THE EFFECT OF HEALTH EDUCATION WITH VIDEO MEDIA ON MOTHER'S KNOWLEDGE ABOUT COMPLEMENTARY FOODS

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ABSTRACT

Weaning foods are additional food given to babies after the age of six months to 24 months old. The proportion of consumption of various weaning foods in children aged 6-23 months only reached 46.6% and in Srimulyo Village 4 mothers (80%) did not know the stages of giving weaning foods. Health education is an effort to increase mothers’ knowledge about weaning foods. The objective of this research is to determine the effect of health education using videos on mothers’ knowledge about weaning foods in Srimulyo Village in the work area of Bandar Negeri Suoh Public Health Center in 2023. This study was quantitative research using a pre-experimental method with the one-group pretest and posttest design. The population in this study were 30 mothers who had babies aged 0-6 months in Srimulyo Village in the work area of Bandar Negeri Suoh Public Health Center. The sample in this study was 30 people. A total sampling technique was used in this study. Then, the data were analyzed using the Wilcoxon test. The results of this study indicated that the mean score of mothers' knowledge about weaning foods before being given health education using videos was 68.03 and after being given health education increased to 89.9. Then, the results of the Wilcoxon test obtained a p-value of 0.000 <0.05, meaning that there was an effect of health education using videos on mothers’ knowledge about weaning foods in Srimulyo Village in the work area of Bandar Negeri Suoh Public Health Center in 2023.

Keywords: Weaning Foods, Health Education, Knowledge

INTRODUCTION

The success of Health Development can be seen from the indicators used for a nation's health status, namely Mortality (death), Nutritional Status and Morbidity (illness). Data from the World Health Organization (WHO) Globally, in 2020, it is estimated that there will be 45 million under-fives and 38.9 million under-fives who are overweight or obese. Based on this, around 45% of deaths in children under the age of 5 are caused by malnutrition (WHO, 2021). The prevalence of malnutrition in children under five (0-23 months) in Indonesia in 2021 is 3.9% and in toddlers (0-59 months) it reaches 4%. Whereas in Lampung Province there are 2.7% of toddlers who experience malnutrition (Ministry of Health RI, 2022). In addition, the incidence of
malnutrition in West Lampung Regency in 2021 is 16.1% (Lampung Provincial Health Office, 2022). Meanwhile, the incidence of malnutrition at the Bandar Negeri Suoh Health Center was 6.03% (Bandar Negeri Suoh Health Center, 2022).

Some of the factors that influence the occurrence of malnutrition in toddlers include the poor practice of feeding infants and children. The 2018 Riskesdas data shows that the proportion of consumption of various foods in children 6-23 months in MP ASI only reaches 46.6%. Meanwhile, the proportion of early initiation of breastfeeding (IMD) in newborns is still low (58.2%) (Ministry of Health RI, 2019). Feeding infants and children has a very important influence on the survival of children (UNICEF, 2020).

According to recommendations from the World Health Organization (WHO) / United Nations International Children's Emergency Fund (UNICEF) in the Global Strategy on infant and child Feeding, the best pattern of feeding for infants and children from birth to 24 months of age is as follows: breastfeeding immediately within the first hour after the baby is born (Early Breastfeeding Initiation), exclusive breastfeeding from birth until the baby is 6 months old, starting to provide good and correct complementary food for ASI (MP ASI) since the baby is 6 months old; and continue to breastfeed until the child is 24 months or older (Ministry of Health RI, 2019).

MP ASI is additional food given to babies after the age of six months until the baby is 24 months old. Giving food after the baby is six months old will provide great protection from various diseases (Sitiasari, 2014). The First Thousand Days of Life (1000 HPK) is a critical moment that determines the quality of Human Resources (HR) and the future of a nation (RI Ministry of Health, 2019). 1000 HPK starts from the formation of the fetus during pregnancy (270 days) until the child is 2 years old (730 days) (Isnaini et al, 2022).

The negative impact that can be caused by nutritional problems in the 1000 HPK period, in the short term, causes disruption in brain development, intelligence, physical growth disorders, and disturbances in body metabolism. Meanwhile, in the long term, the negative consequences that can be caused are decreased cognitive ability and learning achievement, decreased immunity so that you get sick easily, and a high risk of developing diabetes, obesity, heart and blood vessel disease, cancer, stroke, and disability in old age. As well as uncompetitive work which results in low economic productivity (RI Ministry of Health, 2019).

Giving MP ASI under the age of six months in Indonesia is still high (RI Ministry of Health, 2022). According to research Andriyani (2018) said that the lack of knowledge of mothers about MP-ASI is due to the fact that the majority of respondents do not know in depth about MP-ASI. The mother knows when to give the MP-ASI but the mother still gives the MP-ASI on the grounds that the baby is not full if given only breast milk. The knowledge of the respondents is low, this is because most of the respondents do not get important information about MP-ASI.

Efforts that can be made to prevent and overcome the occurrence of various nutritional disorders require supporting behavior from parents, especially the behavior of mothers in providing complementary food to their babies. Changes in good behavior can be
influenced by the mother's high level of knowledge in giving the correct complementary breastfeeding according to the baby's age. The level of knowledge can be influenced by the provision of health education about MP ASI (Ministry of Health, RI, 2012).

Many factors are related to mother's knowledge about MP-ASI. These factors include age, education, attitude, experience, mother's occupation, information (advertising complementary breastfeeding, health workers, family and others) culture, environment and socio-economic. Mother's knowledge that is still lacking about the benefits of exclusive breastfeeding is very closely related to the behavior of giving complementary foods (Perkasa, 2019).

Health education is an effort to empower individuals, groups and communities to maintain, improve and protect health through increasing knowledge, awareness and ability to do something. So that by giving this counseling can change the mother's behavior for the better. This is because the mother's knowledge has increased after being given counseling (Notoatmodjo, 2012).

One of the media that is often used for health education is video media. Video is an electronic media capable of combining audio and visual technologies together to produce a dynamic and interesting presentation. Video media has a function as a learning medium, namely the function of attention, affective function, cognitive function and compensatory function. The function of attention is that video media can attract attention and direct the audience's concentration on video material. The affective function is that video media is able to arouse the emotions and attitudes of the audience. Cognitive function can accelerate the achievement of learning objectives to understand and remember messages or information contained in pictures or symbols.

According to Lestari's research (2021), health education using video media is more effective than e-booklet media. This is in line with Winda's research results on the effectiveness of using leaflets, videos and pocket books to increase knowledge of giving MP-ASI which states that the most effective media for increasing knowledge is video media (Ismawati & Kristien Andriani, 2018).

Based on the results of a pre-survey conducted on 5 mothers under five, it was found that the lack of knowledge of mothers in giving MP ASI was proven by the researchers conducting interviews with 5 mothers who had babies aged 0-6 months, there were 4 (80%) mothers who did not know the stages of giving MP-ASI. These five mothers only know what MP-ASI is, but they don't yet know how to provide good MP-ASI, such as the texture stages of giving MP-ASI, a good menu for making MP-ASI, and the portion of giving MP-ASI.

LITERATURE REVIEW

Complementary foods (MP-ASI) are foods or drinks other than breastmilk given to infants over 6 months of age. According to the Balanced Nutrition Guidelines (2014), MP-ASI is provided to meet the increasing nutritional needs of infants as they grow and develop, as breastmilk production is no longer sufficient. The provision of MP-ASI aims to train the baby's ability to receive solid food, train chewing ability, and introduce varied food textures and flavors. Types of MP-ASI can include rice, vegetables, meat,
fruits, milk, and other nutritious foods which are mashed smooth or steamed until soft and easy for the baby to swallow (Agency for Health Research and Development, 2014).

Scientifically, the provision of MP-ASI at 6 months of age is supported by several studies. One study found that an infant's digestive system at 6 months is ready to receive solid food (Cfewson et al., 2013). Another study also showed that delaying MP-ASI until 6 months of age can reduce the risk of allergies and obesity in infants (Pearce et al., 2013). Therefore, based on this scientific evidence, it is recommended to start giving MP-ASI at 6 months of age, paying attention to the types of food, texture, and frequency to suit the baby's capabilities.

RESEARCH METHODOLOGY

This type of research is quantitative using the pre-experimental method with the one group pretest and posttest design. The population in this study were all mothers who had babies aged 0-6 months in Srimulyo Village, the working area of the Bandar Negeri Suoh Public Health Center, totaling 30 and a sample of 30 people. The sample technique in this study uses total sampling. The intervention in this study was MP ASI health education using video media. Data analysis in this study used Wilcoxon.

RESEARCH RESULT

Table 1
The average knowledge of mothers about MP ASI before being given health education with video media

<table>
<thead>
<tr>
<th>Knowledge of MP ASI</th>
<th>n</th>
<th>Means</th>
<th>Standard Deviation</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before being given health education with video media</td>
<td>30</td>
<td>68.03</td>
<td>16,769</td>
<td>33-93</td>
</tr>
</tbody>
</table>

Based on the table above it is known that the average knowledge of mothers about MP ASI before being given health education with video media is 68.03 with a standard deviation of 16.769, a minimum score of 33 and a maximum of 93.

Table 2
The average knowledge of mothers about MP ASI after being given health education with video media

<table>
<thead>
<tr>
<th>Knowledge of MP ASI</th>
<th>n</th>
<th>Means</th>
<th>Standard Deviation</th>
<th>Min-Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>After being given health education with video media</td>
<td>30</td>
<td>89.90</td>
<td>7,730</td>
<td>73-100</td>
</tr>
</tbody>
</table>

Based on the table above it is known that the average knowledge of mothers about MP ASI after being given health education with video media is 89.90 with a standard deviation of 7.730, a minimum score of 73 and a maximum of 100.
Table 3
Effect of health education using video media on mother's knowledge about MP ASI

<table>
<thead>
<tr>
<th>Knowledge of MP ASI</th>
<th>n</th>
<th>Means</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before being given health education using video media</td>
<td>30</td>
<td>68.03</td>
<td>0.000</td>
</tr>
<tr>
<td>after being given health education using video media</td>
<td>30</td>
<td>89.90</td>
<td></td>
</tr>
</tbody>
</table>

Based on the table above it is known that the average knowledge about complementary breastfeeding before being given health education using video media was 68.03 and after being given health education using video media was 89.9. The Wilcoxon test results obtained a p value of 0.000 <0.05, meaning that there was an effect of health education with video media on mothers' knowledge about MP ASI in Srimulyo Village, Work Area of the Bandar Negeri Suoh Health Center in 2023.

DISCUSSION
The average knowledge of mothers about MP ASI before being given health education with video media

The results of this study indicate that the average knowledge of mothers about MP ASI before being given health education using video media is 68.03 with a standard deviation of 16.769, a minimum score of 33 and a maximum of 93.

Knowledge is the result of knowing that occurs after people sense a certain object through the human senses, namely the senses of sight, hearing, smell, taste and touch. Most knowledge is obtained through the eyes and ears (Wawan and Dewi, 2019). While health education is a combination of various activities based on learning principles to achieve a state where individuals, families, groups or communities know what to do and what to do to achieve a healthy life (Notoatmodjo, 2012).

Complementary food for ASI is the second baby food that accompanies breastfeeding. Complementary food for ASI is given to babies who are 6 months old or more because breast milk no longer fulfills the baby's nutrition. The reason for giving MP-ASI at 6 months is because generally babies are ready for solid food at this age (Chomaria, 2013).

This research is in line with research conducted by Nengsih et al (2020) which showed that prior to counseling interventions regarding complementary feeding, the average respondent's knowledge was poor with a mean of 63.65 (st. Deviation: 21.4).

According to the researchers' assumptions, the number of mothers who have poor knowledge about MP ASI is due to the lack of information obtained by mothers. This is because mothers have never received health education about MP ASI. In addition, education (80%) of respondents with high school education and mother's occupation (86.7%) did not work can also affect mother's knowledge. This is because the higher the mother's education, the more information the mother will receive. Likewise with work, mothers who work in a positive work environment will gain experience regarding good health and mothers who do not work will

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also have a lot of time to accompany and take care of children's health both from children's health and children's diet.

The average knowledge of mothers about MP ASI after being given health education with video media

The results of this study indicate that the average knowledge of mothers about MP ASI after being given health education using video media is 89.90 with a standard deviation of 7.730, a minimum score of 73 and a maximum of 100.

MP ASI is very important for mothers who have babies to know. When you don't know what MP ASI is and how to do MP ASI correctly, it can result in mistakes that can ultimately be fatal to the baby's health. According to Wawan and Dewi (2019) that the level of knowledge consists of several levels including knowing, which is interpreted as remembering a material that has been studied before.

Knowledge can be influenced by mother’s age, mother’s education, and mother’s occupation. Judging from the results of this study, most of the mothers aged > 20 years. In accordance with Huclok’s theory cited by Wawan (2019) the more mature, the level of maturity and strength of a person will be more mature in thinking and working. Meanwhile, in terms of mother’s education, the majority (80%) of the respondents in this study had a senior high school education. According to Notoadmojo quoted by Wawan (2019) the level of education also determines whether or not it is easy for a person to absorb and understand the knowledge they acquire, in general the higher a person’s education, the better his knowledge will be. In addition, in this study, most of the respondents (86.7%) did not work. The work environment can make a person gain experience and knowledge either directly or indirectly. Work is closely related to factors of social and cultural interaction, while social and cultural interaction is closely related to the process of exchanging information (Wawan, 2019).

This research was able to provide changes in the knowledge of mothers who were given counseling related to the form, type and amount of complementary foods for ASI and how to give them properly to children 6-24 months. The information provided in counseling can increase the mother's knowledge about complementary foods for children aged 6-24 months. The more often the mother gets health information, especially about nutrition, the better the mother's knowledge about giving complementary food to her child. Efforts to increase nutritional knowledge through nutrition counseling are the right steps to be taken by health workers and supported by concerned parties, meaning that the better the mother's knowledge about complementary foods, the child's growth will also improve (Gibney in Ade, 2020).

This research is in line with research conducted by Ade (2020) which shows that mother's knowledge before and after counseling is known to be more than half of the respondents before counseling has a level of knowledge that is less than 85.3%. After counseling it was reduced to 17.6%. In this study there was a decrease in the level of lack of knowledge of 67.7%.

According to the researcher's assumption, the more information the mother gets and the more knowledge she has about complementary feeding, the better the mother's behavior in providing complementary feeding given by the
mother to the child. Health education is effective for sharing important information about health such as the pattern of giving MP-ASI to mothers. So that mothers who don't know how to process MP-ASI for their children can start learning and giving MP-ASI according to the correct age level so that giving MP-ASI to babies is in accordance with the appropriate guidelines.

Effect of health education using video media on mother’s knowledge about MP-ASI

The results of this study indicate that the average knowledge about MP-ASI before being given health education using video media is 68.03 and after being given health education using video media is 89.9. The Wilcoxon test results obtained a p value of 0.000 <0.05, meaning that there was an effect of health education with video media on mothers' knowledge about MP-ASI in Srimulyo Village, Work Area of the Bandar Negeri Suoh Health Center in 2023.

Mother's knowledge has a very important role in improving the nutritional status of children (Gichana, 2013). Likewise in this study, which succeeded in identifying an increase in knowledge before and after education was carried out. This study also proves that structured education will significantly increase mother's knowledge, as seen by an increase in mother's knowledge score. Knowledge is the result of knowing that occurs through sensory processes, especially the eyes and ears of certain objects (Bakhtiar, 2016).

Health education about MP-ASI is a sensory stimulation effort that can increase mother’s knowledge. It is hoped that with increased knowledge of the mother, it can change the behavior of the mother in giving MP-ASI. Knowledge is a very important domain for the formation of overt behavior (Bakhtiar, 2016).

The success of health education is also influenced by the media used. Video is one of the effective media used in health education. Absorption of information is more effective by using the senses of sight and hearing, namely in the form of video, compared to using only the sense of sight, such as leaflets, booklets and other printed media. The increase in respondents’ knowledge reflects an increase in knowledge influenced by the existence of media assistance which makes it easier for respondents to remember the material provided. The existence of information with the motion model can increase the desire of respondents to pay attention to any information presented in the video. The information contained in the video is then clarified by the researcher's explanation as the lecturer.

The research findings of Safitri, N., (2022) state that the use of video is very helpful for people with limited health literacy in language, because even though they do not understand language, they can pay attention to the demonstrations shown and the use of video media in mothers is very helpful to improve mother’s knowledge.

This research is in line with the results of research conducted by Aprilia (2019) which showed that the average knowledge before intervention was 13.43. in the second measurement obtained an average of 14.7. It can be seen that the difference in the mean before and after the intervention is 1.27. The results of the statistical test P value 0.03 (<0.05) it can be concluded that there is a significant difference between the knowledge scores before and after the intervention.
It is supported by Marjan's research (2019) which shows that there are differences in pretest and posttest values after counseling for pregnant women and mothers with children aged 6-24 months in Sukmajaya, Depok, with higher post-test scores. Based on the results of data processing and analysis, 66.66% of respondents experienced an increase in knowledge for the better, but it was still less than the target of 70%.

According to the researcher's assumptions, even though health education activities using video media are significant in increasing mothers' knowledge about MP-ASI, it is hoped that with the provision of inherent knowledge possessed by mothers under five, it can have implications for changes in attitudes and practices in providing good and correct MP-ASI. By providing health education, mothers can find out the level of food composition that may be given to children according to their age. Proper complementary feeding for toddlers can improve the health status and physical and cognitive quality of toddlers. So that it can reduce the incidence of complementary feeding before the age of 6 months to prevent complications in children.

In this study there were several respondents who only experienced a slight increase. This is because when implementing health education there are obstacles such as fussy children so they don't focus on following the health education given. In addition, because this is the first time the mother has been given health education, the understanding gained is not optimal. Therefore it is suggested that health workers, especially midwives, can provide counseling about MP-ASI from the beginning of pregnancy.

CONCLUSION
1. The average knowledge of mothers about MP ASI before being given health education with video media in Srimulyo Village, the Working Area of the Bandar Negeri Suoh Community Health Center in 2023 is 68.03.
2. The average knowledge of mothers about MP ASI after being given health education with video media in Srimulyo Village, the Working Area of the Bandar Negeri Suoh Community Health Center in 2023 is 89.9.
3. There is an effect of health education using video media on mothers' knowledge about complementary breastfeeding in Srimulyo Village, the Working Area of the Bandar Negeri Suoh Health Center in 2023 with a p value of 0.000.

Suggestion
Health workers, especially midwives, can work together with nutritionists to provide regular counseling to mothers about MP-ASI since pregnancy using video media, so that mothers who have babies can provide MP-ASI according to the child's developmental stages.

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