

MATERNAL EDUCATION AND TODDLER ATTENDANCE AT POSYANDU TOWARDS THE INCIDENCE OF STUNTING IN TODDLERS AGED 36-72 MONTHS

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ABSTRAK: PENDIDIKAN IBU DAN KUNJUNGAN BALITA DI POSYANDU TERHADAP KEJADIAN STUNTING PADA BALITA USIA 36-72 BULAN

Latar Belakang: Stunting merupakan masalah global yang mempengaruhi kualitas sumber daya manusia yang akan datang. Upaya pencegahan yang dapat dilakukan yaitu partisipasi ibu yang memiliki balita pada kunjungan Posyandu. Selain itu, pendidikan juga menjadi salah satu faktor penyebab terjadinya stunting.

Tujuan: Tujuan penelitian ini adalah untuk mengetahui pengaruh pendidikan ibu dan kunjungan balita di Posyandu terhadap kejadian stunting.

Metode: Jenis penelitian kuantitatif dengan desain cross-sectional. Teknik sampling yaitu purposive sampling dengan jumlah sampel sebanyak 96 orang. Data pendidikan ibu dan kunjungan balita di Posyandu diukur dengan wawancara, serta status gizi diukur dengan grafik standar WHO sesuai pedoman SDIDTK. Analisis statistik menggunakan uji Chi-Square dan Fisher Exact Test.

Hasil: Hasil penelitian menunjukkan pendidikan dan kunjungan balita di Posyandu signifikan berpengaruh terhadap kejadian stunting dengan masing-masing nilai p-value 0.017 dan 0.044.

Kesimpulan: Pendidikan mempengaruhi kemampuan ibu dalam menentukan pemenuhan gizi untuk anggota keluarga. Kunjungan Posyandu memberikan manfaat dalam pemantauan pertumbuhan anak.

Saran: Kunjungan balita di Posyandu berhubungan dengan kejadian stunting sehingga petugas kesehatan diharapkan melakukan sosialisasi kepada masyarakat tentang pentingnya kegiatan Posyandu.

Kata kunci : kunjungan, pendidikan, posyandu, stunting

ABSTRACT

Background: Stunting is a global problem that affects the quality of future human resources. Mothers with toddlers can participate in Posyandu visits as a preventive measure. In addition, education is also a factor causing stunting.

Purpose: The purpose of this study was to determine the effect of maternal education and toddler attendance at Posyandu on the incidence of stunting.

Methods: This type of research is quantitative with a cross-sectional design. The sampling technique is purposive sampling with a sample size of 96 people. Data on maternal education and toddler visits to Posyandu were measured by interviews, and nutritional status was measured using WHO standard graphs according to SDIDTK guidelines. Statistical analysis used the Chi-Square test and Fisher exact test.

Results: The results of the study showed that maternal education and toddler visits to Posyandu significantly influenced the incidence of stunting with p-values of 0.017 and 0.044

Conclusion: Education affects the mother's ability to determine the fulfillment of nutrition for family members. Toddler attendance at Posyandu provide benefits in monitoring child growth.

Suggestion: Toddler visits to Posyandu are related to the incidence of stunting, so health workers are expected to socialize the community about the importance of Posyandu

Keywords: attendance, education, posyandu, stunting

INTRODUCTION

Stunting is a failure to grow in toddlers due to long-term malnutrition during the First 1,000 Days of Life (HPK). The condition of failure to grow in toddlers is due to a lack of nutritional intake for a long time

and repeated infections, and both of these causative factors are influenced by inadequate parenting patterns, especially in the 1,000 HPK. Children are classified as stunted if their length or height

according to their age is lower than the applicable national standard (BPS, 2023).

The Ministry of Health's Indonesian Nutritional Status Study Report shows that the prevalence of stunting in Indonesia has decreased from 27.7% in 2019, 24.4% in 2021, to 21.6% in 2022. However, this figure is still not in accordance with the WHO standard which targets less than 20% (SSGI, 2023).

Toddlers who experience stunting will have less than optimal intelligence levels, making children more susceptible to disease and in the future can be at risk of decreasing productivity levels. In the end, stunting will be able to inhibit economic growth, increase poverty and widen inequality (Tim Nasional Percepatan Penanggulangan Kemiskinan, 2017).

Toddlers are the age group most vulnerable to nutritional problems and diseases. Malnutrition in infants and toddlers can inhibit physical, mental, and spiritual growth and development, thus impacting the declining quality of the workforce. Nutritional status is an important health indicator for infants and toddlers, as children under the age of 5 are at risk of developing this disease (Wahyuningsih et al., 2022).

Stunting can be one of the risks of stunted child development, and Stunting that occurs in children aged <2 years results in worse cognitive and educational outcomes in childhood and adolescence. Childhood stunting has immediate and long-term impacts, including increased morbidity, mortality, and adverse impacts on child development and adult health that affect the cycle of malnutrition, and hinder economic development (Balitbangkes RI, 2018; Rohani & Wahyuni, 2020).

Efforts to prevent stunting are carried out by fulfilling nutritional needs during the 1000 HPK period, consuming adequate protein, maintaining cleanliness, fulfilling clean water needs and regularly going to Posyandu (BPS, 2023). Posyandu is a forum for community participation tasked with assisting village heads/sub-district heads in the field of health services and other areas as needed (Kemenkes, 2023). The activities carried out at the Posyandu for infants and pre-school children include Mother and Toddler Classes, growth and development monitoring, complete routine immunization, provision of Vitamin A and deworming medication, early detection and assistance for infants and toddlers who experience nutritional problems and screening for TB cases (Kemenkes, 2023). Posyandu is used as a forum for community empowerment in the transfer of information and skills from officers to the community and between communities (Kemenkes RI, 2011).

Apart from Posyandu, there are other factors that influence the occurrence of stunting, such as parental education (Wahida & Bawon, 2019). Stunting is closely related to maternal and paternal education. According to Riskesdas (2013), the incidence of stunting is largely influenced by low parental income and education, especially the mother. Education is an activity that a person does to develop their abilities, attitudes and forms of behavior, both for current life and also as preparation for life in the future (Notoatmodjo, 2003). One of the indicators of education level is the level of education which consists of primary education, secondary education and higher education (Kemendikbud, 2003). The purpose of this study was to determine the effect of maternal education and toddler visits to Posyandu on the incidence of stunting.

RESEARCH METHODS

The research method used is a quantitative method with a cross-sectional design. The study was conducted in the working area of the Health Center in Kendal Regency. The research sample was 96 toddlers aged 36 to 60 months. The sample selection used purposive sampling. The inclusion criteria were toddlers aged 36 months - 60 months and parents of participants agreed to be interviewed. Conversely, parents who were not willing to be interviewed and could not read or write were excluded from the study.

Data collection on maternal education and participation in Posyandu activities was conducted through direct measurement with interviews, and nutritional status was measured using WHO standard graphs according to SDIDTK guidelines. Statistical analysis using SPSS 23 with Chi-Square and Fisher Exact Tests.

RESEARCH RESULTS AND DISCUSSION

Education is classified into primary education, secondary education and higher education. In the study, most respondents had higher education, as many as 71 people (74%). The presence of toddlers at the Posyandu was classified into 3 categories, namely routine, sometimes and never coming to the Posyandu. The presence at the Posyandu was mostly toddlers attending the Posyandu routinely, as many as 55 children (57.3%). The nutritional status used was based on a graph of height per age. The data categories were normal and stunting. The nutritional status of toddlers was mostly normal, as many as 71 people (74%).

Table 1

Frequency Distribution of Variables of Maternal Education, Attendance at Posyandu and Nutritional Status

Variabel	n	%
Maternal Education		
Primary and Secondary	25	26.0
Higher	71	74.0
Kehadiran di Posyandu		
Attend	55	57.3
Not Attending	23	24.0
Occasionally	18	18.8
Status Gizi		
Normal	71	74.0
Stunting	25	26.0

Table 2
Analysis of Data on Maternal Education and Attendance at Posyandu on Nutritional Status

Variabel	Nutritional Status		Total	p-value
	Normal	Stunting		
Maternal Education				
Primary and Secondary	14	11	25	0.017
Higher	57	14	71	
Posyandu				
Attend	46	9	55	0.044
Not attending	14	9	23	
Occasionally	11	7	18	

The results of the statistical analysis of maternal education on children's nutritional status showed a p-value of 0.017 and toddler visits to Posyandu on children's nutritional status showed a p-value of 0.044 (Table 2).

According to UU No. 20 of 2003 concerning the National Education System, formal education consist of primary, secondary and higher education. (Kemendikbud, 2003). Based on the results of the study, it was shown that 25 mothers (26%) had secondary education and 71 mothers (74%) had higher education. Education has an important role in a better perception of something. The level of education influences changes in attitudes and positive behavior, thereby increasing awareness of the benefits of health care, especially providing nutrition to babies. (Komalasari et al., 2020). Maternal education can influence the level of understanding of child care, starting from care and providing healthy and nutritious food (Kusumaningati et al., 2018).

The description of the nutritional status of toddlers based on maternal education shows that in mothers with secondary education there are 11 children who experience stunting and 14 children with normal nutritional status. In mothers with higher education, there are 14 children who experience

stunting and 57 children with normal nutritional status. The study showed that maternal education affects the occurrence of stunting in toddlers ($p = 0.017$). Mothers with basic education have a 5.1 times greater risk of having stunted children (Puspasari, 2021). Education has an influence on health, one of which is nutritional status. Individuals with a high level of education are more likely to know a healthy lifestyle (Setiawan et al., 2018). Arida et al (2015) stated that mothers have a role in determining food consumption in the family. Serving food in the family is the mother's main task. If the mother has a higher education, the better the mother's ability to determine the fulfillment of nutrition for family members.

Research conducted by Wright et al (2018) shows that education affects the incidence of stunting. This is because the education of parents supports the economic status of the family. Good economic status has an impact on the ability to provide nutritious food. Families with a high level of education will more easily receive health information, especially related to nutritional fulfillment, thereby increasing knowledge and implementing it in fulfilling family nutrition and not being easily influenced by information that is unclear (Komalasari et al., 2020; Ni'mah & Muniroh, 2016).

The results of the study showed that there was an influence of the presence of mothers at Posyandu on the incidence of stunting ($p = 0.044$). Posyandu is a form of Community-Based Health Efforts which is managed and organized from, by, for and with the community in organizing health development, in order to empower the community and provide convenience to the community in obtaining basic health services, especially to accelerate the reduction in maternal and infant mortality rates (Kemenkes RI, 2011, 2012). Posyandu is a Village/Sub-district Community Institution which is a forum for community participation tasked with assisting the village/sub-district head in the field of health services and other areas as needed (Kemenkes, 2023). Programs that exist in several integrated health posts such as M-Posyandu, Exclusive Breastfeeding, Balanced Nutrition, and the Gerakan Sayang Ibu (GIS). This program has a significant impact on reducing stunting. Another nutrition program is 1000 HPK or can be called the First 1000 Days of Life Movement or also known as the golden period. The golden period is the period that occurs when conception occurs until the child is 2 years old. In this movement, there is a movement called specific nutrition intervention. This program targets pregnant mothers, breastfeeding mothers, and children ranging from infants or ages around 0 to 23 months or around 2 years old (Muthia et al., 2020).

Posyandu programs are in accordance with Presidential Decree Number 42 of 2013 concerning the National Movement for Accelerating Nutrition as explained in the Indonesian Ministry of Health (2013) with a focus on the first 1000 days of life, namely: (1) pregnant women receive at least 90 Iron Supplement Tablets (TTD) during pregnancy; (2) Provision of Additional Food (PMT) for pregnant women; (3) fulfillment of nutrition; (4) delivery with an expert doctor or midwife; (5) provision of Early Initiation of Breastfeeding (IMD); (6) Provision of exclusive Breast Milk (ASI) to infants up to 6 months of age; (7) provision of Complementary Food (MP-ASI) for infants over 6 months to 2 years; (8) provision of complete basic immunization and vitamin A; (9) monitoring the growth of toddlers at the nearest posyandu; (10) implementation of Clean and Healthy Living Behavior (PHBS) (Wardah & Reynaldi, 2022).

Routine activities carried out during Posyandu are monitoring growth by weighing, measuring length/height, measuring head circumference, arm circumference so that it is possible to detect early if there is a growth disorder in the child and can be referred to the Health Center (Kemenkes, 2023; Kemenkes RI, 2012). Posyandu activities in the form

of monitoring the growth and development of infants and toddlers carried out once a month can detect growth problems, especially stunting and nutritional problems as well as development problems (Hindratni Findy et al., 2021).

The strategies carried out by Posyandu in handling stunting include providing maximum service to participants such as providing friendly service, counseling, reminding mothers of toddlers to always routinely participate in the integrated health post program, reminding mothers of toddlers to provide exclusive breastfeeding, and also appealing to mothers of toddlers and pregnant women to pay attention to the food they consume so that the food they consume is food that has good nutrition and is not harmful to pregnant women, babies, and toddlers. Another strategy carried out is to visit the homes of integrated health post participants if they do not attend integrated health post activities due to conditions such as illness, and no access to transportation (Wardah & Reynaldi, 2022).

Efforts to improve community nutrition as stated in UU No. 36 of 2009 concerning Health, aim to improve the quality of individual and community nutrition, including through improving food consumption patterns, improving nutrition-conscious behavior, improving access to and the quality of nutrition and health services in accordance with advances in science and technology. (Kemenkes RI, 2019). The activeness of mothers to the integrated health post has a very large influence on monitoring nutritional status. Monitoring the growth of toddlers at the integrated health post is an effort to detect early growth disorders so that prevention of stunting in toddlers can be carried out (Al Rahmad et al., 2020).

Growth monitoring is carried out on children aged 0 (zero) to 72 (seventy-two) months by weighing their weight every month and measuring their height every 3 (three) months as well as measuring their head circumference according to schedule. (Kemenkes RI, 2014). Growth monitoring must be done periodically, because if it is not monitored properly it will cause physical and psychosocial problems. Early signs of nutritional and health problems are caused by disturbed growth (Kemenkes RI, 2020).

Research conducted by Darmawan et al. (2022) showed that the lack of toddler visits to Posyandu increases the incidence of stunting. The frequency of toddler visits to Posyandu is related to the incidence of stunting so that health workers need to conduct outreach to the community about the importance of Posyandu activities. This outreach is expected to increase mothers' knowledge regarding

child health, so that it can increase the frequency of toddler visits to Posyandu.

Toddlers with a low frequency of coming to Posyandu have a 0.071 times risk of experiencing stunting. The frequency of regular attendance at Posyandu greatly influences monitoring of nutritional status, and mothers of toddlers who come to Posyandu will obtain the latest information on health and nutrition that is useful for a healthy lifestyle. Toddlers who never attend Posyandu will find it difficult to monitor their growth and development (Tsaratifah, 2020).

Posyandu has a strategic position to assess the magnitude of the stunting problem in the community, including conducting early detection of the main determining factors for stunting, such as maternal and child nutritional intake, parenting patterns, hygiene and sanitation, and many more (Rahmawati et al., 2019).

CONCLUSION

Research conducted in the Kendal Health Center work area shows that maternal education and visits to the Integrated Health Post have a significant influence on the incidence of stunting.

SUGGESTION

Education affects the mother's ability to determine the fulfillment of nutrition for family members. Posyandu visits provide benefits in monitoring child growth. If there are deviations such as stunting, referrals to the Health Center are immediately made for further treatment.

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