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Motivational Interviewing Techniques on The Adoption Stages of Iron Tablet Consumption by Pregnant Women at The Arjasa Community Health Center

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ABSTRACT
Introduction: Based on preliminary studies in the Arjasa Community Health Center area, all seven pregnant women in K1 or 100%, had not adopted the recommended method of taking iron (Fe) tablets. One effective method to change this stage of behavior adoption is through motivational interviewing techniques. The purpose of this study is to analyze motivational interviewing techniques on changes in the stage of iron (Fe) tabletconsumption adoption among K1 pregnant women at the Arjasa Community Health Center.
Methods: The research design used a pre-experimental approach with a one-group pre- and post-test design. The sampling technique used non-probability sampling with accidental sampling, with a total of 20 respondents. The research instrument used a questionnaire. Data analysis used the Wilcoxon test.
Results: The Wilcoxon test yielded a Z value of -4.008 with a p value < 0.000. Since p < 0.05, Ho is rejected and Ha is accepted. Thus, it can be concluded that the motivational interviewing technique effectively changes the stage of adoption of iron (Fe) tabletconsumption among pregnant women K1 at the Arjasa Community Health Center.
Discussion: Motivational interviewing techniques can be used to change the adoption stage of iron (Fe) tabletconsumption among pregnant women K1 at the Arjasa Community Health Center.

***Keywords**: Iron* (Fe) *Tablet Consumption; Motivational Interviewing; Adoption Stage*

Introduction

Pregnancy anemia is one of the most common nutritional deficiencies in pregnant women. Anemia during pregnancy is characterized by hemoglobin levels below 11 grams% in the first and third trimesters, and hemoglobin levels below 10.5 grams% in the second trimester. Anemia is defined as a condition in which the number of red blood cells is lower than what is needed to meet the body's physiological needs (Khalisah. S, et al. 2024).

Globally, the prevalence of anemia in pregnant women worldwide is 40% (WHO 2022). The prevalence of anemia in pregnant women in Indonesia in 2018 increased by 48.9%, with 84.6% of anemia in pregnant women occurring in the 15-24 age group (Riskesdas, 2018). In Indonesia, anemia is one of the main health problems (Ministry of Health, 2020). Meanwhile, the average prevalence of anemia in East Java is 5.8%. The average prevalence of anemia in East Java Province is still below the national target of 28% (Medyawati.C, et al., 2024). According to the 2023 East Java health profile data, there were 62,225 pregnant women with anemia, or 163.7%. In Jember district, there were 368 cases of anemia in pregnant women (2023 Health Profile). Anemia data in Arjasa Subdistrict, Jember District, ranks third highest, with 55 cases or 36.42% of 151 pregnant women experiencing anemia.

Anemia that occurs during pregnancy is a physiological condition, which occurs because the increase in blood plasma volume in the body is not proportional to the increase in red blood cell volume, resulting in a decrease in hemoglobin levels in the blood. A decrease in hemoglobin levels during pregnancy can result in reduced oxygen transport throughout the body, which ultimately contributes to anemia (Napitupulu.n.i.m.b, et al. 2023).

The physiological condition of anemia will be severe if adequate nutrition is not obtained or if iron (Fe) tablets are not consumed. Based on a preliminary study conducted on December 3, 2024, at the Kemuning Lor Health Center on 10 pregnant women with anemia, through interviews, the following facts were obtained overall, 100% of pregnant women had received iron (Fe) tablets, but most of them, namely 7 (70.00%), did not consume them according to the rules due to nausea and vomiting. One of the factors influencing the behavior of these pregnant women in their first trimester is

their experience in consuming iron (Fe) tablets. The results of the interview with the 10 pregnant women also revealed that the majority, namely 6 or 60.00%, believed that consuming iron (Fe) tablets was not very important. This condition is also influenced by a lack of information about the importance of iron (Fe) tablets during pregnancy. The effects of anemia during pregnancy can have serious consequences for both the mother and the fetus, due to the disruption of oxygen and nutrient supply from the mother to the fetus. The result is that the fetus experiences impaired weight gain, leading to Low Birth Weight (LBW (BBLR)) or BBLR. LBW (BBLR) can lead to neonatal death, perinatal morbidity, cerebral palsy, and disease. The long-term effects of LBW (BBLR) impact child growth and development, increase the risk of heart disease in the future, and reduce intelligence. LBW (BBLR) is a major contributor to perinatal morbidity and mortality in developing countries. Factors that influence LBW (BBLR) include maternal age, parity, and birth spacing. Another factor is the hemoglobin level in pregnant women. Anemia in pregnant women increases the risk of LBW (BBLR) sixfold compared to pregnant women who are not anemic. Anemia in pregnant women can cause death and illness in both the mother and her baby. Other effects on the fetus include malnutrition, premature birth, low birth weight, reduced organ and brain growth, malnutrition, or birth defects (Ambarwati S, et al. 2023).

The solution to overcome the lack of information about the importance of iron (Fe) tabletconsumption in pregnant women who are taking iron tablets for the first time is to provide information. Several methods that can be used are behavioral modification techniques, the transtheoretical model, and motivational interviewing. The results of interviews with several pregnant women indicated that midwives had provided information or counseling using the lecture method. Some of the disadvantages of using the lecture method/technique include one-way communication, limited information absorption, and minimal interaction.

Techniques that are considered effective for conveying information about iron tablets to change the acceptance of pregnant women K1 with anemia who are receiving iron tablets for the first time are behavior modification techniques, the transtheoretical model, and motivational interviewing. In this study, the researchers used motivational interviewing techniques. Motivational interviewing is a counseling method that focuses

on increasing an individual's motivation to change behavior based on their inner awareness and desires (Zakiyah.S, et al. 2023). Some of the advantages of motivational interviewing techniques include: building self-confidence, facilitating behavioral change, being effective in various health conditions, respecting client autonomy, and being collaborative.

Based on the above description, the researcher was interested in conducting research on "The effectiveness of motivational interviewing techniques on changes in the adoption stage of iron (Fe) tablet consumption in K1 pregnant women at the Arjasa Community Health Center."

Method

This study is a quantitative study with a pre-experimental design, using a One Group Pre-test and Post-test Design. In this design, before the intervention was given, a pre-test was conducted to determine the stage of adoption of iron (Fe) tablet consumption among K1 pregnant women. After the intervention in the form of motivational interviewing techniques was given, a post-test was conducted to determine changes in the stage of adoption of iron (Fe) tablet consumption.

This study was conducted in the working area of the Arjasa Community Health Center from May to June 2025. The population in this study was all pregnant women in their first trimester (K1) who were anemic in the working area of the Arjasa Community Health Center. The sampling technique used was non-probability sampling using accidental sampling, and the number of respondents in this study was 20 people. The independent variable in this study was the motivational interviewing technique, while the dependent variable was the stage of iron (Fe) tablet consumption adoption among pregnant women in their first trimester (K1) before and after the intervention.

Results

Table 1. Frequency distribution and percentage of K1 pregnant women based on age at the Arjasa Community Health Center

Mother's Age	Frequency	Percentage (%)
<20 Years Old	0	0,00
20-35 Years Old	20	100,00
>35 Years Old	0	0,00
Total	20	100,00

Source : Data Primary, 2025

Table 1 shows that all pregnant women at the Arjasa Community Health Center, namely 20 (100%), were aged between 20 and 35 years, which is considered a healthy reproductive age.

Table 2. Frequency Distribution and Percentage of K1 Pregnant Women Based on Education Level at the Arjasa Community Health Center

Education Level	Frequency	Percentage (%)
Elementary School	3	15,00
Junior High School	5	25,00
High School	12	60,00
College	0	0
Total	20	100,00

Source: Data Primary, 2025

Based on Table 2, it shows that most K1 pregnant women at the Arjasa Community Health Center had a high school education level, namely 12 (60%) people. The rest had a junior high school education level, namely 5 (25%) people, and an elementary school education level, namely 3 (15%) people.

Table 3. Frequency Distribution and Percentage of K1 Pregnant Women Based on Occupation at The Arjasa Community Health Center

Pekerjaan	Frequency	Percentage (%)
Does Not Work	15	75,00
Laborer	0	0
Self-Employed	4	20,00
Civil Servants	1	5,00
Total	20	100,00

Source: Data Primary, 2025

Table 3 shows that most K1 pregnant women at the Arjasa Community Health Center were not working, namely 15 (75%) people. The rest were self-employed (4 or 20%) and civil servants (1 or 5%).

Table 4. Frequency distribution and percentage of K1 pregnant women based on gestational age at the Arjasa Community Health Center

Gestational Age	Frequency	Percentage (%)
TM I	4	20,00
TM II	15	75,00
TM III	1	5,00
Total	20	100,00

Source: Data Primary, 2025

Table 4 shows that most pregnant women with K1 anemia at the Arjasa Community Health Center were in their second trimester, namely 15 (75%) people. The rest were in their first trimester, namely 4 (20%) people, and only 1 (5%) person was in her third trimester.

Table 5. Comparison of adoption stages in iron (Fe) tablet consumption before and after motivational interviewing techniques were given to pregnant women K1 at the Arjasa Community Health Center

Adoption Stages in Iron (Fe) Tablet Consumption Before Motivational Interviewing Technique was Applied					*P*-Value
Mean	*SD*	*Median*	*Min*	*Max*	
1.50	0.513	1.50	1	2	0.00

Adoption Stage In Iron (Fe) Tablet Consumption After Motivational Interviewing Technique was Applied					*P*- Value
Mean	*SD*	*Median*	*Min*	*Max*	
4.55	0.510	5.00	4	5	0.00

Based on the comparison table of the 5 stages of adoption after being given the motivational interviewing technique, the mean value of 1.50 or at the Awareness stage increased to a mean of 4.55 or at the Evaluation stage, the standard deviation from 0.513 to 0.510, the median from 1.50 to 5.00, the minimum from 1 increased to 4, and the maximum from 2 to 5.

The Wilcoxon signed ranks test yielded a Z value of -4.008 with a p value < 0.000. Since $p < 0.05$, H0 is rejected and Ha is accepted. Thus, it can be concluded that the motivational interviewing technique is effective in changing the stage of adoption of iron (Fe) tabletconsumption among K1 pregnant women at the Arjasa Community Health Center.

Discussion

Based on the results of the study, it shows that the adoption stage before the motivational interviewing technique was given to pregnant women K1 at the Arjasa Community Health Center had a mean value of 1.50 or in the Awareness range, a standard deviation value of 0.513, a median value of 1.50, a minimum value of 1, and a maximum value of 2. According to Utami 1 (2025), the adoption stage of iron (Fe) tabletconsumption in pregnant women is influenced by various factors, including

intrinsic motivation, positive perceptions of the benefits of iron tablets, and the level of knowledge and understanding of the importance of iron during pregnancy. Motivation is a key factor in health behavior change, especially in K1 pregnant women who are experiencing pregnancy for the first time and tend to need more support and information.

The researcher argues that before the intervention in the form of motivational interviewing techniques was administered, the level of iron (Fe) tablet consumption adoption among K1 pregnant women was at the initial stage, namely awareness. This is because K1 pregnant women only recently understood the importance of iron tablets, the benefits of iron tablets, how iron tablets work, and the adverse effects of not consuming iron tablets. Motivation is a key factor in health behavior change, especially among K1 pregnant women who are experiencing pregnancy for the first time and tend to need more support and information. Researchers argue that before being given an intervention in the form of motivational interviewing techniques, the level of adoption of iron (Fe) tablet consumption among pregnant women in their first trimester was at an early stage, namely awareness. This is because pregnant women in their first trimester only understand the importance of iron tablets, the benefits of iron tablets, how iron tablets work, and the result of not consuming iron tablets. Pregnant women in their first trimester have not yet tried, let alone consumed, the iron tablets they received from the health center. There were two pregnant women who had above-average scores because they had already tried and even consumed the iron tablets they received. One factor that may have influenced these pregnant women to try and even consume the iron tablets was education. As shown by the results of the study, most of the pregnant women had a high school education. A person's level of education will influence their behavior, according to research by Nurasiah & Khairunnisa.a (2024), which states that the role of education in shaping behavior and perceptions of social welfare is important because education influences how individuals view and perceive social welfare.

Based on the results of the study, it shows that the stage of adoption of iron (Fe) tablet consumption after intervention in the form of motivational interviewing techniques on K1 pregnant women at the Arjasa Community Health Center was at a

mean value of 4.55, which is included in the adoption stage range, with a standard deviation of 0.510, a median of 5.00, a minimum value of 4, and a maximum value of 5.

This study is in line with Wiyono, H., et al. (2023) entitled "The Relationship between Motivation and Compliance of Pregnant Women in Consuming Iron (Fe) Tablets". The results show a significant relationship between motivation and compliance of pregnant women in consuming iron tablets. Mothers with high motivation tend to be more compliant, and motivational interviewing has proven to be an effective approach to increase compliance. This technique helps mothers explore their personal values and reasons, thereby encouraging the voluntary adoption of healthy behaviors. This supports the theory that motivation plays an important role in determining behavior, including iron (Fe) tablet consumption. Therefore, motivational interviewing can be an appropriate intervention strategy in supporting behavioral change in pregnant women.

Social norms and the influence of the surrounding environment also have important roles in the innovation adoption process. The opinions and behaviors of people around us, such as family, health workers, or community leaders, can influence a person's decision to adopt an innovation. The more socially accepted the innovation is, the more likely individuals are to follow and apply it. By understanding and managing these factors, health interventions such as motivational interviewing techniques can be carried out more effectively and have a positive impact on increasing the success of innovation adoption, including the consumption of iron tablets in K1 pregnant women (Saputro.c.r.a & Fathiyah.f, 2022).

The researchers argue that after being given an intervention in the form of motivational interviewing techniques, the adoption stage of iron (Fe) tablet consumption among pregnant women in K1 obtained a mean value of 4.55, which is in the adoption stage. This is because pregnant women K1 in the Arjasa Community Health Center area not only understand the importance of iron tablets, the benefits of iron tablets, how iron tablets work, and the result of not consuming iron tablets. But these pregnant women K1 have tried, and there is even a commitment to consume iron tablets received from the posyandu consciously.

Shortly after being given motivational interviewing techniques, there were 9 (45%) K1 pregnant women who scored a minimum of 4. This was possible due to a lack of motivation. One factor that influences motivation is the level of education. The lower a person's education, the lower their motivation. As shown by the results of the study, 5 (25%) K1 pregnant women only had a basic education level, namely elementary and junior high school.

According to research by Permatasari.d, & Muttaqin.a (2018), there is a significant relationship between the level of education and the behavior of pregnant women in consuming iron tablets. The higher the level of education of pregnant women, the better their behavior in consuming iron tablets, which shows that education has an influence on behavior.

The intervention of effective motivational interviewing techniques in increasing the adoption stage of iron (Fe) tablet consumption in pregnant women with anemia during their first visit (K1) at the Arjasa Community Health Center. This study is in line with Prihanti et al. (2022), who evaluated the effectiveness of motivational interviewing on iron (Fe) tablet consumption compliance among pregnant women. The results showed a significant increase in compliance, knowledge, and attitude in the intervention group ($p = 0.00–0.01$), confirming that the motivational communication approach effectively encourages behavioral change.

According to (Shaleha.R.R, et al. 2023), motivational interviewing works by activating the drive for change through the exploration of personal values, life goals, and understanding the risks if no change occurs. In pregnant women, the motivation to maintain fetal health is the main driver in health decision-making, including commitment to consuming supplements such as iron tablets.

Researchers believe that motivational interviewing techniques are effective in changing the level of iron (Fe) tablet consumption among pregnant women in K1. This is because motivational interviewing techniques can identify how often pregnant women in K1 consume iron tablets, whether they do so as recommended (every day), and identify any side effects and major obstacles to consuming iron tablets. At the beginning of data collection, motivation was provided using open-ended questions so that the mothers' opinions could be explored using open-ended questions, avoiding

"Yes" or "No" answers, and encouraging pregnant women to make a simple commitment regarding iron (Fe) tablet consumption, namely to consume iron tablets as recommended. Next, after going through the motivational interview technique process, pregnant women will understand the importance of iron tablets, the benefits of iron tablets, how iron tablets work, and the adverse result of not consuming iron tablets. Furthermore, these K1 pregnant women will try and commit to consciously consuming the iron tablets received from the integrated health service post (posyandu). After conducting the pre-test, the next step is the post-test five days after the pre-test. The post-test is conducted five days after the intervention because, based on the spacing effect and testing effect theories, a few days' interval after learning has been proven to enhance information retention and strengthen long-term memory.

The spacing effect theory states that learning interspersed with breaks, such as five days, results in better understanding and recall than if done consecutively or too closely together. Meanwhile, the testing effect explains that taking a test after a certain interval strengthens memory through the process of information retrieval (Kang, S.H.K., 2016). Therefore, the selection of a five-day interval in this study aims to measure the optimal effect of the intervention when memory is in the strengthening phase.

Conclusion

Research on the effectiveness of motivational interviewing techniques on changes in the adoption stage of iron (Fe) tablet consumption among pregnant women K1 at the Arjasa Community Health Center concluded that the adoption stage of iron (Fe) tablet consumption before motivational interviewing techniques were applied to pregnant women K1 was at the awareness stage. then a different stage after the motivational interviewing technique was given to pregnant women K1 resulted in mothers beginning to be in the adoption stage. This can lead to the conclusion that the motivational interviewing technique is effective in changing the level of adoption of iron (Fe) tablet consumption among pregnant women K1 at the Arjasa Community Health Center.

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