Pregnant Women's Efforts to Prevent Stunting During Pregnancy at the Akbar Medika Clinic, Mojokerto Regency

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ABSTRACT

Stunting is another form of growth failure and chronic malnutrition. Stunting can occur before birth and is caused by very poor nutritional intake during pregnancy, very poor eating patterns, low food quality in line with the frequency of infections so that it can inhibit growth. Stunting prevention is an important priority, especially during pregnancy. The aim of this research is to describe the efforts of pregnant women to prevent stunting during pregnancy at the Akbar Medika Clinic, Mojokerto Regency. The research design used in this research is descriptive. The population was all third trimester pregnant women at the Akbar Medika Clinic, Mojokerto Regency, totaling 30 people, the sampling technique used was a non-probability sampling technique, accidental sampling type, totaling 28 people. The results of this research are that efforts to prevent stunting during pregnancy among pregnant women in the third trimester are mostly good (64.3%). Mother’s characteristics and sociodemographics are related to stunting prevention behavior, some of which are age and education. The older the mother gets, the better the knowledge she gets and the better mindset she has, thus making the mother behave well. With higher education, mothers can more easily receive information and are able to apply all things or behavior that are good for their pregnancy.

Keywords: pregnant women, Efforts to prevent stunting during pregnancy

INTRODUCTION

Stunting or chronic malnutrition is another form of growth failure and chronic malnutrition. This stunting occurs over a long period of time, this is different from acute malnutrition. Stunting can also occur before birth and is caused by very poor nutritional intake during pregnancy, very poor eating patterns, low quality food in line with the frequency of infections so that it can inhibit growth (Unicef, 2012). The stunting condition will appear after the baby is 2 years old. Causes of stunting include food intake, birth weight, disease, breast milk, parental education, age of toddlers, and family economy (Saadah, 2022). Stunting begins to occur from the pre-conception period. When a teenager becomes a mother who is malnourished and anemic, it becomes worse when pregnant with inadequate nutritional intake, the mother lives in an inadequate sanitation environment.
The health and nutritional conditions of the mother before and during pregnancy and after delivery affect fetal growth and the risk of stunting. Other factors affecting the mother are the mother's body posture (short), the pregnancy distance is too close, the mother is still a teenager, and inadequate nutritional intake during pregnancy (Saadah, 2020).

According to stunting data, 23% of Indonesian babies are already stunted when they are born. Their body length is under 48 cm. Meanwhile, the remaining 77% were stunted after birth. For this reason, our country is struggling to reduce this condition with a target of reducing it by 14% by 2024. Currently the case is still at 27.4% (Kemenkes RI, 2023). In East Java, the three districts that contribute to the high prevalence of stunting in East Java are Jember, Situbondo and Bondowoso Districts. The prevalence of stunting in Jember Regency according to SSGI in 2022 is still at 34.9%. Meanwhile, Situbondo is still at 30.9% and the prevalence of stunting in Bondowoso Regency is still at 32%. (Kemenkes RI, 2023).

Various corrective efforts needed to overcome stunting include efforts to prevent and reduce direct disturbances (specific nutrition interventions) and efforts to prevent and reduce indirect disturbances (sensitive nutrition interventions). Specific nutritional intervention efforts are focused on the First 1,000 Days of Life (HPK) group, namely pregnant women, breastfeeding mothers, and children 0-23 months, because the most effective prevention of stunting is carried out in the 1,000 HPK (golden period or critical period/windows of opportunity)(Kemenkes, 2016). The government has launched stunting interventions including pregnant women getting blood supplement tablets of at least 90 tablets during pregnancy, providing additional food to pregnant women, fulfilling nutrition, giving birth with a doctor or expert midwife, IMD (Early Initiation of Breastfeeding), exclusive breastfeeding for 6 months, giving MP ASI Starting from children aged 6 months to 2 years, provide complete basic immunization and vitamin A, monitor the growth of toddlers at the posyandu, and implement clean and healthy living behavior (Saadah, 2022).

Pregnant women are one of the groups at risk of giving birth to children with stunting. Brain formation begins at the beginning of human life until a child is 2 years old (the first 1000 days of birth). Prevention of stunting itself can be done from a mother's pregnancy period, especially from the time she is in the womb until she is 2 years old or the First 1000 Days of Life (HPK), including by increasing the mother's knowledge about nutrition which is important for the growth and development of the fetus followed by the mother's behavior towards these efforts. (Agustina, 2023)

METHOD

The design of this research is descriptive. The population of this study was 30 pregnant women in the third trimester who came to the Akbar Medika Clinic, Mojokerto Regency with a total sample of 28 pregnant women. Sampling was taken using a non-probability sampling technique, accidental sampling type. The sample criteria were third trimester pregnant women who came to the Akbar Medika clinic. This research variable is efforts to prevent stunting during pregnancy. The instrument used was a questionnaire. Data processing is carried out by editing, coding, scoring, data entry and data tabulation.
FINDING AND DISCUSSION

1) General data
   a. Respondent characteristics based on age

   Table 1 Respondent characteristics based on age of Third Trimester Pregnant Women at the Akbar Medika clinic on June 15 - July 1 2023

<table>
<thead>
<tr>
<th>No</th>
<th>Age (years)</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>&lt; 20 tahun</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>2</td>
<td>20 – 30 tahun</td>
<td>16</td>
<td>60%</td>
</tr>
<tr>
<td>3</td>
<td>31 – 40 tahun</td>
<td>12</td>
<td>40%</td>
</tr>
<tr>
<td>4</td>
<td>&gt;40 tahun</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>28</td>
<td>100%</td>
</tr>
</tbody>
</table>

   Source: Primary Data, July 2023
   Based on the table above, the age of the respondents is that the majority (60%) of the respondents are between 20 - 30 years old.

   b. Respondent characteristics based on education

   Table 2 Respondent characteristics based on education of Third Trimester Pregnant Women at the Akbar Medika clinic on June 15 - July 1 2023

<table>
<thead>
<tr>
<th>No</th>
<th>Education</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Basic education</td>
<td>6</td>
<td>21%</td>
</tr>
<tr>
<td>2</td>
<td>Middle education</td>
<td>18</td>
<td>64%</td>
</tr>
<tr>
<td>3</td>
<td>Higher education</td>
<td>4</td>
<td>14%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>28</td>
<td>100%</td>
</tr>
</tbody>
</table>

   Source: Primary Data, July 2023
   Based on the table above, it can be seen that the majority of respondents' education is secondary level (64%).

2) Custom Data
   a. Efforts to prevent stunting during pregnancy

   Table 3 Efforts to prevent stunting during pregnancy among pregnant women in the third trimester at the Akbar Medika clinic on 15 June - 1 July 2023

<table>
<thead>
<tr>
<th>No</th>
<th>Efforts to prevent stunting during pregnancy</th>
<th>F</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Less</td>
<td>2</td>
<td>7,1%</td>
</tr>
<tr>
<td>2</td>
<td>Enough</td>
<td>8</td>
<td>28,6%</td>
</tr>
<tr>
<td>3</td>
<td>Good</td>
<td>18</td>
<td>64,3%</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>28</td>
<td>100%</td>
</tr>
</tbody>
</table>

   Source: Primary Data, July 2023
   Based on the table above, it can be seen that efforts to prevent stunting during pregnancy among pregnant women in the third trimester are mostly good (64.3%).
3) Discussion

The research results showed that efforts to prevent stunting during pregnancy among pregnant women in the third trimester were mostly good (64.3%). Efforts to prevent stunting must be started by the mother during pregnancy, especially in the first 1,000 days of life, one of which is the mother's knowledge and attitude regarding stunting prevention. Strengthening interventions to increase mothers' knowledge and attitudes about health and nutrition, the need for nutritional packages (supplementary feeding, Vit A, blood-increasing tablets) for pregnant women and toddlers, understanding parenting and fostering children's growth and development (Arnita et al., 2020). Stunting is caused by family income, social culture, economic policies, family support and the living environment. The main factor causing stunting is nutritional intake during pregnancy, because the fetus in the womb requires adequate nutritional intake in both quality and quantity to support the growth and development process of the fetus. If nutritional intake is inadequate, it will result in a gradation of failure of the fetus to grow in the womb, which is the beginning of stunting (Salamung et al., 2019). With efforts to prevent stunting during pregnancy, it is hoped that good quality pregnancy outcomes will be achieved and avoid stunting conditions.

Mother's characteristics and sociodemographics are related to stunting prevention behavior, some of which are age and education. Based on the research results in table 1, it was found that the majority of respondents (60%) were between 20 - 30 years old. Most of the respondents' ages are 20-30 years old, so they are considered early adulthood, where early adulthood is a productive age for forming a household and is ready to accept the responsibility of being a mother and taking care of the household. In early adulthood, a person always wants to adapt to new habits and new social dreams. In other words, the older a person gets, the more experience they have and the more they understand and understand the situation (Muzayyaroh, 2021). The older you are, the more mature a person's level of physical skills and strength will be in absorbing information, thinking and working (Nurfatimah et al., 2021a). The older the mother gets, the better the knowledge she gets and the better mindset she has, thus making the mother behave well.

Based on table 2 of the research results, it can be seen that the majority of respondents' education was at high school level (64%). In terms of education, mothers who have received higher education are better at preventing stunting. Education is considered to be able to influence a person's behavior, to increase their active role in posyandu activities and to behave, act and act to encourage health behavior (Nurfatimah et al., 2021b). Pregnant women who have higher education will make better efforts to prevent stunting than those with lower education. Education can influence a person's behavior, namely encouraging health behavior. This level of education is a factor that can determine whether or not a person's ability to receive information is easy, including information obtained from health workers when carrying out ANC examinations, attending classes for pregnant women, coming
directly to the posyandu. or read the KIA book. With higher education, mothers can more easily receive information and are able to apply all things or behavior that are good for their pregnancy.

CONCLUSION
The research results showed that efforts to prevent stunting during pregnancy among pregnant women in the third trimester were mostly good (64.3%). Mother's characteristics and sociodemographics are related to stunting prevention behavior, some of which are age and education. The older the mother gets, the better the knowledge she gets and the better mindset she has, thus making the mother behave well. With higher education, mothers can more easily receive information and are able to apply all things or behavior that are good for their pregnancy.

REFERENCES