



THE ROLE OF KNOWLEDGE AND ATTITUDE AS DETERMINANTS OF ADOLESCENT GIRLS' COMPLIANCE WITH IRON TABLET CONSUMPTION

Ahmad Dwiky Darmawan, Sulastri*

Department of Nursing, Faculty of Health Sciences, Universitas Muhammadiyah Surakarta, Jl. A. Yani, Mendungan, Pabelan, Kartasura, Sukoharjo, Central Java 57162, Indonesia

*Sulastri@ums.ac.id

ABSTRACT

Anemia remains one of the most significant global nutritional problems, particularly affecting adolescent girls. In Indonesia, the government has implemented a preventive strategy through the Weekly Iron and Folic Acid Supplementation (WIFAS) program, commonly known as tablet tambah darah (TTD). However, the success of this program relies heavily on adolescents' adherence to regular consumption. Knowledge and attitude are recognized as key psychological determinants influencing compliance with iron supplementation. This study aimed to examine the correlation between knowledge and attitude with compliance in iron tablet consumption among adolescent girls at SMA Negeri 2 Sukoharjo. A descriptive correlational design with a quantitative approach was employed, involving 100 female students from grade XI selected using purposive sampling. Data were collected through a structured questionnaire measuring knowledge, attitude, and compliance variables. The instrument demonstrated good validity with Pearson Product Moment correlation coefficients ranging from 0.54 to 0.88 and acceptable reliability with a Cronbach's Alpha value of 0.79. Statistical analysis was performed using the Chi-Square test at a significance level of $p < 0.05$. The majority of respondents had good knowledge (59%), positive attitudes (73%), and high compliance (44%) toward TTD consumption. The Chi-Square test showed a significant association between knowledge and compliance ($p = 0.010$), as well as between attitude and compliance ($p = 0.010$). The study concludes that knowledge acts as a primary cognitive factor influencing adolescents' compliance with iron tablet intake, while attitude serves as a reinforcing element that strengthens behavioral intention and consistency.

Keywords: adolescent girls; anemia; attitude; compliance; iron supplementation; knowledge

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INTRODUCTION

Anemia continues to be a major global public health concern, especially among women of reproductive age and adolescent girls. Based on the latest data from the World Health Organization (WHO, 2025), the worldwide prevalence of anemia among women aged 15–49 years was reported at 30.7% in 2023. The highest rate was recorded in Africa, such as in Gabon at 60%, while the lowest prevalence was in the Americas, namely in Guatemala at around 10%. Similarly, (Global Nutrition Report, 2022) highlighted that anemia prevalence among women of reproductive age in Asia remains high, with 28.1% in Central Asia, 16.0% in East Asia, 46.6% in Southeast Asia, 48.4% in South Asia, and 33.4% in West Asia. The average prevalence across Asia is around 33.1%, indicating that anemia remains a major nutritional challenge in the region.

Adolescent girls are a group that is highly vulnerable to anemia due to increased iron requirements during growth and blood loss due to menstruation. This condition affects reproductive health, concentration at school, immunity, and long-term productivity. (Riskesdas, 2019), the prevalence of anemia among Indonesian adolescents aged 15–24 years reached 32%, and the report (Kemenkes RI, 2022) shows that this figure has not yet shown a significant decline.

One of the strategies implemented by the Indonesian government to lower the prevalence of anemia among adolescent girls is the Weekly Iron and Folic Acid Supplementation (WIFAS) program,

which has been in operation since 2014. This initiative provides one tablet per week containing 60 mg of elemental iron and 400 µg of folic acid, as mandated in Ministry of Health Regulation No. 88 of 2014 and later reaffirmed in Regulation No. 51 of 2016. The success of the program is highly dependent on participant compliance. However, several studies show that the compliance rate among adolescents is still low. A study at the Bina Karya Medika Ponorogo Health Vocational School in East Java showed that only 48% of adolescents complied with the recommended weekly intake of TTD (Pibriyanti et al., 2024).

Sukoharjo Regency exhibited a comparable pattern, with the estimated prevalence of suspected anemia among adolescent girls varying between 26% and 37% depending on the assessment method used. Local research by (Hapsari & Hidayati, 2023) confirms that awareness and compliance with supplement consumption among high school students is still low, even though TTD distribution has reached most schools. This fact shows that the availability of tablets does not guarantee the success of the program because behavioral factors, especially knowledge and attitude, remain the main challenges in its implementation.

Knowledge is a cognitive factor that plays an important role in shaping a person's attitudes, intentions, and health behaviors. Adolescents with good knowledge about the benefits of TTD and the risks of anemia tend to have positive perceptions of TTD consumption and are more compliant in taking it. Conversely, a lack of understanding, misperceptions about side effects, and minimal social support can reduce motivation to consume (Widiyawati & Virgia, 2024).

Even though numerous studies have explored the link between knowledge and adherence to iron tablet supplementation, there is still a scarcity of empirical evidence from the Sukoharjo area, especially among students at the senior high school level. Schools serve as strategic environments for implementing adolescent health programs focused on education and nutritional behavior. Hence, this study seeks to examine how knowledge functions as a determining factor influencing adolescent girls' adherence to iron tablet consumption at SMA Negeri 2 Sukoharjo. The study also aims to serve as a reference for improving educational approaches and enhancing the monitoring of the Weekly Iron and Folic Acid Supplementation (WIFAS) program at the school level.

METHOD

This research employed a descriptive correlational design using a quantitative approach to examine the association between adolescent girls' knowledge and attitudes and their adherence to iron tablet consumption. This study was implemented at SMA Negeri 2 Sukoharjo, Kartasura District, Sukoharjo Regency, from August to September 2025. The research population consisted of all 100 female students in grade XI. The sample was determined using purposive sampling with the inclusion criteria of being active students participating in the iron supplement program, willing to be respondents, and able to fill out the questionnaire independently. Respondents who had health problems or refused to participate were excluded from the sample. The research instrument was a structured questionnaire consisting of three parts, namely knowledge, attitude, and compliance. The knowledge variable was measured through 20 true-false questions, the attitude variable was measured using 20 statements with a four-point Likert scale (strongly agree–disagree), and the compliance variable was measured using 20 statements with a Guttman scale (yes/no). The validity test results using Pearson's Product Moment correlation showed values between 0.54 and 0.88, while the reliability test results using Cronbach's Alpha were 0.70, so that all instruments were declared valid and reliable. Data analysis was performed using SPSS version 25.0, with univariate analysis to describe the frequency distribution and percentage of each variable, as well as bivariate analysis using the Chi-Square test to determine the relationship between knowledge and attitude with compliance at a significance level of $p < 0.05$. This study obtained ethical approval from the Health Research Ethics Committee of the Faculty of Medicine, Muhammadiyah University

Surakarta (No. 5837/B.1/KEPK-FKUMS/VIII/2025). All respondents provided written informed consent, and the confidentiality of their personal data was guaranteed.

This study employed a descriptive correlational design with a quantitative approach to analyze the relationship between knowledge and attitudes of adolescent girls and their compliance with the consumption of iron supplementation tablets (tablet tambah darah, TTD). The study was conducted at SMA Negeri 2 Sukoharjo, Kartasura District, Sukoharjo Regency, from August to September 2025. The study population consisted of all grade XI female students, totaling 100 participants. The sample was selected using a purposive sampling technique with inclusion criteria of active female students participating in the iron supplementation program, willing to serve as respondents, and able to complete the questionnaire independently. Respondents with health disorders or those who refused to participate were excluded from the study.

The research instrument was a structured questionnaire consisting of three sections: knowledge, attitude, and compliance. The knowledge variable was measured using 20 true–false questions, the attitude variable was measured using 20 statements on a four-point Likert scale (strongly agree to strongly disagree), and the compliance variable was measured using 20 statements on a Guttman scale (yes/no). Validity testing was conducted using the Pearson Product Moment correlation, with calculated *r* values ranging from 0.54 to 0.88, exceeding the *r* table value of 0.444. Reliability testing showed a Cronbach’s Alpha value of 0.79. Data analysis was performed using SPSS version 25.0, including univariate analysis to describe the frequency and percentage distribution of each variable and bivariate analysis using the Chi-square test to examine the relationship between knowledge and attitudes and compliance at a significance level of $p < 0.05$. This study received ethical approval from the Health Research Ethics Committee of the Faculty of Medicine, Universitas Muhammadiyah Surakarta (No. 5837/B.1/KEPK-FKUMS/VIII/2025). All respondents provided written informed consent, and the confidentiality of personal data was guaranteed.

RESULT

Respondent characteristics

Table 1.
Distribution of Respondents by Age Group

Characteristics	f	%
15 years	2	2.0
16 years old	81	81.0
17 years	17	17.0

Most respondents were 16-year-old adolescents (81%), who were 11th grade students at SMA Negeri 2 Sukoharjo. This age group is in mid-adolescence, a phase in which health awareness begins to develop but is still influenced by environmental factors and peers.

Distribution of Knowledge, Attitudes, and Compliance with Iron Supplement Consumption

Table 2.
Distribution of Respondents’ Levels of Knowledge, Attitude, and Compliance in Iron Tablet Supplementation (n = 100)

Variable	Category	f	%
Knowledge	Good	59	59
	Fair	24	24.0
	Insufficient	17	17.0
Attitude	Positive	73	73
	Negative	27	27.0
Compliance	Good	44	44
	Fair	39	39.0
	Insufficient	17	17.0

The majority of respondents had good knowledge (59.0%) and positive attitudes (73.0%) toward iron supplement consumption, and demonstrated good compliance at 44.0%. However, 56% of respondents still had moderate to low compliance levels, indicating the need for ongoing education

and monitoring of iron supplement consumption.

Association of Knowledge and Attitude with Compliance in Iron Tablet Consumption

Table 3.
Correlation Between Knowledge and Compliance in Iron Tablet Intake (n = 100)

Knowledge Category	Compliance			Total	P-value
	Good f (%)	Fair f (%)	Poor f (%)		
Insufficient	2 (11.8)	6 (35.3)	9 (52.9)	17 (100)	<0,001
Fair	11 (45.8)	11 (45.8)	2 (8.3)	24 (100)	
Good	31 (52.5)	22 (37.3)	6 (10.2)	59 (100)	

The Chi-Square test results show a significant relationship between knowledge level and compliance with iron supplement consumption ($p = 0.001$). Respondents with good knowledge tended to have high compliance (52.5%), while respondents with low knowledge were more likely to fall into the low compliance category (52.9%).

Table 4.
Correlation Between Attitude and Compliance in Iron Tablet Intake (n = 100)

Attitude	Compliance			Total	P-value
	Good f (%)	Fair f (%)	Poor f (%)		
Positive	35 (47.9%)	31 (42.5%)	7 (9.6%)	73 (100%)	<0,01
Negative	9 (33.3%)	8 (29.6%)	10 (37.0%)	27 (100%)	

The Chi-square test indicated a statistically significant association between attitude and compliance ($p = 0.010$). Respondents with positive attitudes were more likely to have high compliance (47.9%), while respondents with negative attitudes were more likely to have low compliance (37.0%). The study demonstrates a significant positive association between knowledge, attitude, and adherence to iron tablet intake. This confirms the relationship between cognitive, affective, and behavioral factors in adolescents in the prevention of anemia.

DISCUSSION

Respondent Characteristics

Most respondents were 16 years old (81 percent), which falls within the category of middle adolescence. At this age, iron requirements increase due to rapid growth and the onset of menstruation, which may elevate the risk of anaemia if iron intake is insufficient (Cia et al., 2021). This stage also represents an important period in the formation of health behaviours, as adolescents begin to develop autonomy in decision-making while remaining susceptible to social and peer influence.

Correlation Between Knowledge and Compliance in Iron Tablet Intake

The study revealed that adolescents with higher levels of knowledge demonstrated greater adherence to iron tablet supplementation ($p < 0.05$). Respondents with good knowledge tend to be more compliant than those with low knowledge. Of the 59 adolescents with good knowledge, 31 (52.5%) had high compliance, while 6 (10.2%) showed low compliance. Conversely, of the 17 adolescents with low knowledge, 9 (52.9%) showed low compliance. These findings suggest that knowledge functions as an essential cognitive factor influencing adherence behavior.

Data from the 2019 Indonesian Basic Health Research (Riskesdas, 2019) support these results, showing that the acceptance rate of iron tablets among adolescent girls reached 76.2 percent, with most tablets (80.9 percent) obtained through schools. However, only 1.4 percent of adolescents consumed ≥ 52 tablets per year, while 98.6 percent failed to meet the recommended intake. According to (Kemenkes RI, 2018), adolescents are categorised as compliant if they consume ≥ 52 tablets per year, and non-compliant if they consume fewer than 52. This discrepancy indicates that high acceptance of iron tablets does not necessarily translate into actual consumption, emphasising the importance of knowledge-oriented education. These findings align with the Health Belief Model

(HBM), which states that knowledge functions as a predisposing factor influencing an individual's perceived susceptibility and perceived benefits of preventive action (Salim et al., 2025). When adolescents understand the risks of anaemia and the benefits of iron supplementation, they are more motivated to consume the tablets regularly. Conversely, limited knowledge reduces awareness of the dangers of anaemia and weakens adherence.

Several previous studies reinforce these findings. (Ningsih & Ernawati, 2025) reported that improved knowledge directly increases adolescents' understanding of the importance of iron supplementation. Similarly, research by (Azizah & Sulastris, 2023) among pregnant women showed that education about anaemia enhances knowledge and awareness regarding the consumption of iron tablets. Although conducted in different populations, both studies highlight that knowledge is a fundamental component of health-related decision-making, including during adolescence as preparation for future reproductive health.

Other studies, such as those by (Runiari & Hartati, 2020) and (Wahyuningsih & Rohmawati, 2020), also found significant associations between knowledge and compliance. However, adequate knowledge does not always guarantee high compliance, as other factors including negative perceptions of side effects, discomfort, and social stigma may influence adolescent behaviour (Faraj, 2024; Hamranani et al., 2020). Research in Ethiopia further demonstrated that adolescents with low knowledge are 4.4 times more likely to experience anaemia than those with good knowledge (Yewodiaw et al., 2025), highlighting the protective role of knowledge.

Beyond individual factors, parental support and the availability of iron tablets also contribute to maintaining compliance (Y. et al., 2024). Strong knowledge not only increases awareness of the risks of anaemia but also fosters intrinsic motivation to maintain health, resulting in more consistent consumption of iron tablets. From an Islamic perspective, knowledge is regarded as a trust and the basis for righteous action. Surah Al-Mujadilah [58]:11 states that Allah elevates the status of those who possess knowledge. This suggests that health-related knowledge holds moral value and can encourage adolescents to practise preventive behaviours, including regular consumption of iron tablets. Overall, knowledge plays a crucial role in shaping compliance with iron tablet consumption, as it influences perceptions, beliefs, and the intention to engage in healthy behaviours. Adequate knowledge has even been reported to reduce the risk of anaemia by up to 20 percent and strengthen intrinsic motivation among adolescents (Yuliawati et al., 2023).

Correlation Between Attitude and Compliance in Iron Tablet Intake

Statistical analysis using the Chi-Square test showed that attitude had a significant influence on adherence to iron tablet consumption ($p = 0.010$). Adolescents with a positive attitude toward iron tablets tend to be more compliant in regularly consuming the tablets compared to those with a negative attitude. Attitude reflects emotional acceptance of the benefits or risks of an action, making it an important affective factor in the formation of health behavior (Diatri et al., 2023).

Attitude is a reflection of acceptance or rejection of an action. Those with favorable attitudes toward iron supplementation tend to acknowledge its health benefits and understand that anemia can lead to fatigue, impaired focus, and lower academic achievement (Pibriyanti et al., 2024). In addition, support from the school environment and health workers also strengthens the formation of positive attitudes (Sukmaningsih et al., 2025). Conversely, some adolescents show negative attitudes due to the misconception that iron tablets are only needed when feeling weak or worrying about mild side effects such as nausea and dizziness (Efendi et al., 2025).

The study conducted by (Amanda & Darmadja, 2020) indicates that positive attitudes are shaped by both knowledge and social support. According to the Theory of Planned Behavior, positive attitudes form a strong intention to behave in accordance with beliefs. These findings are supported by

(Setyorini & Revika, 2024) and (Diani et al., 2024), which show that knowledge and attitudes are significantly related to compliance ($p < 0.001-0.002$), while social support and subjective norms act as reinforcing factors. A study in Ghana (Dubik et al., 2019) adds that boredom, side effects, and lack of support from teachers/friends can reduce compliance, making social support an effective protective factor (Silitonga et al., 2023).

Although most adolescents have a positive attitude, only 47% consume iron tablets regularly. The main obstacles include unpleasant taste, mild side effects, inconsistent tablet distribution schedules, and boredom with monotonous programs (Hidayanty et al., 2025). Therefore, the formation of positive attitudes needs to be balanced with interactive education, teacher supervision, and a supportive environment to achieve long-term compliance. Educational strategies should involve group discussions, peer role models, and hands-on practice so that positive intentions are translated into real behavior.

In addition to cognitive and social aspects, the Islamic perspective emphasizes the importance of caring for the body as a trust. QS. Al-Baqarah [2]: 195 states: "And do not throw yourselves into destruction, and do good, for indeed, Allah loves those who do good." This verse reinforces that health-conscious behavior, including compliance with TTD consumption, is a form of moral responsibility towards the body. Thus, a positive attitude not only reinforces physically healthy behavior, but also becomes an implementation of religious and ethical values in maintaining the trust of the body.

Overall, this study shows that knowledge and attitude play a role as determinants of TTD consumption compliance. Knowledge serves to shape rational awareness of the benefits of TTD, while attitude strengthens emotional motivation and commitment to compliant behavior. The two complement each other in encouraging sustainable health behavior. These results reinforce the Health Belief Model and Theory of Planned Behavior, which state that changes in health behavior are influenced by a combination of cognitive and affective factors. Thus, increasing adolescent compliance with TTD consumption can be done through dual interventions, namely increasing knowledge-based education and strengthening positive attitudes through social support, school assistance, and teacher role models.

CONCLUSION

The results of this study indicate that knowledge and attitude play a major role in determining adolescent girls' compliance with iron supplement consumption. Good knowledge has been proven to increase adolescents' understanding of the benefits of iron supplements and the importance of preventing anemia, thereby encouraging compliance. Meanwhile, positive attitudes serve to strengthen the intention, motivation, and consistency of TTD consumption behavior, so that adolescents who have a positive view of this program tend to be more compliant than adolescents who have a negative attitude.

These findings confirm that the success of iron supplementation programs in schools depends not only on the availability of tablets, but also on behavioral factors that include adolescents' knowledge and attitudes. Therefore, efforts to increase compliance with TTD consumption need to focus on strengthening knowledge through contextual, participatory, and sustainable nutrition education, accompanied by the creation of a school environment that supports the formation of positive attitudes. Collaboration between teachers, health workers, and peers is key to building adolescents' motivation and awareness to consistently practice anemia prevention behaviors. Thus, it is hoped that adolescents' awareness of the importance of health and nutrition can develop into sustainable healthy behaviors.

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