support from teachers and were obedient to taking blood supplement tablets (BST). Respondents who had less teacher support and adhered to taking blood supplement tablets were 5 (6.7%). When compared with respondents who received good and obedient teacher support, there were 53 (36.3%) respondents. This teacher's support includes reminding female students to take blood supplement tablets regularly, sharing information regarding anemia and how to prevent it, as well as the benefits of blood supplement tablets (BST).

In accordance with the (Nurjanah and Azinar, 2023) which explains that there is a significant correlation between teacher support and compliance with blood supplement tablet consumption with a p-value of 0.024 (<0.05). The research results showed that respondents with good teacher support and those who did not comply took 146 (66.1%) blood supplement tablets. Respondents who had less teacher support and did not comply with taking blood supplement tablets were 75 (33.9%). The OR value is 7.978 (3.031-21.004), meaning that there is a 7.978 times greater risk for respondents who lack support from

teachers for not complying with consumption when compared to respondents with good support from teachers.

Teacher support plays an important role in whether or not female students take blood supplement tablets. Teacher support is a motivating factor for someone to behave in a healthy lifestyle according to L. Green's theory. For students, the teacher is a figure who is used as a role model, so that many students will follow every advice and obey the prohibitions stated by the teacher. Students view teachers as figures whose orders must be respected and followed. Teachers have supported the program to consume blood supplement tablets, the role of teachers as the majority of teaching staff is to provide explanations regarding how to consume blood supplement tablets, the benefits, and remind them to regularly consume blood supplement tablets (BST) as a form of preventing anemia in teenagers.

However, in this research there was no monitoring of the distribution process until the tablets were consumed by young women regularly. As a result, students still have the opportunity to disobey taking blood supplement tablets (BST) because they do not feel monitored. It is very important to be given a monitoring card to record whether the respondent is compliant or not consuming. Realizing the importance of the role of teachers in the success of anemia prevention programs in adolescent girls, teachers are expected to foster motivation in adolescent girls and monitor them to pay more attention to their own health. One way to avoid anemia is by obediently consuming blood supplement tablets.

The peer support variable in this research shows that there is a significant correlation with compliance with the consumption of blood supplement tablets in young women. Research respondents with good peer support were more obedient in taking blood supplement tablets (BST) as many as 34 respondents (70.8%). Respondents with less support from peers and compliance were 24 (13.9%). The results of the chi-square statistical test in this study were p-value 0.000 (<0.05). Overall, peer support in this study was still lacking, namely 173 female students (78.3%). Same as research (Ilham et al., 2023)which explains that there is a significant correlation between peer support and compliance with consuming blood supplement tablets with a p-value of 0.001 (<0.05).

The support provided by peers is reminding each otherto take blood supplement tablets together. Peers have an important role in helping and fostering interest in other young women to regularly consume blood supplement tablets (BST). Research data shows an OR value of 15.077 (7.072-32.147), meaning that there is a 15.077 times greater risk for respondents who do not receive support from friends to disobey consumption when compared to respondents who receive good support from peers. The role of teachers and parents in increasing the knowledge and intentions of young women is very important so that young women can disseminate this knowledge to their peers. This makes more young women aware of the need for blood supplement tablets to prevent anemia so that they motivate each other to take blood supplement tablets. Generally, teenagers spend more time with their friends compared to their parents.

Therefore, the friendship environment will be very influential in encouraging teenagers to act, behave or express opinions in accordance with the scope of their friendships. The majority of teenagers want to always be liked and accepted in their circle of friends. Therefore, it is not uncommon for many teenagers to follow the same lifestyle as those in their circle of friends. This shows that the majority of teenagers' behavior is influenced by the role of peers, as is the behavior of consuming blood supplement tablets.

The results of this research show that there are four variables that contribute to influencing the consumption of blood supplement tablets, namely knowledge, BST distribution, teacher support, and peer support. However, after carrying out a multivariate

test, only the variables knowledge, teacher support and peer support had the most significant influence.

Table 3. Logistic Regression Test Results between Knowledge, Parental Support, and Peer Support on Adherence to Added Tablet Consumption

Variable	B	p-value	OR	95% CIfor EXP(B)	
				Lower	Upper
Knowledge	1,200	0.043	3,321	1,037	10,640
Teacher Support	1,201	0.024	3,325	1,172	9,433
Peer Support	2,207	0,000	9,088	4,088	20,204

Multivariate test results show that the dominant factor that correlates with adherence to consuming blood supplement tablets is peer support which has a p-value of 0.000 with OR = 9.088 (95% CI 4.088 – 20.204). This means that there is a 9.088 times greater risk of respondents with less support from peers not complying with taking blood supplement tablets compared to female students who receive good support from peers.

The knowledge variable has a p-value of 0.043 with OR= 3.321 (95% CI 1.037-10.640). These results show that there is a 3.321 times greater risk in respondents who have a poor level of knowledge of not complying with taking blood supplement tablets (BST) when compared to respondents who have good knowledge. Teacher support has a significant correlation with a p-value of 0.024 with OR= 3.325 (95% CI 1.172 - 9.433). This means that there is a 3.325 times greater risk in respondents with poor teacher support not complying with taking blood supplement tablets compared to respondents with good teacher support.

The most dominant factor is support from peers. The influence of the circle of friends is very important for the lifestyle, behavior and interests of young women (Raharjo, 2020). In line with the research conducted (Mulyani, 2020) which explains that peer group support is effective in increasing the compliance of young women in consuming blood supplement tablets. Adolescent girls have a tendency to behave in the same way as their group, which is a form of peer support influence on compliance (Yeni & Inayah, 2020). The interaction between young women and their peers has a greater emotional connection, thus creating a comfortable atmosphere for communicating with each other and changes in behavior according to their environment (Ilham et al., 2023). Apart from that, the influence of peers is greater than that of parents because teenagers spend more time outside the home, such as school activities and playing with their circle of friends (Amanda & Darmadja, 2020).

CONCLUSION

The level of compliance with the consumption of blood supplement tablets (BST) among young women at SMAN 6 Semarang is still low. Meanwhile, factors that correlate with compliance with the consumption of blood supplement tablets (BST) are knowledge, distribution of blood supplement tablets (BST), teacher support, and peer support. Meanwhile, factors that do not correlate with compliance with consuming blood supplement tablets in young women are parental attitudes and support. Peer support is the most related variable. It is hoped that schools can distribute blood supplement tablets (BST) regularly and uniformly, namely once a week rather than every month. Apart from that, it is also hoped that the school will increase motivation and monitor respondents so that they comply with taking blood supplement tablets (BST). Teacher support is a driving factor in creating teenagers who are obedient in taking blood supplement tablets. The behavior of

young women to comply with taking blood supplement tablets (BST) cannot be separated from the role of parents, teachers and peers. Therefore, it is hoped that parents and teachers will provide a positive environmental influence and good support in order to create a generation of young women who are literate in maintaining a healthy body and avoiding disease, one of which is anemia. Considering that the most dominant factor in compliance with the consumption of blood supplement tablets in young women is their peers, parents and teachers must work together to monitor the adolescent's friendship environment.

ACKNOWLEDGEMENT

The researcher would like to thank the respondents at SMAN 6 Semarang who participated as research respondents and the enumerators who were willing to help when collecting data.

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