



The Relationship between the Knowledge of Posyandu Cadres and the Implementation of Stunting Prevention in Community Midwifery Practices

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Submitted: August 2024

Revised: September 2024

Published: 30 September 2024

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ABSTRACT

Introduction: Stunting is a child's failure to achieve his growth potential due to serious malnutrition and often experiencing illness in his childhood, thus determining his growth and development abilities and mental and will cause long-term damage. The prevalence of stunting in Indonesia from the results of the Indonesian Nutrition Status Survey (SSGI) decreased from 24.4% in 2021 to 21.6% in 2022, while the World Health Organization (WHO) standard must be below 20%. The problem of stunting is a big problem, because in stunted children, not only their physical growth is disturbed, but it will also affect their brains. In handling stunting, the government involves several parties, one of which is posyandu cadres, but not all posyandu cadres know about stunting prevention. **Objective:** The purpose of this study is to find out and evaluate the relationship between the knowledge of posyandu cadres and the implementation of stunting prevention in community midwifery practices. **Method:** The method used in this research is an analytical survey with a cross sectional approach. The sample in this study met the inclusion criteria as many as 21 people. **Result:** The results of this study show that good posyandu cadres have a high level of knowledge in implementing stunting prevention in community work practices. **Conclusion:** Based on the research results obtained, there is a relationship between posyandu cadres' knowledge and the implementation of stunting prevention.

Keywords: community, posyandu cadres, stunting

Introduction

Stunting or dwarfism is a condition of growth failure that occurs in children under five due to chronic malnutrition over a long period of time so that the child is too short compared to his age. The prevalence of stunting in Indonesia has decreased from 24.4% in 2021 and to 21.6% in 2022 (Kementerian Kesehatan RI, 2023). This is still said to not be up to standard because WHO has set a standard for stunting rates for developing countries, namely below 20%, which means that Indonesia still cannot reach this standard (Adistie, Lumbantobing, & Maryam, 2018).

Stunting is still a big problem at the moment, because in children who are stunted not only will their physical growth be disrupted, but also their brain growth. Stunting will have an impact on intelligence, susceptibility to disease, and decreased productivity. This condition will affect the productivity of human resources, hamper economic growth, and influence inequality (Marni, Thaha, Hidayanty, Sirajuddin, & Syafar, 2021). Stunting is a short body condition based on the Height by Age index (height/age) which is an indicator of past nutritional status (Aprizah, 2021).

The condition of stunting in children is caused by several factors, including low maternal education, low socio-economic conditions, lack of exclusive breast milk (ASI), maternal age less than 20 years, pregnant mothers and toddlers who experience poor nutrition due to minimal knowledge about nutritional health, and lack of access to environmental sanitation and clean water (Marlina, Triana, & Fanora, 2022).

The government has launched a strategy to accelerate reducing the prevalence of stunting through the National Population and Family Planning Agency (BKKBN), one of the aims of which is to reduce the prevalence of stunting with community-based providers, namely through Posyandu. Posyandu is a center for health and nutrition services in the community. Posyandu has a function in counseling activities as well as a center for health and nutrition services in the community (Rahmi, Andika, & Sumiati, 2021). Stunting prevention program, Posyandu has a function and role as a facility for providing additional feeding (PMT), weighing toddlers, and recording toddler growth and development (Vizianti, 2022).

The role of posyandu cadres influences the incidence of stunting as an effort to prevent stunting. The important role of cadres is to act as an extension of the community and health workers to identify the potential that can optimize the preventive program that will be implemented. The existence of this central role encouraged researchers to see how Posyandu cadres' knowledge and implementation of stunting prevention was carried out (Wardah & Reynaldi, 2022).

Objective

To determine the relationship between posyandu cadres knowledge and its implementation in preventing stunting in community midwifery practice.

Method

The research method used is quantitative research with an analytical survey using a cross sectional approach where data collection and variable measurement are carried out at the same time. The population in this study were all posyandu cadres in the Kawalu Community Health Center working area. The sampling technique in this research uses purposive sampling, namely a method of sampling based on criteria determined by the researcher to be able to represent the characteristics of the population. In selecting samples,

researchers determine inclusion and exclusion criteria as a reference for researchers in conducting their research.

Result

Table 1. Relationship between Knowledge of Posyandu Cadres and Implementation of Stunting Prevention

Knowledge	Implementation of Stunting Prevention						Total f (%)	
	Low		Currently		High			
	f	%	f	%	f	%		
Good	0	0,0	4	33,3	8	66,6	12	
Enough	2	22,2	3	33,3	4	44,4	9	
Total	2	9,5	8	38,0	11	52,3	21 (100)	

Table 1 shows that the majority of respondents have good knowledge of the implementation of stunting prevention, including the high category of 8 respondents (66.6%).

Table 2. Relationship between Knowledge of Posyandu Cadres and Implementation of Stunting Prevention

Knowledge	Implementation of Stunting Prevention						Total (%)	P-Value		
	Low		Currently		High					
	f	%	f	%	f	%				
Good	0	0,0	4	33,3	8	66,6	11	52,3		
Enough	2	22,2	3	33,3	4	44,4	9	47,7		
Total	2	9,5	8	38,0	11	52,3	21	100		

Based on table 2, it shows that respondents who have good knowledge mostly have a high category in implementing stunting prevention, namely 8 respondents (66.6%), and a small portion have a medium category in implementing stunting prevention, namely 4 respondents (33.3%). Most of the respondents with sufficient knowledge had a high category in implementing stunting prevention, namely 4 respondents (44.4%), a medium category in implementing stunting prevention, namely 3 respondents (33.3%), and a low category in implementing stunting prevention, namely 2 respondents (22.2%). Knowledge of Posyandu Cadres and Implementation of Stunting Prevention in the Kawalu Community Health Center Working Area, the results of statistical analysis tests using the Chi Square test obtained a P-Value value of 0.000, meaning <0.05 . Based on the rules for rejecting the hypothesis, H_0 is rejected, this means that there is a relationship between the knowledge of posyandu cadres and the implementation of stunting prevention in community midwifery practices in the Kawalu Community Health Center.

Discussion

Based on table 1, it shows that the majority of respondents have good knowledge of the implementation of stunting prevention, which is in the high category, 8 respondents (66.6%). Knowledge is very important for the formation of a person's actions (Notoatmodjo, 2018).

Knowledge based on understanding will foster a positive attitude in efforts to prevent stunting by collaborating with health teams and posyandu cadres through specific nutritional interventions to overcome nutritional problems in children aged 0-23 months by providing nutritional counseling to individuals and families which can help to recognize health problems.

related nutrition, and helping individuals and families solve problems so that behavioral changes occur to be able to implement behavioral changes (Ramayulis, 2018).

One of the community empowerment strategies is increasing community knowledge and ability to recognize and overcome the health problems they face and increasing community awareness through community mobilization (Kementerian Kesehatan RI, 2019) Implementation of community empowerment activities including maternal, infant and toddler health; school age children and teenagers; productive age; elderly and so on can be done through community midwifery practices with promotive and preventive efforts.

Based on Table 2, it shows that there is a significant relationship between knowledge and implementation of stunting prevention. The results of the chi square test analysis on the significance value or *Sig. (2-tailed)* between the Knowledge variable and the Implementation of Stunting Prevention at the 1% significance level is 0.000, so it can be concluded that there is a significant relationship between the Knowledge variable and the Implementation of Stunting Prevention. So it can be concluded that there is a strong relationship between the Knowledge variable and the Implementation of Stunting Prevention. And the direction of the variable relationship is positive, meaning that if knowledge is better, the implementation of stunting prevention will be higher.

The results of this research are in line with those conducted by Filayeti with the title the relationship between knowledge about stunting and student characteristics with a *p* value of 0.049, which means that the better a person's knowledge, the better the efforts to prevent stunting (Filayeti, 2016).

The results of this research are also in line with research by Erfiana (2021), which states that there is a relationship between maternal knowledge and stunting prevention behavior in toddlers. Mothers who have good knowledge make it possible to update and add to existing knowledge, so that mothers can more easily accept new information that will be provided as long as the information is in accordance with the facts and has a reliable source (Erfiana, Rahayuningsih, & Fajri, 2021). Inadequate knowledge, lack of understanding about good eating habits, and poor understanding of stunting determine the mother's attitude and behavior in providing food for her child, including the right type and amount so that the child can grow and develop optimally (Hasnawati, AL, & Latief, 2021). Health workers can improve education provision health related influencing factors stunting for mothers and posyandu cadres toddler (Dewi & Ariani, 2021). It is necessary to have special training for cadres on how to provide health information through health education and promotion media (Nurbaya, Saeni, & Irwan, 2022).

Conclusion

Most of the posyandu cadres who have good knowledge have a high category in implementing stunting prevention in community work practices. There is a significant relationship between the knowledge of posyandu cadres and the implementation of stunting prevention in toddlers.

Acknowledgement

Thank you to the academic community of Bhakti Kencana University and the D3 Midwifery Study program of Bhakti Kencana University Tasikmalaya.

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