



DETERMINANTS OF ADHERENCE TO IRON TABLET SUPPLEMENTATION AMONG PREGNANT WOMEN: A CROSS-SECTIONAL STUDY

Susilawati^{1,2*}, Tukimin bin Sansuwito¹, Chua Siew Kuan^{1,3}

¹Faculty of Nursing, Lincoln University College, Wisma Lincoln, No. 12-18, Jalan SS 6/12, Petaling Jaya, Selangor Darul Ehsan, Malaysia

²Nursing Study Program, Sekolah Tinggi Ilmu Kesehatan Sukabumi, Jl. Karamat No. 36, Karamat, Sukabumi, West Java 43122, Indonesia

³School of Physiotherapy, Faculty of Medicine, Nursing and Health Sciences, SEGI University Kota Damansara, Petaling Jaya 47810, Malaysia

*susilawati@dosen.stikesmi.ac.id

ABSTRACT

Anemia during pregnancy remains a major public health problem that increases the risk of adverse maternal and fetal outcomes. Several factors have been associated with adherence to iron tablet supplementation among pregnant women, including parity, antenatal care (ANC) visits, and medication side effects. This study aimed to examine the determinants of adherence to iron tablet supplementation among pregnant women. This correlation study used a cross-sectional approach involving 83 pregnant women in the Karang Tengah neighborhood within the service area of the Karang Tengah Community Health Center in Sukabumi City, who were selected through total sampling. Data were collected using validated and reliable questionnaires, including questionnaires on respondent characteristics such as parity and ANC visits, a questionnaire on medication side effects based on a Likert scale, and the Morisky Medication Adherence Scale-8. Data were analyzed using the chi-square test and logistic regression. The results showed that parity ($p < 0.001$), ANC visits ($p < 0.001$), and medication side effects ($p < 0.001$) were significantly associated with pregnant women's adherence to iron supplements in the bivariate analysis. In the multivariate analysis, ANC visits were the most dominant influencing factor ($OR = 25.00$). Parity, ANC visits, and medication side effects were significantly associated with pregnant women's adherence to iron supplements in the bivariate analysis, while ANC visits remained the most dominant factor in the multivariate model.

Keywords: adherence to iron supplement intake; anc visit; anemia in pregnant; parity; side effects of medication

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INTRODUCTION

Anemia during pregnancy remains one of the public health issues that significantly impacts the health of both the mother and the fetus (Manurung et al., 2026). Globally, the prevalence of anemia among women of reproductive age (15–49 years) is estimated at 35.5% (World Health Organization (WHO), 2025). In Indonesia, the prevalence of anemia among pregnant women is 37.1% (Noor et al., 2025), while according to the 2023 Indonesian Health Survey (SKI), it was recorded at 27.7% (Jasmiati et al., 2025). In West Java, the prevalence of anemia among pregnant women reached 53.8% (West Java Health Department, 2025, as cited in Karmi et al., 2026), while in the city of Sukabumi, the prevalence was 11.2% in 2024 (Ariesta, 2025).

Anemia is a condition in which hemoglobin and red blood cell levels are below normal (Aditya & Linda, 2025). Anemia during pregnancy can have various serious consequences for both the mother and the fetus, such as increasing the risk of preterm birth, low iron stores in newborns, and contributing to maternal and neonatal mortality. Furthermore, maternal anemia can lead to low iron levels in breast milk, which may trigger anemia and stunting in children (Prasetyaswati et al., 2026). Anemia prevention among pregnant women is achieved by providing at least 90 iron supplements during pregnancy. The iron supplement program is one of the efforts by the Government of the Republic of Indonesia to reduce the incidence of anemia among pregnant women. The success of

this program depends not only on the distribution of iron supplements to pregnant women, but also on the women's adherence to taking the supplements as recommended (Mahalia et al., 2022).

Adherence to iron supplement intake among pregnant women refers to the extent to which they follow healthcare providers' recommendations to take iron supplements. This level of adherence can be assessed based on three main aspects: whether the number of iron supplements taken matches the recommended dosage; whether the method and timing of taking the supplements are correct; and the frequency of taking iron supplements per day (Stefani et al., 2023). Many factors influence pregnant women's adherence to iron supplements, such as the number of births, visits to ANC clinics, and side effects (Juandri et al., 2024; Rumayomi et al., 2025; Wirke et al., 2022).

One of the factors determining adherence to iron supplements among pregnant women is parity. Multiparous women are about 2.28 times more likely, and primiparous women about 3.45 times more likely, to adhere to iron supplements than nulliparous women. These compliance rates are influenced by previous pregnancy and childbirth experiences, which help women better understand how to manage symptoms that arise during pregnancy, become more aware of the risks of complications due to blood loss during childbirth, and recognize the potential depletion of iron stores that can occur during previous pregnancies (Fauzianty et al., 2024).

ANC visits are another factor that plays a significant role in pregnant women's adherence to iron supplement intake. The government and healthcare providers recommend that pregnant women attend at least six ANC visits during their pregnancy. One of the goals of these visits is for women to receive iron supplements regularly and to be educated about the importance of preventing anemia during pregnancy. More frequent ANC visits provide healthcare providers with the opportunity to monitor the mother's condition, remind her to take iron supplements, and reinforce her understanding of the benefits of these supplements. Therefore, pregnant women who attend follow-up visits regularly tend to have better adherence to taking iron supplements (Suparwatini et al., 2025).

Side effects of iron supplements are also a factor affecting pregnant women's adherence to taking them. Symptoms that arise after taking iron supplements often cause discomfort, leading women to be reluctant to take them regularly. Some common side effects include nausea, vomiting, heartburn, constipation, black stools, and a bad taste in the mouth. These symptoms cause some pregnant women to stop taking iron supplements or to not take them as recommended by healthcare providers out of concern that their symptoms will worsen. The more frequent and severe the side effects, the lower the level of adherence to taking iron supplements tends to be (Arsita et al., 2025).

Various studies have been conducted on the factors associated with adherence to iron supplement use among pregnant women. However, previous studies have yielded mixed findings regarding the relationship between the side effects of iron supplements, number of births, and ANC visits and adherence to iron supplement use. Differences in respondent characteristics, regional conditions, and health care provision may account for the varying results across these studies. This study aims to determine the relationship between parity, ANC visits, side effects, and adherence to iron supplement use among pregnant women in Karang Tengah Village, which is located within the service area of the Karang Tengah Community Health Center in Sukabumi City.

METHOD

This study is a quantitative study with a correlational design using a cross-sectional approach. The study was conducted in Karang Tengah Village, within the service area of the Karang Tengah Community Health Center in Sukabumi City, from February to July 2026. The study population and sample consisted of 83 pregnant women selected using total sampling. Inclusion criteria included pregnant women in the first, second, or third trimester who were taking iron supplements, receiving ANC at a local health facility, having received iron supplements from a health worker at least once

during their current pregnancy, and being willing to participate as respondents. Exclusion criteria were pregnant women who were absent during the data collection process or had moved and could not be reached. Data collection was conducted using a questionnaire covering parity characteristics, ANC visits, side effects of iron supplements, and adherence to iron supplement intake. The side-effect instrument was validated, and all items were found to be valid ($p < 0.05$) and reliable, with a Cronbach's alpha value of 0.690. Adherence to iron supplement intake was measured using the standardized Morisky Medication Adherence Scale-8 (MMAS-8), which has been proven to be valid (calculated $r = 0.763 > \text{table } r = 0.300$) and reliable with a Cronbach's alpha value of 0.796 in a previous study. The data were analyzed using the chi-square test, while multivariate analysis was carried out using logistic regression analysis. ethical principles including beneficence, confidentiality, and justice were strictly upheld. Ethical clearance was granted by the Ethics Committee from Sukabumi Health Science College with approval number 003083/KEP STIKES SUKABUMI/2026. All participant information was kept private and used exclusively for research purposes.

RESULT

Table 1.
Respondent characteristics (n=83)

Respondent characteristics	f	%
Age		
< 20 Years	7	8.4
20 – 35 Years	49	59
> 35 Years	27	32.6
Education Level		
Doesn't Go to School	2	2.4
Elementary School	10	12
Junior High School	27	32.5
High School	29	34.9
College	15	18.1
Employment Status		
Working	11	13.3
Doesn't Work	72	86.7
Gestational Age		
Trimester I	18	21.7
Trimester II	65	78.3
Household Income		
≤ UMR	55	66.3
> UMR	28	33.7
Source of Information		
Healthcare Worker	64	77.1
Print Media	7	8.4
Electronic Media	7	8.4
Family Member	2	2.4
Others	3	3.6

Based on table 1, the majority of respondents were aged 20–35 years (59.0%), had a high school education (34.9%), were unemployed (86.7%), were in the second trimester of pregnancy (78.3%), had a household income of ≤ the regional minimum wage (66.3%), and obtained information primarily from health care providers (77.1%). These characteristics indicate that the majority of respondents were pregnant women of reproductive age with a high school education, who were unemployed, had relatively low economic status, and relied on healthcare workers as their primary source of information. Based on table 2, the majority of respondents were multiparous (54.2%), had adequate ANC visits (56.6%), experienced few side effects from iron supplements (59.0%), and were compliant with taking iron supplements (55.4%). These results indicate that the majority of respondents met the recommended frequency of ANC visits, experienced only minor side effects while taking iron supplements, and demonstrated good adherence to taking iron supplements during pregnancy.

Table 2.
Univariate analysis (n=83)

Variables	f	%
Maternal Parity		
Primiparous	38	45.8
Multiparous	45	54.2
ANC Visit		
Inadequate	36	43.4
Adequate	47	56.6
Maternal Side Effects		
Low	49	59
Mild to Moderate	34	41
Iron Tablet Adherence		
Non-adherent	37	44.6
Adherent	46	55.4

Table 3.
Bivariate analysis

Bivariate analysis							
Variables	Iron Tablet Adherence				Total		p-value
	Adherent		Non-adherent		f	%	
	f	%	f	%			
Maternal Parity							
Primiparous	10	26.3	28	73.7	39	100	< 0.001
Multiparous	36	80	9	20	45	100	
ANC Visit							
Inadequate	3	8.3	33	91.7	36	100	< 0.001
Adequate	43	91.5	4	8.5	47	100	
Maternal Side Effects							
Low	41	89.1	5	10.9	46	100	< 0.001
Mild to Moderate	5	13.5	32	86.5	37	100	

Based on table 3, the results of the bivariate analysis show that parity, ANC visits, and side effects experienced by mothers are significantly associated with adherence to iron supplement intake ($p < 0.001$). Multiparous mothers had a higher adherence rate (80.0%) compared to primiparous mothers (26.3%). Based on ANC visits, mothers with adequate ANC visits were more likely to adhere to iron supplement intake (91.5%) compared to mothers with inadequate ANC visits (8.3%). In addition, women who experienced few side effects showed a higher compliance rate (89.1%) compared to those who experienced mild to moderate side effects (13.5%). These findings indicate that parity, adequate ANC visits, and few perceived side effects are associated with increased compliance among pregnant women in taking iron supplements.

Table 4.
Multivariate Analysis

Variables	B	P-Value	OR	R ²
Maternal Parity	1.936	0.045	6.94	0.822
ANC Visit	3.219	< 0.001	25	
Maternal Side Effects	2.842	0.003	17.151	

Based on the results of the multivariate analysis, parity, ANC visits, and maternal side effects were significantly associated with adherence to iron supplement intake ($p < 0.05$). Adequate ANC visits were the most dominant factor (OR = 25.00; $p < 0.001$), followed by low incidence of side effects (OR = 17.15; $p = 0.003$) and multiparity (OR = 6.94; $p = 0.045$). An R² value of 0.822 indicates that the model explains 82.2% of the variation in iron supplement adherence.

DISCUSSION

There is a correlation between parity and adherence to TTD intake among pregnant women. This is consistent with the findings of Rostanty et al. (2025) & Umami (2022) who reported a relationship between parity and adherence to TTD intake among pregnant women. Parity is defined as the number of childbirth experiences a woman has undergone; this count includes the birth of a baby, whether live or stillborn, but does not take into account a history of miscarriage (Ramadhini & Dewi, 2021).

Primiparous women have lower adherence compared with multiparous women. Women who have already been through pregnancy and childbirth often have a more mature understanding of the importance of iron supplements during pregnancy. The experience they have gained makes them more aware of the risk of anaemia, which in turn encourages them to adhere to iron supplementation during pregnancy (Rostanty et al., 2025). Furthermore, multiparous women tend to be more familiar with the stages of pregnancy, including having received education on the importance of nutritional intake and iron. The iterative learning process from previous pregnancies fosters a preventative awareness of the risk of anaemia, thereby increasing adherence to iron supplement intake (Olloqui-Mundet et al., 2024). Meanwhile, women experiencing their first pregnancy may find it difficult due to a lack of experience, particularly regarding physical changes and the unpleasant side effects of iron supplements, resulting in lower adherence to iron supplement intake compared to multiparous women (O'Toole et al., 2024).

Based on the research findings, there is a correlation between ANC visits and adherence to iron supplement intake among pregnant women. This is consistent with the studies by Jundu et al. (2022) and Meliani et al. (2022). These findings indicate that ANC visits not only serve to monitor the health of the mother and fetus but also act as a means of promoting behavioral change regarding health. The more frequently a mother attends ANC visits, the more opportunities healthcare providers have to educate her about the benefits of iron supplements, the risks of anemia during pregnancy, and the potential consequences of not taking the supplements as recommended. Repeated education tends to improve understanding, enhance perceptions of the importance of iron supplementation, and foster awareness of the need for adherence (Rovica et al., 2023).

ANC visits also provide healthcare providers with the opportunity to evaluate and follow up on mothers' adherence to iron supplement intake. Monitoring conducted at each visit allows healthcare providers to identify barriers faced by mothers, such as the occurrence of side effects, forgetfulness, or the belief that iron supplements do not need to be taken when they feel healthy. These barriers can be promptly addressed through more specific counseling, thereby increasing the likelihood that mothers will maintain adherence (Rustiawan & Pratiwi, 2022). Any interpretation of these research findings must also take into account that adherence to iron supplement intake is a behavior influenced by various interrelated factors. The frequency of ANC visits can serve as an indicator that a mother has good access to health care, but it does not necessarily reflect her commitment to following all health recommendations. Factors such as educational level, family support, socioeconomic status, previous pregnancy experiences, and cultural beliefs regarding medication use during pregnancy can all be variables that influence adherence (Simaremare et al., 2023).

The results of the study indicate that there is a relationship between the side effects of iron tablets and adherence to the prescribed regimen among pregnant women. These findings are consistent with several studies, including those by (Kartikasari et al., 2025), (Seidu et al., 2024), and (Salifu et al., 2024) which state that side effects are one of the main reasons why pregnant women do not take iron tablets, thereby affecting their adherence to the medication. Adherence to iron supplement tablets among pregnant women refers to the consistency in taking the tablets as recommended by healthcare professionals, including the quantity, dosage, method, and frequency of intake. This adherence plays a crucial role in preventing anaemia by meeting iron requirements and increasing haemoglobin levels. Conversely, irregular intake can increase the risk of anaemia and pregnancy complications (Saeed et al., 2024). One factor influencing adherence is the side effects experienced after taking iron supplements (Kartikasari et al., 2025).

Side effects of iron supplements, such as nausea, vomiting, epigastric pain, constipation, black stools and a bad taste in the mouth, can cause discomfort, leading pregnant women to be reluctant to take them regularly. The more severe the side effects experienced, the lower the level of adherence to taking iron supplements (Seidu et al., 2024). As well as causing physical discomfort, the side effects of iron supplements can create negative perceptions amongst pregnant women. A lack of

understanding that these side effects are a common reaction to iron supplementation leads women to regard the tablets as unsuitable or dangerous, thereby reducing their adherence to taking them (Salifu et al., 2024).

Multivariate analysis showed that parity, ANC visits, and side effects from taking iron supplements remained simultaneously associated with pregnant women's adherence to taking iron supplements. These findings indicate that pregnant women's adherence is influenced by a combination of maternal characteristics, utilization of health services, and experiences during iron supplement intake. Women who have previously given birth tend to have better knowledge and beliefs regarding the importance of iron supplementation during pregnancy, while adequate ANC visits provide repeated opportunities for health workers to provide education, counseling, monitoring, and reinforcement of compliant behavior in taking iron supplements. Conversely, side effects such as nausea, constipation, and gastrointestinal discomfort can reduce mothers' motivation to take iron supplements regularly, thereby increasing the risk of non-adherence. These findings are consistent with the study by Adhila et al. (2023), which reported that the frequency of ANC visits is an independent predictor of adherence to iron supplementation, as well as the studies by Tefera et al. (2023) and Muthuraj et al. (2023), which showed that medication side effects are one of the main barriers to pregnant women's adherence to iron supplementation.

This study should be interpreted with several methodological limitations in mind. The use of a cross-sectional design only allows for the identification of associations between variables without establishing a cause-and-effect relationship. Additionally, the study was conducted among 83 pregnant women in the service area of the Karang Tengah Community Health Center in Sukabumi City; thus, the relatively homogeneous characteristics of the respondents may limit the generalizability of the findings to a broader population. Compliance measurement using the MMAS-8 also relies on respondents' answers, so it is not entirely free from the possibility of recall bias or social desirability bias. On the other hand, the study model focused only on parity, ANC visits, and medication side effects; thus, it did not account for other factors that could potentially influence adherence, such as maternal knowledge, family support, educational level, socioeconomic status, or the quality of counseling provided by health workers. Future research is recommended to involve a more diverse population through a multicenter approach with a larger sample size and to use a longitudinal or cohort design to obtain stronger evidence of causal relationships. The inclusion of behavioral, social, and health care system variables is also necessary so that the developed model can explain adherence to iron supplement intake more comprehensively.

CONCLUSION

This study shows that parity, ANC visits, and medication side effects are factors that influence adherence to iron supplement intake among pregnant women in the service area of the Karang Tengah Community Health Center in Sukabumi City. Pregnant women with a favorable parity history, optimal ANC visits, and minimal medication side effects tend to have better adherence to iron supplement intake.

REFERENCES

- Adhila, S. F. A. N. P., Budhiastuti, U. R., & Adriani, R. B. (2023). Meta-Analysis Effects of Antenatal Care Visit and Knowledge on the Adherence of Iron Tablet and Folic Acid Consumption. *Journal of Maternal and Child Health*, 8(5), 526–539. <https://doi.org/10.26911/thejmch.2023.08.05.01>
- Aditya, R. D., & Linda, O. (2025). Faktor-Faktor yang Berhubungan dengan Kejadian Anemia pada Remaja Putri Tahun 2025. *ARKESMAS*, 10(1), 16–23. <https://doi.org/10.20527/dk.v5i1.3634>
- Ariesta, F. Y. (2025). Kepatuhan Ibu Hamil Melakukan Kunjungan Antenatal Care dengan Kejadian Anemia Ibu Hamiltrimester III. *Jurnal Kesmas Asclepius*, 7(2 SE-Articles), 242–249. <https://doi.org/10.31539/ezz1wd58>

- Arsita, S. P., Alnur, R. D., & A'Yunin, E. N. (2025). Faktor-Faktor yang Berhubungan dengan Perilaku Ibu Hamil dalam Mengonsumsi Tablet Tambah Darah (TTD) di Puskesmas Larangan Utara Tahun 2024. *Jurnal Pendidikan Kesehatan*, 5(2), 130–138. <https://doi.org/10.64931/jks.v5i2.86>
- Fauzianty, A., Barus, S. A. B., & Napitupulu, N. I. M. B. (2024). Hubungan Paritas dan Dukungan Keluarga dengan Keteraturan Konsumsi Tablet Tambah Darah di Wilayah Kerja Puskesmas Sei Bejangkar Kecamatan Sei Balai Kabupaten Batu Bara Tahun 2023. *Protein: Jurnal Ilmu Keperawatan Dan Kebidanan*, 2(4), 40–50. <https://doi.org/10.61132/protein.v2i4.631>
- Jasmianti, J., Nurmila, N., Elizar, E., & Prihatin, N. S. (2025). Hubungan Pengetahuan Ibu Dengan Kejadian Anemia Dalam Kehamilan. *Femina: Jurnal Ilmiah Kebidanan*, 5(2), 73–78.
- Jondu, H., Siregar, K. N., Prabawa, A., & Fadhilah, N. (2022). Pengklasteran Kepatuhan Konsumsi Tablet Tambah Darah pada Wanita Usia Subur Menggunakan Metode Principal Component Analysis dan K-Means. *Jurnal Biostatistik, Kependudukan, Dan Informatika Kesehatan (BIKFOKES)*, 2(2), 95–105.
- Juandri, D. A., Erika, & Putri, S. A. (2024). HUBUNGAN EFEK SAMPING TABLET TAMBAH DARAH DENGAN KEPATUHAN IBU HAMIL DALAM MENGONSUMSINYA PADA MASA KEHAMILAN. *MANUJU: MALAHAYATI NURSING JOURNAL*, 6(10), 4036–4052. <https://doi.org/10.33024/mnj.v6i10.16328>
- Karmi, R., Hartati, S., Raiah, A., Febrianti, J., & Yulianti, G. S. (2026). Peningkatan pengetahuan tentang anemia dan pencegahannya pada ibu hamil. *JOURNAL OF Public Health Concerns*, 5(11), 859–864. <https://doi.org/10.56922/phc.v5i11.2346>
- Kartikasari, A., Cahyati, W. H., Yuniastuti, A., & Maharani, C. (2025). The Influence of Main Reasons for Not Taking IFA Tablets on Adherence to ≥ 90 Tablet Consumption Among Pregnant Women. *Journal of Creativity Student*, 8(2), 176 – 181. <https://doi.org/10.15294/jcs.v8i2.26052>
- Mahalia, L. D., Oktaviyani, P., & Munifa. (2022). Evaluasi Penggunaan Tablet Tambah Darah Pemerintah pada Ibu Hamil di Kalimantan Tengah. *Journal Surya Medika (JSM)*, 10(1), 371–375. <https://doi.org/10.33084/jsm.v10i1.7238>
- Manurung, D. Y. S., Anjelina, E., & Ikakusumawati, N. D. (2026). Evaluasi Ketepatan Penggunaan Terapi Anemia pada Ibu Hamil di Rumah Sakit Universitas Sebelas Maret. *Generics: Journal of Research in Pharmacy*, 6(1). <https://doi.org/10.14710/genres.v6i1.30517>
- Meliani, M., Zuitasari, A., & Sari, P. (2022). Faktor-Faktor yang Berhubungan dengan Kepatuhan Mengonsumsi Tablet Fe Pada Ibu Hamil di Puskesmas Pembina Palembang Tahun 2022. *IMJ (Indonesian Midwifery Journal)*, 6(1), 1–9. <https://doi.org/10.31000/imj.v6i1.8360>
- Muthuraj, L. P., Kandasamy, S., Subbiah, P., Sibqathulla, M. J., Velappan, L. K., Gopal, M., Ramya, J. E., Jayaraman, Y., & Kalyanaraman, S. (2023). Sociocultural and drug-related factors associated with adherence to iron-folic acid supplementation among pregnant women - A mixed-methods study. *Journal of Education and Health Promotion*, 12, 121. https://doi.org/10.4103/jehp.jehp_1008_22
- Noor, C. A., Dewi, V. K., Kristiana, E., & Laili, F. J. (2025). FAKTOR – FAKTOR YANG MEMPENGARUHI KEJADIAN ANEMIA PADA IBU HAMIL DI WILAYAH KERJA PUSKESMAS BARINGIN TAHUN 2025. *Indonesian Journal of Science*, 2(1), 182–192. <https://doi.org/10.31004/science.v2i1.316>
- O'Toole, F. E., Hokey, E., McAuliffe, F. M., & Walsh, J. M. (2024). The Experience of Anaemia and Ingesting Oral Iron Supplementation in Pregnancy: A Qualitative Study. *European Journal of Obstetrics & Gynecology and Reproductive Biology*, 297, 111–119. <https://doi.org/10.1016/j.ejogrb.2024.03.005>
- Olloqui-Mundet, M. J., Cavia, M. D. M., Alonso-Torre, S. R., & Carrillo, C. (2024). Dietary Habits and Nutritional Knowledge of Pregnant Women: The Importance of Nutrition Education. *Foods*, 13(19), 3189. <https://doi.org/10.3390/foods13193189>
- Prasetyaswati, B., Riawati, D., Devi, K. N., Febrianto, J. D., & Kahla, K. N. (2026). Mengenal Tanda Gejala Awal Anemia Pada Remaja Dan Ibu. *Jurnal Pengabdian Kepada Masyarakat SOLOTECH*, 1(1), 132–136.

- Ramadhini, D., & Dewi, S. S. S. (2021). Hubungan Umur, Paritas dan Kepatuhan Konsumsi Tablet Tambah Darah Dengan Kejadian Anemia pada Ibu Hamil di Puskesmas Batunadua Kota Padangsidimpuan Tahun 2021. *Jurnal Kesehatan Ilmiah Indonesia (Indonesian Health Scientific Journal)*, 6(2), 148–156. <https://doi.org/10.51933/health.v6i2.600>
- Rostanty, T., Mamlukah, M., & Suparman, R. (2025). Faktor-faktor yang berhubungan dengan kepatuhan konsumsi tablet tambah darah pada ibu hamil. *Journal of Midwifery Care*, 5(2), 250–258. <https://doi.org/10.34305/jmc.v5i02.1651>
- Rovica Probowati, Anggorowati, F. A. (2023). Upaya Peningkatan Konsumsi Tablet Fe terhadap Kejadian Anemia pada Ibu Hamil. *Journal of Telenursing (JOTING)*, 5(2), 2740–2748. <https://doi.org/10.31539/joting.v5i2.5649>
- Rumayomi, D. M., Munthe, J. N., Howay, L., Astawa, A. E., & Rumbino, S. C. (2025). Hubungan tingkat pendidikan terhadap kepatuhan konsumsi tablet tambah darah pada ibu hamil di Puskesmas Abepura. *Jurnal Kesehatan Tambusai*, 6(3), 13248–13254. <https://doi.org/10.31004/jkt.v6i3.49482>
- Rustiawan, A., & Pratiwi, A. (2022). (2022). Evaluasi program pemberian tablet tambah darah pada ibu hamil di puskesmas gedongtengen. *Abdi Geomedisains*, 2(2), 61–71.
- Saeed, M., Adam, G., Hussein, S., AlHabardi, N., & Adam, I. (2024). Prevalence and Factors Associated with Adherence to Iron-Folic Acid Supplementation Among Pregnant Women in Eastern Sudan: A Cross-Sectional Study. *Patient Preference and Adherence*, Volume 18, 1665–1674. <https://doi.org/10.2147/PPA.S476738>
- Salifu, Y., Agyeman, Y. N., & Lasong, J. (2024). Adherence to and predictors of iron-folate acid supplementation among pregnant women in a pastoral population in Ghana: a community-based cross-sectional study. *Reproductive Health*, 21(1). <https://doi.org/10.1186/s12978-024-01877-z>
- Seidu, H., Gaa, P. K., & Mogre, V. (2024). Adherence to iron and folic acid supplementation among pregnant women from Northern Ghana. *Nutrition and Metabolic Insights*, 17, 1–11. <https://doi.org/10.1177/11786388231218664>
- Simaremare, T., Manurung, K., & Sitorus, M. E. J. (2023). Faktor yang mempengaruhi kepatuhan ibu hamil dalam mengkonsumsi tablet fe dan kaitannya dengan kejadian anemia pada ibu hamil. *Jurnal Ilmiah Kesehatan Rustida*, 10(2), 96–104. <https://doi.org/10.55500/jikr.v10i2.196>
- Stefani, A., Putri, Y., & Kusumawati, E. (2023). Kepatuhan Konsumsi Tablet Fe Pada Ibu Hamil Trimester Iii Dengan Anemia Ringan. *Prosiding Seminar Nasional UNIMUS*, 6(18), 528–533.
- Suparwatini, Sari, E. P., Dhamayanti, R., & Afrika, E. (2025). Hubungan Pengetahuan, Frekuensi Kunjungan ANC dan Riwayat Anemia Terhadap Kepatuhan Mengkonsumsi Tablet Fe di UPTD Puskesmas Burnai Mulya Kabupaten Ogan Komering Ulu Timur Tahun 2024. *Indonesian Journal of Health Science*, 5(3), 597–606. <https://doi.org/10.54957/ijhs.v5i3.1467>
- Tefera, A. A., Ibrahim, N. A., & Umer, A. A. (2023). Adherence to iron and folate supplementation and associated factors among women attending antenatal care in public health facilities at Covid-19 pandemic in Ethiopia. *PLOS Global Public Health*, 3(1), e0000825. <https://doi.org/10.1371/journal.pgph.0000825>
- Umami, D. A. (2022). Determinants of Compliance with Iron Tablet Consumption Among Pregnant Women in Bengkulu: An Analysis of Knowledge, Occupation, and Demographic Factors. *Journal of Current Health Sciences*, 2(1), 47–54. <https://doi.org/10.47679/jchs.202270>
- WHO. (2025). Anemia Pada Wanita Dan Anak-Anak. World Health Organization.
- Wirke, N., Afrika, E., & Anggraini, H. (2022). Hubungan Kunjungan ANC, Kepatuhan Konsumsi Tablet FE dan Status Gizi dengan Kejadian Anemia pada Ibu Hamil Trimester III di Puskesmas Kutaraya Kecamatan Kota Kayuagung Kabupaten Ogan Komering Ilir. *Jurnal Ilmiah Universitas Batanghari Jambi*, 22(2), 798. <https://doi.org/10.33087/jiubj.v22i2.1888>