



Effectiveness of Health Promotion on the Knowledge and Attitudes of Mothers of Toddlers regarding Stunting at the Siatasbarita Community Health Center, Siatasbarita District in 2022

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<p>Track Record Article</p> <p>Accepted: 7 October 2023 Revised: 24 December 2023 Published: 27 December 2023</p> <p>How to cite : Siburian, U. D., & Ritonga, P. T. (2023). Effectiveness of Health Promotion on the Knowledge and Attitudes of Mothers of Toddlers regarding Stunting at the Siatasbarita Community Health Center, Siatasbarita District in 2022. <i>Contagion : Scientific Periodical of Public Health and Coastal Health</i>, 5(4), 1441–1448.</p>	<p style="text-align: center;">Abstract</p> <p><i>Stunting is a chronic nutritional problem that can cause growth disorders in children. Health promotion is a very necessary effort to reduce stunting rates. Health promotion is provided to the community so people know, want and can maintain and improve their health. One strategy is advocacy, namely providing information through counselling in collaboration with toddler integrated healthcare centre. This research aims to determine the effectiveness of health promotion on mothers' knowledge and attitudes about stunting. This type of research is quasi-experimental with a pretest and posttest group design. The research was conducted from June to November 2022 in Sitompul Village and Lumban Siagian Jae Village. The population was mothers who had stunted toddlers in Sitompul Village and Lumban Siagian Jae Village, the sample was 40 mothers who came to the integrated healthcare center. The sampling technique was Accidental Sampling, namely several mothers who came to the integrated healthcare center in August. and September 2022. data collection using a questionnaire. Data analysis using bivariate analysis using the Wilcoxon test. The results showed that there was an effect of counselling on knowledge ($p\text{-value}=0.000$) < 0.05, and there was no effect of counselling on mothers' attitudes about stunting ($p\text{-value}=0.317$) > 0.05 at Siatas Barita Health Center, Siatas Barita District. Counselling effectively increases knowledge but does not improve mothers' attitudes about stunting. It is hoped that health workers will improve their approach to mothers to increase their knowledge and attitudes about stunting to prevent and treat stunting in children.</i></p> <p>Keywords: <i>Attitude, Effectiveness, Health Promotion, Knowledge, Stunting</i></p>
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INTRODUCTION

Stunting or short children is a nutritional problem currently the government's main concern in children's health. Stunting is a problem in Indonesia and the world, especially in poor and developing countries. Stunting is a problem because it can increase the risk of morbidity and death and suboptimal brain development, which can result in stunted motor development and mental growth (Kemenkes RI, 2022).

Stunting is a form of growth failure (growth faltering) due to the accumulation of nutritional deficiencies that last for a long time, from pregnancy until 24 months. This situation is exacerbated by the need for adequate catch-up growth (Soliman et al., 2021).

According to the World Health Organization (WHO), a country is said to have a stunting problem if the number of cases exceeds 20%. Meanwhile, in Indonesia, based on data from the Ministry of Health in 2021, cases of stunting under five in Indonesia were 24.4%,

making it a problem that needs to be addressed. This figure reflects that 1 in 4 Indonesian children are stunted (Kemenkes RI, 2021).

Based on stunting data, 23% of Indonesian babies are stunted when they are born, and 77% are stunted after birth. Therefore, the government is trying to make interventions before and after the birth of a child (UNICEF, 2020). Based on data from the 2022 National Nutrition Status Survey, the prevalence of stunting in Indonesia is 21.6%. This number decreased compared to the previous year, namely 24.4%. Even though it is decreasing, this figure is still high, considering that the stunting prevalence target in 2024 is 14% and the WHO standard is below 20% (Kemenkes, 2022).

The prevalence of stunted toddlers in Indonesia in 2022, North Sumatra, is in 19th place, namely 21.1%. North Sumatra Province, North Tapanuli Regency is in 11th place (27.4%). Siatabarita District is one of the districts with a high stunting rate, in North Sumatra Province, North Tapanuli Regency is in 11th place (Kemenkes, 2022). Siatasbarita District is one of the districts with a high stunting rate, namely 184 children under five are stunted. In Sitompul Village, there were 34 people, and in Lumban Siagian Jae Village, there were 18 people.

Many factors cause the high stunting rate. Previous research by Permaha et al., (2023) found that maternal knowledge, parenting patterns, exclusive breastfeeding and birth weight of toddlers influence the occurrence of stunting. Low public knowledge is an obstacle to reducing the stunting rate. Low knowledge makes people think that a short body is not a health problem, there is a hereditary factor because parents are short, and it is normal for children to be short. They will grow and match their height with their peers. On the other hand, if knowledge is high, it will be able to support healthy living behavior. Increasing behaviour in the form of knowledge, attitudes and actions can be done by providing information, namely by carrying out health promotion (Yulianti et al., 2022).

Health promotion is a much needed effort to reduce the number of stunting cases. Health promotion is an activity carried out in the community and is a program to realize Indonesia's vision and mission for health development. So that people know, want and can maintain and improve their health (Nurmala et al., 2018).

To achieve success in reducing the incidence of stunting, other strategies are needed before carrying out activities. Another strategy used is to take an advocacy approach that focuses on targets by providing information through counselling in collaboration with a toddler integrated healthcare centre (Syafrawati et al., 2023).

Wulandari's research results in Wulandari et al. (2020) show that most mothers' behaviour in preventing stunting in their toddlers is influenced by maternal motivation factors, followed by the role of midwives, the role of cadres and support from the family. It is recommended that midwives and cadres continue to provide counselling in the form of information and education about stunting, so that mothers who have toddlers can participate or attend to listen to the counselling, so that mothers who have toddlers can participate or attend to listen to the counselling, and are mutually motivated to want to prevent stunting.

Based on the problems above, the Research Team wants to know the effect of health promotion on mothers' knowledge and attitudes about stunting to reduce stunting rates in toddlers.

METHOD

The type of research used was a quasi-experimental research with a pretest and posttest group design to find out whether there were differences in mothers' knowledge and attitudes about stunting after being given counselling.

This research was conducted in Sitompul Village and Lumban Siagian Jae Village from June to November 2022. The population in this study consisted of 184 toddlers who experienced stunting in Sitompul Village and Lumban Siagian Jae Village. The sampling technique used the accidental sampling method, namely mothers who came during the implementation of the integrated healthcare centre, so the sample in this study was 40 respondents.

Data collection in this research used a questionnaire. Testing of the research instrument in the form of a questionnaire used in collecting data on the knowledge and attitudes of pregnant women will be tested first on 40 respondents outside the research sample, namely in the working area of the Hutabaginda Community Health Center because the Community Health Center is close to the research area and has the same characteristics in terms of demographics and type of work.

Test the validity of the instrument by using the Corrected Item-Total Correlation value for each question item. Question items that achieve a calculated correlation value (r -count) greater than the critical correlation value (r -table = 0.444) at a significance level of 95% are considered satisfactory or valid. The reliability test uses Croanbach's Alpha value. The reliability of a variable item is said to be good if it has a calculated r value of the variable $> r$ table, which is said to be reliable, and a calculated r value of the variable $< r$ table, which is said to be unreliable.

The variables in this research are mothers' knowledge and attitudes towards stunting education. Analysis of research data using bivariate analysis using the Wilcoxon test, data processed using the Statistical Package for the Social Sciences (SPSS) version 23 software.

RESULTS

Table 1. Frequency Distribution of Pretest and Posttest Results Covering Knowledge Mothers Regarding Stunting

Knowledge	Category						Total	
	Good		Fair		Not		n	%
	n	%	n	%	n	%		
Pretest	19	47,5	16	40	5	12,5	40	100
Posttest	27	67,5	13	32,5	0	0	40	100

Based on Table 1. Pretest results show that respondents' highest level of knowledge before being given counselling was in the good knowledge category, namely 19 people (47.5%), with the least knowledge being in the bad category, namely 5 people (12.5%). The post-test results found that the respondents' level of knowledge after being given counselling was in the good knowledge category. Namely 27 people (67.5%), and no one else had poor knowledge.

Table 2. Frequency Distribution of Pretest and Posttest Results Covering Attitude Mother's Regarding Stunting

Attitude	Category				Total	
	Support		Not Support		n	%
	n	%	n	%		
Pretest	26	65	14	35	40	100
Posttest	21	52,5	19	47,5	40	100

In Table 2, the research results show that the attitudes before counseling were 26 people supportive (65%) and 14 people not supportive (35%). Meanwhile, the attitude after the counselling was carried out 21 people (52.5%) supported (52.5%) and 19 people (47.5) did not support it.

From the pretest and posttest results in taTable and taTable, we found significant differences in results w,hich indicate an increase in mothers' knowledge and attitudes about stunting. Knowledge increased, where those with good knowledge increased from 19 people (47.5%) to 27 people (67.5), and mothers with less than 5 knowledge (12.5%) became no more mothers with poor knowledge. Meanwhile, the attitudes that supported increased from 26 people (65%) to 21 people (52.5%) and those who did not support increased from 14 people (35%) to 19 people (47.5%).

To obtain more accurate results, a statistical test, namely the Wilcoxon test, is carried out with the following results:

Table 3. Effect of Counseling on Mothers' Knowledge and Attitudes

Effect of Counseling	Z Count	P
Knowledge	- 4,931	0,000
Attitude	-1,000	0,317

From Table 3, the test results show that the knowledge variable has a value of $p = 0.000 < 0.05$, which means that counselling influences knowledge. Meanwhile, for the attitude variable, the value obtained was $p = 0.317 > 0.05$, meaning that counselling had no influence on mothers' attitudes about stunting.

DISCUSSION

Effectiveness of Health Promotion on Knowledge and Attitudes of Mothers of Toddlers About Stunting at Siatas Barita Community Health Center, Siatas Barita District in 2022

Knowledge comes from human understanding after humans use sensing of certain objects, namely sight, hearing, smell, taste and touch individually. Most human knowledge is obtained from sight and hearing. Educational factors influence it because education influences knowledge, which does not mean that uneducated humans do not have. However, knowledge regarding responding to a particular object can be obtained from experience (Ginting et al., 2022). Attitude is a form of human readiness or willingness to act, not an implementation of a particular matter (Notoatmodjo, 2012).

The research results show that counselling affects knowledge, $p\text{-value} = 0.000$. Moreover, counselling did not affect mothers' attitudes about stunting, $p\text{-value}=0.371$. This study's results align with the research by Ginting et al. (2022), which states that counselling influences mothers' knowledge and attitudes in preventing stunting ($p\text{-value}=0.001$). This is because nutrition education is a superior program, so it can improve family feeding practices for children.

Research by Rahmah et al. (2023) states that counselling influences mothers' knowledge about stunting before and after being given counselling. Counselling has the effect of increasing mothers' knowledge about stunting. Knowledge is influenced by several factors: memory, testimony, interest, curiosity, thinking and reasoning, logic, language and human needs.

Research Soviyati et al., (2023) shows the influence of health education on knowledge about stunting in mothers. This is possible because respondents felt motivated to learn more about stunting, so respondents looked for further information after the socialization was carried

out. From this, respondents changed from not knowing to knowing and from not understanding to understanding.

Research Trisnawati (2022) stated that there were significant differences in knowledge and attitudes before and after stunting education was carried out, so it could be concluded that stunting education was effective in increasing the knowledge and attitudes of mothers of babies in preventing stunting. Health education interventions are very effective in increasing maternal knowledge so they can help in changing maternal parenting patterns by providing nutrition that has a good impact on growth and weight development in stunted toddlers (Nurhayati et al., 2020; Prasetyo et al., 2023).

The level of maternal knowledge in caring for children with stunting can increase the level of care and attitudes of mothers who have stunted children. That health education interventions are very effective in increasing maternal knowledge so that they can help in changing maternal parenting patterns and providing nutrition that has a good impact on growth and weight development. Body weight in stunted toddlers (Wati et al., 2022). In this context, increasing knowledge of mothers who have stunted children can influence mothers' attitudes toward caring for children with stunting in order to prevent further risk factors. It can improve the quality of children's growth and development (Munir et al., 2022).

Nutrition education is the most important part of efforts to improve community nutrition. The education and education provided can influence a person's knowledge and attitudes in acting so that behaviour patterns change for the better. So, the role of mothers is very important in improving toddlers' nutritional status (Suhardjo, 2013).

The information provided in counselling can increase mothers' knowledge about stunting in children. The more often the mother receives health information, especially about nutrition, the better the mother's knowledge about stunting in children. Efforts to increase nutritional knowledge through nutritional education are the right steps taken by health workers and supported by concerned parties, meaning that the better the mother's knowledge about stunting, the child's growth will improve (Mulyani et al., 2022).

CONCLUSION

From the results of the Wilcoxon test on the knowledge variable, it was obtained that the value of $p = 0.000 < 0.05$, which means that there is an influence of health promotion in the form of counselling on knowledge. Meanwhile, for the attitude variable, the value obtained was $p = 0.317 > 0.05$, meaning there was no influence of health promotion in the form of counselling on mothers' attitudes about stunting. It is hoped that mothers with toddlers will continue attending integrated healthcare centres, especially following health promotion in health education provided by health workers to increase mothers' knowledge and attitudes towards stunting.

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