

Evaluation of Iron Tablet Program Among Adolescent Girl

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Abstract - Anemia is one of the health problems throughout the world, especially in developing countries. Anemia often occurs in young women. Prevention of anemia in young women can be done by giving iron tablets. The study aimed to evaluate of iron tablet program among adolescents in the work area of Muntok Health Center, West Bangka Regency. The design of this study is qualitative research using the CIPP evaluation model approach (Context, Input, Process, Product). The selection of informants used a purposive method. There were 20 informants selected and data collection techniques done by in-depth interviews, document review, and observation. The validity test used triangulation techniques. The results showed that in context, the blood tablet supplement programs in young women conducted because of a high incidence of anemia in pregnant women. The program aims to prevent adolescent girls from anemia and reduce maternal mortality. The results showed that in input, we found that human resources and financial resources for checking Hemoglobin girls limited. In the process, the distribution of iron tablets not regularly in senior high school. Some schools did not provide their reports to the primary health care every month. In the product, the adolescent girls were still not obedient to consuming an iron table so that the target coverage had not been achieved. Evaluation of the blood tablet supplement program for young women is not optimal. It is expected that the public health center

will improve the quality of the program and optimize performance.

Keywords: evaluation, iron tablet, adolescent

I. INTRODUCTION

Anemia is one of the health problems in the whole world, especially in developing countries. It is estimated that 30% of the world's population suffers from anemia. Anemia often occurs in the community, especially in young women and pregnant women. Anemia in young women until now is relatively high. According to the *World Health Organization* (WHO), the prevalence of anemia worldwide ranges from 40-88% (1). The number of teenage population (10-19 years) in Indonesia, about 26,2% are 50.9% male and 49.1% female. Based on data from the 2013 *Riskesdas*, the prevalence of anemia in Indonesia was

21.7%, anemia patients aged 5-14 years were 26.4%, and 18.4% of patients were aged 15-24 years (2). Young women 10-18 years of age, about 57.1% and the age of 19-45 years, about 39.5%. Women have the highest risk of anemia, especially in young women (3).

Anemia in young women can cause growth retardation in physical, behavioral, and emotional disorders. This can affect the growth cycle and development of brain cells so that it can cause decreased body endurance, natural weakness and hunger, the impaired concentration of learning, learning achievement decreases and can result in low work productivity (4). Iron deficiency can affect motor nerves, cognitive and emotions (5). One of the government programs in reducing the prevalence of anemia in adolescent girls is giving blood-added tablets. Because of the impact of anemia in reducing the quality of human resources, anemia prevention should be done early

before young women become pregnant women so that the physical condition of the young woman is ready to become a healthy mother. Providing Fe supplementation by giving blood-added tablets is an efficient way, the effect is quickly visible, and the price is relatively low so that it is affordable by the community (6). This study aims to evaluate the iron tablet program for young women in the working area of Muntok Health Center, West Bangka Regency.

II. METHOD

The design of this research is qualitative research using the CIPP evaluation model approach (*context, input, process, product*). This evaluation model was developed by Stufflebeam (7). The selection of informants in the study using a purposive method with consideration using the principle of suitability and adequacy. The principle of adequacy is the data obtained should be able to describe the whole of the phenomena related to the research problem,

while the principle of conformity is that the informant is chosen based on the relationship with the title of the study (8).

Some of the criteria informants in this study, among others: the management program iron tablet in young women, know the activities of the program iron tablet on girls, involved directly in the implementation of activities, an adolescent girl especially those schoolboys still junior high school and available as an informant. The selection of informants for young women at five junior high schools in the working area of Muntok Health Center, West Bangka Regency. Twenty informants consisted of health officers from the Health Office and Public health center, school health program coaches, and young women in the Muntok health center work area. Data collection is done through in-depth interviews, document review, and observation. Test the validity of using triangulation. Data analysis used *content analysis*

III. RESULTS

The purpose of the program is to increase Hb levels in young women, improve the quality of learning for young women, so they do not get anemia, prepare young women to be mothers, and in the long run to reduce maternal and infant mortality. It can be illustrated from the informant's statement as follows:

"... The goal is the first to depart from the problem that there are still many instances of anemia in pregnant women so that the alternative problem is early prevention, namely giving blood tablets to young women to overcome the incidence of anemia during pregnancy later ..." (RN)

Environment

Cultural factors influence this program. Certain cultures and ethnicities who lack trust in government medicine and trust traditional medicine more. Some parents forbid taking blood-supplemented tablets because of a lack of understanding about

blood-added tablets. Some young women who rarely consume drugs make them unwilling to consume blood-added tablets. It can be illustrated from the following informant's statement:

"... Yes, sometimes certain cultures do not trust government medicine and trust traditional medicine more ..." (BD)

"... because of lack of understanding from parents so forbidding their children to consume drugs ..." (RN)

Input

This program is only limited to drug distribution, and target coverage has not yet arrived to check the Hb levels in the blood of young women due to lack of human resources, This is under the statement of the informants as follows:

"... At the moment, our distribution is still not assessing their Hb levels in the blood to get there. We are still not ready in terms of human resources, natural resources, and

budget support. So, our success criteria are only the distribution of targets ... "(BD)

Procurement of drugs for adding blood tablets using APBD funds is assisted by dropping drugs from the province to add blood tablets and is still constrained by the lack of availability of funds to check for HB adolescent girls. Information regarding the availability of funds for the implementation of the blood-tablet tablet program for young women is known through in-depth interviews with informants as follows:

"... For the source of funds for the tablet added blood program for girls, this comes from the state budget, regional budget, and logistical funding. For transportation, we use BOK funds both at the DHO and public health center, but we still do not have funds for checking Hb to young women ... "(BD)

Process

The distribution schedule of blood-added tablets from the Health Office to the public health center is uncertain depending on the

request of the public health center itself, and the distribution of blood-added tablets along with other drugs can not be directly distributed even though it has been proposed for efficiency. However, certainly, every month is always distributed. The following are the results of the interview with the informant:

"... it is not certain depending on the request of each public health center, and the schedule of dropping tablets added to each public health center is different. it is because once a pharmacy drops it is not just the iron tablet that is dropped but along with other drugs for efficiency ..." (BD)

Several schools do not routinely provide monthly reporting related to the coverage of the target to the public health center, and there are still schools that only give blood-added tablets without drinking together. The information was obtained from the informant's statement as follows:

"... The problem is that in reporting, sometimes it does not provide routine reporting every month, and there are still schools that do not drink together, even though we have explained ..." (NL)

As for the obstacles in giving tablets to add blood to students namely, the smell of tablets that are not good, the side effects of tablets such as dizziness and nausea, some allergies to some students, there are some stubborn students who do not want to drink, and there is also a ban on people old to take a type of tablet or medicine. Another obstacle is due to the tight school schedules and holidays, making giving blood tablets to students is not carried out. The information was obtained from the informant's statement as follows:

"... The obstacles some students are recalcitrant ya do not want to drink because the iron tablet rarely takes medicine, and there are also students who complained

after taking his medication so got an l allergy..." (DT)

Product

Compliance with the target is the goal of following the instructions and recommendations for consuming blood-added tablets following applicable regulations. For in the working area of Muntok Public Health Center, additional tablets are given by drinking together at school so that the target is to directly consume blood-added tablets on the spot by being monitored directly by the school health business supervisors and teachers at the school. Only some schools are doing iron tablet supplementation without making a drink with the tablet to take home. Some young women do not consume blood-added tablets. It accordance with the results of interviews with the informants as follows:

"... For compliance with targets because we do it by drinking together, we only monitor visually ..." (HT)

"... we drunk but sometimes not drink and fill attendee in tomorrow ..." (FF)

IV. DISCUSSION

This study aims to evaluate the program of blood-added tablets in teenage girls using the CIPP model approach. Based on the results, the component context, there are cultural factors. Teenagers do not want to consume government drugs because they believe more in traditional medicine, so they do not want to take tablets and add blood. In addition to cultural factors, a consumer's behavior is also influenced by social factors such as reference groups, family, and role and status. Reference group, one's reference group, consists of all groups that have a direct or indirect influence on a person's attitude or behavior (9).

Some parents forbid taking blood-added tablets because of a lack of understanding of blood-added tablets, and indeed some teenage girls who rarely take drugs make

them unwilling to consume blood-added tablets. The factor in the implementation of the program environment is an important determinant (10).

Based on the input component, the blood-added tablet program for these young women already has a sufficient select budget, and transport funds for each public health center have been budgeted. it is just that there is no allocation of funds for checking the Hb levels of young women. The amount of fee depends on the target number of recipients of the program (11)

After getting blood-added tablets from the District Health Officer, the public health center distributed blood-added tablets to all Schools in the Muntok Health Center working area following the target number of young women in each school. The distribution process as well as counseling and dissemination of blood- added tablets to young women is carried out by program managers and nutrition workers at the

Community Health Center once a year during the new school year for schoolgirls, teachers, and cadres of the new school health business by organizing additional tablet drinking activities blood together.

The distribution schedule of blood-added tablets from the Health Office to the public health center is uncertain depending on the request of the public health center itself. The distribution of blood-added tablets along with other drugs can not be directly distributed even though it has been proposed for efficiency but indeed every month is always distributed. According to the Minister of Health of the Republic of Indonesia stated that the distribution of drugs is a process for the supply of drugs needed in the Health Service Unit. The drug distribution system is conducted quarterly by the Department of Health for a public health center in its working area and to speed up the process until the drug is delivered to the public health center (12).

As for the obstacles of coordination namely, some schools do not routinely provide monthly reporting related to the target coverage to the public health center, and there are still schools that only give blood-tablet without drinking together. Coordination in the program is still not suitable due to the lack of communication between the public health center and several schools so that the program does not run optimally. Management coordination can be seen by looking at the coordination indicators namely communication, awareness of the importance of coordination, participant competence, agreement, commitment, and coordination incentives, and continuity of planning (13)

Based on the product component, young women take blood-added tablets following what is explained by the supervisor of the school health business, but sometimes some students do not take blood-added tablets but still fill in the absences provided and tell the

homeroom teacher that they have taken blood-added tablets. It can be caused by a variety of students' perceptions about the taste and side effects of the consumption of blood-added tablets and the inactivity of the teacher's coach in the school health effort in conducting supervision and accompaniment. According to Permenkes No. 88 of 2014, one indicator of the success of the tablet-added blood program in young women is target adherence (14). From the results of this research program in the working area of the Muntok Community Health Center, there is still a lack of target compliance in consuming blood-added tablets so that it still cannot be said to be successful. Compliance with targets can be summed up as behavior to obey suggestions or procedures from doctors about drug use, which was preceded by a consultation process between the patient or the patient's family as a critical person in the patient's life and the doctor as a medical service provider (15). From the

results of this research program in the working area of muntok Community Health Center, the target of at least 30% coverage has not been achieved in one year

V. CONCLUSION

Implementation of the program of blood supplementation in young women is still not optimal. It is expected that the public health center further improves adolescent health programs such as counseling related anemia. Involves the role of the parents play an active role in monitoring the activities of iron tablet program in adolescent girls

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