

MOTHER'S KNOWLEDGE AND ATTITUDE ABOUT STUNTING OF CHILDREN IN NAMORAMBE DISTRICT

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Abstract

Stunting was associated by chronic malnutrition due to intake of nutrients that are lacking in a long time in children. This condition causes the child to have a height tends to be short in his age. The incidence of stunting is influenced by care in the family, especially related to the knowledge and attitudes of mothers in the event of stunting. Treatment from pregnancy to child is related to the fulfillment of food and family nutrition. This research is descriptive which aims to describe the knowledge and attitudes of mothers in the incidence of stunting in children. Population of all mothers with babies and toddlers in Namo Rambe sub-district. Samples are families / parents who have children aged one to 5 years. Data collection uses a questionnaire, which consists of demographic data, data on mother's knowledge and attitudes. Univariate data analysis uses the frequency of distribution and presentation. The results of mother's knowledge about stunting in general are in the low category at around 50.7%. The mother's attitude is in the negative attitude which is around 55.8%. Health workers must be able to optimize their role in providing health education to the community specifically about stunting.

Keyword: Stunting, Knowledge, Attitude, Family, Nursing

1. INTRODUCTION

One result of nutritional disorders that are currently developing is stunting. Stunting illustrates chronic nutritional status that is chronic during the child's growth and development since early life. [1] [2]. Indonesia is one of 117 countries in the world that has high nutritional problems in infants, namely stunting, wasting and overweight reported in the 2014 Global Nutrition Country Nutrition Report (GNR) Indonesia Profile. Stunting (short stature) is an indication of a lack of nutritional intake, both in quantity and in quality that is not met since the baby, even in the womb.

This condition causes the child to have a height tends to be short in his age. [3] [4]. In addition to being short, stunting also has other effects on toddlers, both short term

and longterm impacts. Short-term effects that are in childhood, development is hampered, cognitive decline in immune function, toddlers more often affected by the disease than children in general. [5] [6] [7]. Long-term impact that is in adulthood, stunting children affect the child's mindset and the risk of degenerative diseases such as diabetes mellitus, coronary heart disease, hypertension, and obesity [8] [9].

One of the factors that influence the fulfillment of family nutrition is the culture of society [24]. In addition to the culture of knowledge and attitudes of families, especially mothers, with regard to fulfilling nutrition is an important factor that must be examined in feeding children. The child's health status is determined by the family through care taken in meeting daily nutritional needs [10] [11] [12].

The provision of nutritious food, including early and exclusive breastfeeding, is the beginning of fulfilling good nutrition for infants and children. A child who gets enough nutrition will avoid pain and stunting. Cases of illness and infant mortality as well as achievements in nutritional status are indicators to determine success in assessing the health status of infants and children in an area in Indonesia (2017) Ministry of Health of the Republic of Indonesia. Factors that influence health and care in children in terms of socio-cultural aspects, are socioeconomic and educational factors. Low education and knowledge affect the level of awareness and health, disease prevention [12]. Women with high levels of education tend to pay more attention to family health. Unhealthy life behaviors such as abstinence from eating to children, not providing food that varies according to nutritional needs, not giving milk to infants is the beginning of stunting [9] [11]. Socioeconomic level affects the nutritional status of a person. Besides behavioral factors, especially knowledge and attitudes of mothers in care play a role in the incidence of stunting [13] [14].

2. METHODS

This research is a quantitative descriptive study that aims to determine the knowledge and attitudes of mothers in stunting problems in children in Namorambe sub-district. The population in this study is all families and mothers who have infants and toddlers in the Namo Rambe sub-district. The sample size is 138 people. Aril until August 2019. The questionnaire is divided into 3 parts, namely demographic data, mother's knowledge and attitudes.

3. RESULT AND DISCUSSION

The Characteristics of respondents' data illustrates that the majority of mothers are at a highrisk age of around (86%), low education-SMA (57%), occupation of respondents are housewives totaling (64%).

The characteristics can be seen in the table as follows:

Table 1. Distribution of Characteristic Respondent (N=138)

No	Characteristic Respondent	(f)	(%)
1.	Mother's years		
	a. <20 Years	30	21.7
	b. 21-35 Years	73	52.9
	c. >35 Years	35	25.4
	Children's years		
	a. 12 Month	32	23.2
	b. 13 until 36 Month	64	46.4
	c. 37 until 60 Month	42	30.4
2.	Education		
	a. Low (Elementary School – Junior High School)	61	44.2
	b. High (Junior High School – Bachelor)	77	55.8
3.	Occupational		
	a. Work	54	39.1
	b. No work	84	60.9
4.	Number of Children		
	a. 1	42	30.4
	b. 2-3	51	37
	c. > 3	45	32.6
5.	Culture		
	a. Bataknese	69	50
	b. Javanese	35	25.4
	c. Padangnese	15	10.9
	d. Melayunese	19	13.7
6.	Family Income		
	a. According Minimum Wage	38	27.5
	b. Less Minimum Wage	60	43.5
	c. More Minimum Wage	40	27
7.	Home Ownership		
	a. My own house	103	74.6
	b. Stay with the other family	35	25.4
Total		138	100

Mother's knowledge can be illustrated in the following table:

Table 2. Distribution of Mother's Level of Knowledge in Namo Rambe District (N=138)

Knowledge	(f)	(%)
High	22	16
Mild	46	33.3
Low	70	50.7
Total	138	100

Based on the table above, mothers' knowledge of stunting in general is in the low category at around 50.7%. Attitudes can be illustrated in the following table:

Table 3. Distribution of Mother's Level of Attitude in Namo Rambe District (N=138)

Attitude	(f)	(%)
Positive	61	44.2
Negative	77	55.8
Total	138	100

In general, mothers' attitudes are negative even though there are still many positive ones.

4. DISCUSSION

Care of infants carried out with no optimal especially in the fulfillment of nutrition is one of the causes of the high incidence of stunting [1]. Namo Rambe sub-district area, especially the yandu post, is the closest service place to the community related to the service of infant and child health problems. The role of health workers and village officials, especially the yandu post and health cadres, is very important in providing information and care for infants, in particular improving the knowledge and attitudes of families and mothers in fulfilling the nutrition of infants and children. The condition of children with adequate nutritional status can prevent stunting in infants and children.

Mother's education and knowledge of stunting are related. This is consistent with the concept that explains that the factors that cause stunting are poor parenting practices, including a lack of maternal knowledge about health and nutrition before and during pregnancy, and after the mother gives birth [5]. Some facts and information show that 60% of children aged 0-6 months do not get exclusive breast milk, even though breast milk is the perfect food source for babies, it can shape endurance and the development of the immunological system. Many mothers in Namo Rambe sub-district based on the results of interviews said that they did not understand stunting and did not know that their children could suffer from stunting. Mother also said the child did not want to eat varied and no appetite. The occurrence of pain in children is considered normal because every child who has increased growth and development such as teething, learning to walk the child will diarrhea and fever. So it does not need to be taken for treatment to health workers. Exclusive breastfeeding has not been maximally given to infants and children. With the reason the baby does not want to breastfeed and the mother works. The importance of mother's knowledge about breastfeeding is very supportive in fulfilling the nutrition of infants in accordance with their needs. The success of nursing mothers is determined by the perceptions and attitudes of families about the importance of breast milk for babies. Parents, especially mothers as child caregivers will be influenced by their education and knowledge about health. This is consistent with the theory which states that knowledge can improve emotional control, increase client independence, increase self-esteem, increase endurance and can help clients to adapt to problems or illnesses which can ultimately improve health status [4] [15]. Education and family knowledge, especially mothers about stunting related to the incidence of stunting. Knowledge will be related to education. A mother who has good knowledge about nutrition will try to meet the child's nutritional needs to the maximum. Mothers

will try to make a variety of foods to meet the nutritional needs of children, so that the nutritional needs of elements can be met [14] [16] [17]

This is in accordance with the opinion that says that age can affect one's knowledge because of the increasing age of a person there will be changes in psychological aspects (mental). In psychological or mental aspects the level of thinking of a person is more [9]. Knowledge is also influenced by the experience of the respondent. According to [7] that there is a tendency that one's knowledge will be better with more experience than with minimal experience. External factors which are dominant factors in influencing knowledge, one of which is: access to information [6] [18].

According to Siagian (1995) the factors that influence one's perception are the person concerned or the knowledge possessed, the targets of these perceptions, and situation factors. The factor of the person concerned himself or the knowledge possessed is that if someone sees something and tries to provide interpretation of what he sees, he is influenced by individual characteristics and knowledge that also influences such as attitudes, motives, interests, experiences and expectations. Attitudes can be positive in that there is a tendency for actions to approach, like, and expect certain objects so that they are applied in the form of actions. Attitudes can be negative, namely the tendency to avoid, avoid, and distrust or believe certain objects [3]. Attitudes can be a knowledge, but knowledge that is accompanied by a willingness to act in accordance with knowledge [20] sarwono,2012. Based on data analysis, it is found that more than 50% of mothers have less knowledge in the category. This is in accordance with the statement that in determining attitudes, knowledge, plays an important role [7] With knowledge, humans can develop what they know and can overcome survival needs so that it will affect one's attitude According to [21] Purwanto (1998), with the development

of intelligence, the growth of experience, in line with increasing age, then it can form its own attitude towards an object. In this case the knowledge and attitudes of the community especially the mother plays an important role in the problem of stunting.

5. CONCLUSION

1. Mother's knowledge of stunting in general is in the low category at around 50.7%.
2. Mother's attitude is in the negative attitude which is around 55.8%.
3. Health workers must be able to optimize their role in providing health education to the community specifically about stunting.

6. SUGGESTION

1. Health workers must provide health education to the community, especially families who have babies and toddlers about stunting.
2. Making leaplet, modu and banner media about stunting and its prevention in the community and the yandu post.

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