The relation between jamu (traditional herbs) consumption and food restriction (taboo) against hemoglobin level of preconception woman in Banggai regency, Central Sulawesi Province

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Background: Nutritional status during preconception period is an important determinant of pregnancy outcome. Cultural norms, taboo, and beliefs lie within the contextual factors that could potentially affect nutritional status and health in preconception women.

Methodology: The research was conducted in threesub-districts of Banggai district, namely, Luwuk, North Luwuk, and South Luwuk, from October 2016 to February 2017. This study aims to identify relation between Jamu consumption (traditional herbs) and food restriction (taboo) against hemoglobin (Hb) value in preconception women in Banggai Regency in the year 2016-2017. This study used cross sectional design with saturated sampling technique. The populations in this study were 53 preconceptional women that meet the inclusion and exclusion criteria to judge the several factors that affect the value of Hb. Bivariate analysis using unpaired t test.

Results: The result show that stated hemoglobin levels average is 12.76 g / dL and the mean value 13.0 g / dL with the lowest hemoglobin value of 7.3 g / dL and hemoglobin highest value 15.9 g / dL. The test results of bivariate showed no significant difference in mean hemoglobin values among women whose consume herbs and women who did not (p = 0.751), there was no significant difference in mean hemoglobin values between groups of women with certain food restriction (taboo) and those who do not have restriction on certain foods (p = 0.231), there are no significant differences in mean hemoglobin values among women who do not consume herbs and those who consume herbs (p = 0753).

Conclusion: It is important to be aware of the pharmacological content of the medication particularly when it is systemically administered. Food taboos influence the amount, frequency and quality of nutrients as contributing factor against hemoglobin level and nutritional status of women before pregnancy. Hence, we need integrated and comprehensive approaches, with interventions to improve the overall health of the preconception women in this specific cultural context.

Biography
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