http://ejournal.seaninstitute.or.id/index.php/healt
Jurnal eduhealth, Volume 14, No 02, 2023
E-ISSN. 2808-4608

The Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022

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ARTICLE INFO

Keywords:
Education,
Stunting,
Knowledge

ABSTRACT

Stunting or often called stunting or shortness based on Umar (2017) said that the condition of failure to thrive in children under five years old (toddlers) is due to chronic malnutrition and repeated infections, especially in the first 1,000 Days of Life (HPK) period. This study aims to determine the effect of education on stunting prevention on the knowledge of pregnant women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022. The research method used The type of research used was quasi-experimental research. The research location was conducted at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency. The time of the study was July-October 2022. The sample in this study were all pregnant women who came to the Sei Dadap Health Center, Sei Dadap District, Asahan Regency, totaling 30 respondents. The sample used was purposive sampling. The research instrument is a questionnaire that has been tested for validity and reliability. The results showed that 30 respondents had statistical test results using the paired t test where the average knowledge score in the pre-test with no treatment was 11.40, whereas after the knowledge treatment with Education about Stunting Prevention had an average knowledge score in post test is 12.97, meaning that it can be concluded that knowledge with education about stunting prevention after treatment can increase respondents' knowledge about stunting. The conclusion that can be obtained is that knowledge with education about after treatment can increase respondents' knowledge about stunting prevention at the Sei Dadap Health Center in 2022. It is suggested that this research will add information in the development of science, especially in midwifery in studying the importance of stunting prevention..

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1. INTRODUCTION

Stunting or often called stunting or shortness based on Umar (2017) said that the condition of failure to thrive in children under five years old (toddlers) is due to chronic malnutrition and repeated infections, especially in the first 1,000 Days of Life (HPK) period, i.e. from fetus to child[1]. 23 months old. Identification of stunting is done by comparing the child's height with the standard height of children in the normal population according to the same age and sex. Children are classified as stunted if their height does not match the age and development of the child.

Data from the Indonesian Ministry of Health (2018) stated that Indonesia is the 5th country with the highest number of toddlers experiencing stunting. India is the 1st country with a stunting prevalence of 48%, the 2nd country is China with a stunting prevalence of 15%, the 3rd country is Nigeria with a stunting prevalence of 41%, the 4th country is Pakistan with a stunting prevalence of 42%. %, the 6th country is Bangladesh with a stunting prevalence of 43% while the 7th country is Ethiopia with a stunting prevalence of 51%[2].

According to (Ministry of Health, 2018) stunting can occur starting from the pre-conception period, namely in young women who experience anemia and malnutrition exacerbated by inadequate nutritional intake during pregnancy, maternal health and maternal nutrition before and during

pregnancy, childbirth affects the mother's body posture (short), spacing of pregnancies that are too close, the mother is still a teenager, lack of nutritional intake during working pregnancies[3]. Therefore education for pregnant women is very important in efforts to increase knowledge which in turn can increase positive attitudes and behavior in pregnant women to make various efforts to prevent stunting during the golden period or the first 1000 days of life. Based on a literature review conducted by [4] there are various predictors of stunting in children under five in Indonesia, including a lack of maternal knowledge and the findings also show that it is necessary to develop integrated health promotion prevention and interventions to reduce stunting.

This is in line with the results of research (Nurarif & Kusuma, 2015) that the high incidence of stunting has not been matched by the knowledge, attitudes and behavior of pregnant women, support and posyandu cadres in making efforts to prevent stunting as early as possible or within the first 1000 days of life [5]. This goal is to increase the knowledge of pregnant women and posyandu cadres in preventing stunting through education.

Based on the initial survey by conducting in-person interviews on August 15 2022 at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency with 5 pregnant women who came to visit the health center, where 4 of them were in the category of not understanding stunting prevention because the mother said short children were not because of stunting but because of heredity, so the mother said her child was not stunted but heredity from an average short, and 1 of them understood stunting prevention for children. From this it is necessary to conduct research on pregnant women and in order to find out whether pregnant women understand the importance of preventing stunting because pregnant women should understand how to prevent stunting properly which is very important, especially in providing nutrition to their children.

2. METHOD

The type of research used was quasi-experimental research with the research design used being one group pre test-post test design. The population in this study were all pregnant women and those who were stunted and not stunted at the Sei Dadap Health Center, Sei Dadap District Asahan District from July - October 2022 as many as 30 people. In this study, researchers used the total population technique at the Sei Dadap Health Center as a sample, where researchers took a sample of 30 respondents. The data analysis technique used is Univariate Analysis and Bivariate Analysis

3. RESULTS AND DISCUSSION

Research result

Characteristics of Research Respondents

Characteristics of research respondents include age, education, occupation.

Table 1. Frequency Distribution of Characteristics of Pregnant Women

Karakteristik		f	%
Age	<30 Years	9	30.0
	31-40 Years	17	56.7
	>41 Years	4	13.3
Amount		**30**	**100**
Education	Base	2	6.7
	Intermediate	19	63.3
	Tall	9	30.0
Amount		**30**	**100**
Work	Work	16	53.3
	Dosen't Work	14	46.7
Amount		**30**	**100**

The table above shows that the frequency distribution is based on the age of the majority aged 31-40 years, namely 17 (50.0%) respondents, and the minority aged > 41 years, namely 4 (13.3%) respondents, based on the education of the majority, namely secondary education, 19 (63.3%) , and a

minority in basic education, namely 2 (6.7%) respondents, while based on occupation, the majority worked, namely 16 (53.3%) respondents, a minority, namely not working, 14 (46.7%) respondents.

The Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022
Univariate analysis

Table 2. Results of Frequency Distribution Prior to Education on Prevention of Stunting on Knowledge of Pregnant Women

No	Knowledge before education	F	%
1	Good	4	13.3
2	Not enough	26	86.7
	Amount	**30**	**100**

The table above shows that the frequency distribution based on before being given education on knowledge of pregnant women is the majority lacking, namely 26 (86.7%), while the minority is good, namely 4 (13.3%)

Table 3. Results of frequency distribution after education on stunting prevention on pregnant women's knowledge

No	Knowledge after education	F	%
1	Good	22	73.3
2	Not enough	8	26.7
	Amount	**30**	**100**

The table above shows that the distribution of frequency based on having been given education on knowledge of the majority of pregnant women is good, namely 22 (73.3%), while the minority is poor, namely 8 (26.7%)

Normality Test

The normality test is used to test whether the data to be used is normally distributed or not. Based on the data obtained from the calculation of the results of the Shapiro Wilk test. The results of the calculation of the normality test in the Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022 are based on Table 2 below.

Table 4. Results of the Normality Test. The Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women in the Pre-test and Post-test

Tests of Normality

	Kolmogorov-Smirnov[a]			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Pengetahuan Pre Test	.139	30	.142	.948	30	.152
Pengetahuan Post Test	.158	30	.054	.852	30	.190

a. Lilliefors Significance Correction

Based on the output table above, it is known that the value of df (degrees of freedom) for pregnant women's knowledge in Education about Stunting Prevention is 30. This means that the number of sample data is less than 50. It can be concluded based on Shapiro Wilk that the data for the variable Knowledge with Education about Stunting Prevention is significantly pre test and post test is greater than 0.05, so it means that the variables are normally distributed.

From these results it is known that knowledge with education about prevention of stunting pre test is 0.152, knowledge with education about prevention of stunting is 0.190 post test. then as the basis for decision making in the sahpiro-wilk normality test it can be concluded that the data for the

knowledge variable with Education about Stunting Prevention by pre-test and post-test is greater than 0.05, so it means that the variable is normally distributed.

Paired Sample t-test

Paired sample t test is a different test of two paired samples based on the average. Paired samples are the same subject but have different treatment. To perform the Paired Sample t test, the data used must be normally distributed. So that the hypothesis made can be analyzed with the Paired Sample t test**.**

Table 5. Results of the paired sample t test. Effect of Education on Stunting Prevention on Knowledge of Pregnant Women pre-test and post-test

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	Pengetahuan Pre test	11.40	30	3.276	.598
	Pengetahuan Post test	12.97	30	3.253	.594

The results showed that knowledge with education about stunting prevention had an average knowledge score in the pre-test with no treatment, namely 11.40, whereas after the treatment, knowledge with education about stunting prevention had an average knowledge score in the post-test, namely 12.97, meaning it can be concluded that knowledge with education about stunting prevention after treatment can increase respondents' knowledge about stunting.

Table 6. Results of the paired sample t test. Effect of Education on Stunting Prevention on Knowledge of Pregnant Women pre-test and post-test

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	Pengetahuan Pre test & Pengetahuan Post test	30	.409	.025

The Paired Samples Correlations table shows the correlation value which shows the relationship between the two variables in the paired samples. This is obtained from the bivariate Pearson correlation coefficient (with a two-tailed significance test) for each pair of variables included.

Table 7. Results of the paired sample t test. Effect of Education on Stunting Prevention on Knowledge of Pregnant Women pre-test and post-test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Pengetahuan Pre test Pengetahuan Post test	-1.567	3.549	.648	-2.892	-.241		29	.022

The Paired Samples Test table is the main table of the output which shows the results of the tests performed. This can be seen from the significance value (2-tailed) in the table. The significance value (2-tailed) of knowledge with Education about Stunting Prevention is 0.022 ($p < 0.05$). So that the results of the pre test and post test experienced a significant (meaningful) change. Based on descriptive statistics, the pre-test and post-test proved to be higher. It can be concluded that education about stunting prevention can increase pregnant women's knowledge.

Discussion

The Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022.

Knowledge is the result of "knowing" and occurs after people sense a certain object. Sensing occurs through the five senses of sight, hearing, smell, taste and touch so that most human knowledge is obtained through the eyes and ears, so knowledge is the result of our sensing. . (Notoadmojo, 2017).

Knowledge is also obtained from one's own experience or the experience of others, in this case the mother's level of knowledge influences exclusive breastfeeding. Knowledge or cognitive is a very important domain in determining one's actions. The knowledge factor becomes the personal considerations of an individual or group that influence behavior. these considerations can support or hinder exclusive breastfeeding.

This research is in line with research conducted by Novia Results., 2021 increasing mothers' knowledge regarding the material given when carrying out pre-test and post-test activities. During the pre-test the level of knowledge of mothers in the less category was 15 people (71.4%), while in the good category there were 6 people (28.6%). At the time of the post-test the level of knowledge of mothers in the less category was 3 people (14.3%) and in the good category were 18 people (85.7%).

Based on the results obtained, it is known that mothers' knowledge increases after being given education related to stunting. Knowledge is very closely related to higher education, so the person's knowledge is wider. However, it should be noted that a person with low education does not necessarily mean that he has low knowledge. Increased knowledge is not absolutely obtained from formal education but can be obtained from non-formal education [6].

Development of human resources can be done by providing training to improve one's skills [7]. Efforts to tackle stunting are focused on 1000 HPK, because this period is an important period in determining the quality of life of children, this period is called the golden age, namely the period when growth and rapid development in children.[8]

Mother factors have an important role in raising their children, and have different parenting patterns. Because this is strongly influenced by factors that support it, including: mother's educational background, mother's occupation, mother's nutritional status, mother's age at the time of having children and as a supporting factor for children's nutritional status in this study in Seberaya Village stated that mothers with the age of early marriage has poor parenting because the mother does not know about good parenting. [6]

If a mother's nutrition is insufficient during pregnancy, the baby will be born with low birth weight (LBW) and is very at risk of being stunted. In pregnant women under the age of 18, the reproductive organs are immature. Uterine organs, for example, are not yet fully formed, so there is a high risk of interfering with fetal development and can cause miscarriage. [2]

Some research results state that there is a significant relationship between maternal parenting and the incidence of stunting in toddlers, both parenting and eating. that good maternal parenting patterns such as exclusive breastfeeding, appropriate complementary feeding, immunization and providing psychosocial stimuli for children can prevent children from becoming stunted, and vice versa. Poor parenting has a risk of 8.07 times greater than good parenting. [1]

Interventions for stunting programmed by the government include pregnant women getting blood supplement tablets of at least 90 tablets during pregnancy, providing additional food to pregnant women, fulfilling nutrition, delivering with doctors or midwives who are experts, IMD (Early Breastfeeding Initiation), Exclusive Breastfeeding for babies up to 6 months of age, provide complementary food for breastfeeding from 6 months to 2 years of age, provide complete basic immunization and vitamin A, monitor toddler growth at the nearest Posyandu, and apply clean and healthy lifestyle [6]

4. CONCLUSION

Based on the results of research conducted regarding the Effect of Education on Prevention of Stunting on the Knowledge of Pregnant Women at the Sei Dadap Health Center, Sei Dadap District, Asahan Regency in 2022, it can be concluded Knowledge of pregnant women before being given education about stunting prevention with a mean result of 11.40. Knowledge of pregnant women after being given education about stunting prevention with a mean of 12.97.

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