



The Impact of Husband's Support and Economic Status on the Fulfillment of Pregnant Women's Nutrition in the Air Itam Health Center Work Area

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ABSTRACT

Balanced nutrition is a daily food arrangement that contains nutrients in types and amounts that meet the body's needs by considering the principles of diversity or variety of foods, physical activity, cleanliness, and ideal body weight. Objective: To determine the relationship between the husband's support and economic status on the fulfillment of pregnant women's nutrition in preventing stunting in the Air Itam Health Center work area in 2024. Method: This study uses a quantitative analytical approach with a cross-sectional design and a Chi-square test, with the analysis results in univariate and bivariate analysis. Results of the study: This proves a relationship between husband's support ($p = 0.002$) and economic status ($p = 0.001$) with the fulfillment of nutrition in pregnant women in the Air Itam Health Center work area in 2024. Conclusion: A relationship exists between husband's support and nutrition fulfillment in pregnant women in the Air Itam Health Center work area in 2024. There is a relationship between economic status and nutrition fulfillment in pregnant women in the Air Itam Health Center work area in 2024.

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1. Introduction

Pregnancy is something that occurs between the meeting of sperm cells and the ovum in the (Ovary) or what is called conception until the growth and development of the birth of the fetus. The normal duration of pregnancy is 280 days (40 weeks or 9 months 7 days), calculated from the last menstruation (Damayanti, 2019).

In daily life, pregnant women can follow the 5J Nutrition Model for pregnancy, namely carrying out pregnancy nutrition intake in the form of a package to fulfill pregnant women's nutrition needs, which includes (1) the number of calories, (2) Meal schedule (3) Type of meal (4) Meal route (5) Route of provision of nutrition to maintain implementation. In terms of quantity, pregnant women need a minimum of 35 kcal/kg/day with a meal schedule of 3 large and 3 small meals (Prameswari et al., 2024).

Pregnant women need a healthy and balanced nutritional diet consisting of energy, protein, fat, carbohydrate (KH), vitamin, and mineral intake in adequate quantity and quality for pregnant women themselves or pregnant women (Rahayu & Sagita, 2019). The condition that occurs is that the food

consumption of pregnant women is often not met, especially in Indonesia, and is a determinant of nutritional problems (Bhanbhro et al., 2020).

The Indonesian government has set the Nutritional Adequacy Rate (NAR) of energy for pregnant women by 180 kilocalories per day in the first trimester and 300 kilocalories per day in the second and third trimesters. Adequacy for protein nutrients also needs to be added to pregnant women by 20 grams per day during pregnancy (Kementrian Kesehatan RI, 2023).

Based on the nutritional adequacy rate (AKG) in 2019, the energy needs of pregnant women in the first trimester are 180 Kcal per day, and the protein needs of pregnant women will increase by 68%, folic acid 100%, calcium 50%, and iron 200-300%. During pregnancy, pregnant women normally experience a weight gain of 1012 kg. Therefore, early detection measures are needed during pregnancy to determine the growth and development of the fetus and the health of pregnant women (Kementrian Kesehatan RI, 2020) the growth and development of the fetus and the health of pregnant women (Ministry of Health of the Republic of Indonesia, 202).

Based on the total diet study in 2014. The picture of pregnant women's food intake with an adequate level is also higher in rural areas compared to urban areas, which is 55.7% compared to 49.6%. Lack of energy intake from macronutrients (carbohydrates, proteins, and fats) and micronutrients, especially vitamin A, vitamin D, folic acid, iron, zinc, calcium and iodine and other micronutrients in women of childbearing age that continues (adolescence to pregnancy). Resulting in chronic energy deficiency (CED) during pregnancy, which begins with the occurrence of "risk" CED and is characterized by low energy reserves for a fairly long period as measured by the upper arm circumference (Direktoral Jenderal, 2017).

A mother who experiences malnutrition during pregnancy will cause problems, both for the mother and the fetus she is carrying, including anemia, bleeding, and weight gain, which is not normal; malnutrition can also affect the labor process, which can result in difficult and long labor, premature, bleeding after delivery, malnutrition can also affect fetal growth and can cause miscarriage, abortion, congenital disabilities, and low birth weight (Ariani et al., 2024).

Balanced nutrition is a daily food composition that contains nutrients in types and amounts appropriate to the body's needs. It is achieved by paying attention to the principles of diversity or variety of foods, physical activity, cleanliness, and ideal body weight. Balanced nutrition in Indonesia is visualized as balanced nutrition tumpeng, a term used in Indonesian culture. TGS is designed to help everyone choose food with the right type and amount (infants, toddlers, teenagers, adults, and the elderly) and according to health conditions (pregnancy, breastfeeding, physical activity, sickness). The following are important nutrients that need to be met by pregnant women: 1) folate and folic acid, (2) calcium, (3) vitamin D, (4) protein, and (5) iron.(Kementrian Kesehatan RI, 2014).

Factors causing nutritional problems in mothers during pregnancy other than anemia and KEK are education, age, occupation, and parity. Communities that have not been able to improve nutritional needs and health factors such as health services. Availability of facilities and infrastructure, heredity, and low social conditions affect the mother's diet. Another problem that affects the nutrition of pregnant women that often appears in the first trimester of pregnancy is morning sickness. Morning sickness is the most common nausea in the first trimester; almost 85% of pregnant women experience it in the first three months of pregnancy (Dewi et al., 2021).

Based on the results of the provincial health office, according to the number of pregnant women who checked Lila from 2018 to 2021, and according to district/city consisting of Bangka as many as 6,502, and Belitung as many as 3,334 and West Bangka as many as 4,107, Central Bangka as many as 3,751, South Bangka as many as 3,791, East Bangka as many as 2,272, Pangkal Pinang as many as 4,597.

Based on data from pregnant women in the Air Itam Health Center area from 2021, 2022, and 2023, there were as many as 79 people in 2021, as many as 90 people in 2022, and as many as 140 people in 2023. So, according to the data obtained, there was a significant increase in pregnant women. In the initial survey in the Air Itam Health Center area, 10 mothers did not meet nutritional needs or were malnourished during pregnancy.

The husband's support is a real form of concern and responsibility. The higher the support given by the husband, the higher the desire of the pregnant woman. So, our task is to provide a good explanation so the wife can understand. It will be more beneficial for her, compared to just encouraging the wife to ask questions so that she can understand (Mastuti & Febriyanti, 2022).

Economic status is the position of a person or family in society based on income. Economic status can be seen from income that is adjusted to basic goods. Family economic status is the ability of the economy to meet every living need of all family members (Umar, 2021).

Based on the background explanation, the author is interested in researching "The Impact of Husband's Support and Economic Status on the Fulfillment of Pregnant Women's Nutrition. The hypothesis is that a relationship exists between the husband's support and economic status in fulfilling pregnant women's nutrition.

2. Method

This research design is quantitative research with an analytical descriptive approach and a cross-sectional method. Quantitative research is a type of research that produces findings that can be obtained through statistical procedures or other measurements (Qurniyawati et al., 2023).

A sample is a research object that represents the entire population (Notoadmojo, 2018). In this study, the size was formulated using the Slovin formula. The Slovin formula determines the number of samples to ensure that the research results are representative and can be generalized. Additionally, this calculation does not require a sample size table.

This study focuses on determining the relationship between the variables of husband's support and economic status as independent variables and the fulfillment of pregnant women's nutrition as the dependent variable. The population in this study consisted of 140 pregnant women, who were the focus of the study because they had certain characteristics that had been determined by the researcher. This study was conducted in the Air Itam Health Center Working Area in 2024, with the implementation of the study taking place from 24 to 29 July 2024.

3. Results and Discussion

3.1. Results

Table 1

Distribution of Respondents based on the fulfillment of pregnant women's nutrition		
Fulfillment of pregnant women's nutrition	Frequency	Percentage
Poor	10	14.5
Good	59	85.5
Total	69	100

Table 1 shows that the frequency distribution of respondents showed 69 people with poor nutritional fulfillment, as many as 10 people (14.5%) more than those with good nutritional fulfillment.

Table 2

Distribution of Respondents Based on Husband's Support		
Husband's Support	Frequency	Percentage (%)
Less Supportive	33	52.2
Supportive	36	47.8
Total	69	100

Table 2 shows that of the 69 respondents, 33 people (52.2%) received less than adequate support from their husbands during pregnancy; this number was greater than that of those who received good support.

Table 3
Distribution of Respondents Based on Economic Status of Pregnant Women

Economic Status	Frequency	Percentage (%)
Low	10	14.5
High	59	85.5
Total	69	100

Based on Table 3, 10 people (14.5%) of the 69 respondents had low economic status, which is higher than the number of respondents who had high economic status.

Table 4
Relationship between husband's support and nutrition fulfillment for pregnant women in the Air Itam Health Center area in 2024

Husband's Support	Total Stress Level				Total		p-value	POR (CI 95%)
	light		heavy		N	%		
	n	%	n	%				
Less supportive	9	27,3	24	72,2	33	100	0,001	13,125 (1,559-110,476)
Supportive Mendukung	1	2,8	35	97,2	36	100		
Total	10	31	59	166	69	100		

Based on the analysis of Table 4., 9 pregnant women (27.3%) with less supportive husbands have less nutritional fulfillment, while 35 pregnant women (97.2%) with good husbands have good nutritional fulfillment. The Chi-square statistical test shows a p-value = 0.001, which means there is a significant relationship between husband support and nutritional fulfillment of pregnant women ($p < 0.05$). The results of further analysis show a POR value = 13.125, indicating that pregnant women with husband support tend to be 13.125 times more likely to have good nutritional fulfillment than those who receive less support.

Table 5.
Relationship between economic status and nutritional fulfillment of pregnant women in the Air Itam Health Center area in 2024.

Ekonomi Status	Total Stress Leve				Total		p-value	POR(CI 95%)
	light		heavy		N	%		
	n	%	n	%				
Low	9	90,0	1	10,0	10	100	0,001	0,174 (0,061-0,497)
High	1	1,7	58	98,3	59	100		
Total	10	92	59	109	69	100		

Low economic status (90.0%) experienced inadequate nutritional fulfillment. Meanwhile, 58 out of 10 pregnant women with high economic status (98.3%) had good nutritional fulfillment. The statistical test results with Chi-square showed a p-value = 0.001. Because this p-value is smaller than 0.05, the null hypothesis is rejected. This means a significant relationship exists between pregnant women's economic status and nutritional fulfillment. Further analysis showed a POR (Prevalence Odds Ratio) value of 0.174. This means that pregnant women with high economic status have a tendency to meet good nutrition as many as 0.174 times more often than pregnant women with low economic status.

3.2. Discussion

a. The Relationship between Husband's Support and Fulfillment of Pregnant Women's Nutrition in the Air Itam Health Center Area, Pangkalpinang City.

Nutritional status is a crucial factor during pregnancy that affects the health of pregnant women and the development of the embryo and fetus. Problems of nutritional status in mothers and children, such as malnutrition and obesity, are global issues that have severe consequences for the survival of

mothers and babies. This can lead to increased cases of acute and chronic diseases, developmental disorders, and reduced economic productivity, both at the individual and community levels, due to health problems (Baroroh Barir & Gz, n.d.).

One factor influencing pregnant women's nutritional status is demographic factors, including age, education level, and marital status related to the husband's support. In addition, parity, socioeconomic status, antenatal care (ANC) visits, especially in early pregnancy, and the appropriate frequency of visits also play an essential role. Support from the husband is a critical factor in determining the nutritional status of pregnant women, where the husband can encourage them to consume supplements and nutritious foods that are important for the supply of nutrients to the mother and fetus. Pregnant women can also receive financial, informational, and material support. Families, including husbands, relatives, peers, and health workers, have a role in providing support to pregnant women (Barir, 2020).

Based on the results of statistical analysis using the chi-square test, a p-value of 0 was obtained. The H_0 hypothesis is rejected because this p-value is less than $\alpha 0.05$). Thus, it can be concluded that there is a significant relationship between support and fulfillment of maternal nutrition at the Air Itam Health Center, Pangkalpinang City. Further analysis shows a POR (Prevalence Odds Ratio) value of 13.125. This means that pregnant women who receive support from their husbands tend to have good nutritional fulfillment, as much as 13.125 times higher than pregnant women who do not receive support from their husbands.

This study is in line with a survey conducted by Barir (2020), regarding the analysis of determinant factors of the nutritional status of pregnant women in Mombykids Jombang, which shows a relationship between the fulfillment of pregnant women's nutrition and husband's support, with a p-value of 0.028. In addition, this study is also in line with a survey conducted by (Sari, 2023), regarding husband's support and diet in preventing stunting in pregnant women in Depok City, which found that there was a relationship between husband's support and stunting prevention (fulfillment of pregnant women's nutrition).

b. The Relationship Between Economic Status and Nutritional Fulfillment in Pregnant Women in the Air Itam Health Center, Pangkalpinang City.

Socioeconomic conditions significantly impact maternal and infant pregnancy, as they relate to the fulfillment of various needs during pregnancy, including healthy food, delivery equipment, medicines, health workers, and transportation. This is in line with research conducted by (Sholichah & Rokmah, 2023), which showed that pregnant women from low-income backgrounds often face difficulties in meeting their nutritional needs. Financial constraints can limit healthy food choices needed to support maternal health and fetal development. As a result, this can result in deficiencies in essential nutrients such as protein, iron, and folate, which are necessary for optimal growth. In addition, challenging economic conditions can also affect access to health services, such as prenatal visits and consultations with nutritionists, which are essential to ensure pregnant women receive the support and information needed to maintain their health and that of their unborn babies.

Based on the statistical analysis using the chi-square test, the p-value = 0.001 was obtained. Because the p-value (<0.05) indicates that the null hypothesis (H_0) is rejected, it can be concluded that there is a significant relationship between economic status and the fulfillment of pregnant women's nutrition. Further analysis shows the Prevalence Odds Ratio (POR) value of 0.174, indicating that pregnant women with high economic status have a 0.174 times greater tendency to fulfill good nutrition than pregnant women with low economic status.

This study is in line with a survey conducted by (Titiningsih et al., 2023) regarding the relationship between economic status and the number of antenatal care (ANC) visits to the incidence of chronic energy deficiency (CED) in pregnant women in the Donggo Health Center work area. The results of this study indicate a relationship between family support and CED or malnutrition in pregnant women. In addition, this study is also consistent with a survey conducted by (Apriani, 2022) which discusses the relationship between knowledge and economic status of pregnant women with the incidence of chronic energy deficiency (CED) in the Rimbo Kedui Health Center work area, Seluma Regency. From the results

of this study, it can be concluded that there is a relationship between economic status and the incidence of CED.

4. Conclusion

The Impact of Husband's Support on Fulfilling Pregnant Women's Nutritional Needs A significant relationship exists between economic status and nutritional fulfillment in pregnant women, with a p-value = 0.001. Pregnant women from low economic backgrounds face substantial challenges in meeting their dietary needs, which can result in deficiencies in essential nutrients. This study shows that economic constraints limit access to nutritious food and necessary health services, thereby increasing the risk of complications during pregnancy. Therefore, nutritional assistance programs and health education for pregnant women from low economic backgrounds are essential to improve nutritional quality and reduce health disparities. Husband support plays a crucial role in promoting nutritional fulfillment during pregnancy by fostering a positive and healthy environment, offering practical assistance, providing financial stability, and enhancing emotional well-being. By working together, couples can effectively navigate the challenges of pregnancy, ensuring that both maternal and fetal nutritional needs are met. Overall, the husband's support and financial status are important determinants of nutritional fulfillment in pregnant women. This study emphasizes the need for more attention to the role of the family and economic conditions in improving the health of pregnant women and babies.

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