

# THE EFFECTIVENESS OF NUTRITION EDUCATION ON INCREASING KNOWLEDGE OF THE PROSPECTIVE BRIDE

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# Abstract

Stunting is a health problem that must be considered and treated early because it has a very long impact on a person's life. Aceh province is one of the provinces with the highest stunting prevalence in Indonesia, which is 37.1%. And the prevalence of stunting in West Aceh from 2015 to 2018 increased from 36.3% to 37.0%. This high prevalence is certainly a public health problem that is considered serious and must be considered, so that future generations of the nation will no longer experience stunting. Objective: to examine the effectiveness of nutrition education interventions to increase knowledge of prospective brides and grooms. Research method: the design used in this research is Quasi-Experimental with one grub pretest and posttest. The sample in this study amounted to 10 prospective brides. Samples were selected using a consecutive sampling technique. Data were analyzed using univariate and bivariate analysis (Wilcoxon test). Results: Based on the results of the bivariate test, it was found that nutrition education was effective in increasing cathin knowledge ( $p_{value} = 0.005$ ).

Keywords: Future Bride And Groom, Nutrition Education, Knowledge.

# **1. INTRODUCTION**

Stunting is a condition of failure to thrive in children under five years of age due to chronic malnutrition (Erik, et al. 2020) Stunting has an impact on the level of intelligence, reduces productivity, vulnerability to disease, thus hampering economic growth and increasing poverty and inequality which has long-term effects. for himself, his family, and the government (Ministry of Finance, 2018).

Short Toddler or called stunting is where the nutritional status is based on an index of body length or height that does not match where in anthropometric standards, the assessment of the nutritional status of children, the results of these measurements are at the threshold (Z-Score) <-2 SD to -3 SD (short/stunted) and <-3 SD (very short/severely stunted). Stunting is a chronic malnutrition problem caused by inadequate nutritional intake for a long time due to feeding that is not in accordance with nutritional needs. Stunting can occur from the first 1000 days of life (HPK) children can cause growth disorders that are difficult to fix when they are adults, such as cognitive which can affect learning performance in school (Ministry of Health of the Republic of Indonesia, 2016).

Nutritional problems are a problem experienced by every country, be it developed countries, developing countries, or poor countries. Nutritional problems that often receive attention from the state are *underweing, stunting, wasting, and micronutrient deficiency*. (Maulina, 2021). *Stunting* is caused by multimedia factors and not only caused by poor nutrition experienced by pregnant women and children under five. The most decisive intervention to reduce the prevalence of stunting, therefore it needs to be carried out on 1000 days of HPK from children under five. Some of the factors that cause stunting can be described from the lack of knowledge of mothers regarding health and nutrition before and during pregnancy and after the mother gives birth. Another factor is the case of still limited health services for children and mothers during pregnancy. And also the economic factor of the family who is unable to fulfill or fulfill food needs and nutritional intake

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during the preconception age, during pregnancy, and also during the growth of the baby (Munir, et al. 2021).

The sustainable development goals (SDG's) are programs to reduce stunting and wasting in toddlers around the world by setting development goals. As well as being an international target for 2030 (*united national development program* [UNDP], 2016) as a form of realization, WHO and the *United Nations International Children's Emergency fund* (UNICEF) created a framework that categorizes primary factors, namely food intake factors that can cause insufficient nutrition. or excessive, while secondary factors are factors that affect the utilization of nutrients in the body. Nutrients are not sufficient due to disturbances in the utilization of nutrients. (Kemenkes RI, 2018)

According to the WHO in 2018, there were 151 million or 22.2% of children under five in the world suffering from stunting. More than 55% are from Asia while 39% are in Africa (WHO, 2018; Ministry of Health, 2018). Based on the results of the 2018 Basic Health Research (Riskesdas) and the *Soft Launching* of the results of the 2019 Indonesian Toddler Nutritional Status Survey (SSGBI) this is the basis for calculating the *stunting* prevalence reduction target. The target of *stunting* prevalence among toddlers for 2020 is 24.1% (5,543,000 toddlers), while the SIGIZI e-PPGBM report (as of 20 January 2021) from 34 provinces shows that of 11,499,041 children under five whose nutritional status was measured based on height according to age (TB/U) there are 1,325,298 toddlers with TB/U <-2 elementary school or it can be said that 11.6% of toddlers are stunted. From these calculations, it is known that the percentage indicator of *stunting* under five exceeds the set target. This condition illustrates that the achievement of this year's *stunting* percentage is on track (Kemenkes RI, 2020).

Aceh Province is one of the provinces with the highest prevalence of *stunting* in Indonesia and even exceeds the national figure of 37.1%, this figure is still below the WHO recommendation, namely, 20% of this condition makes Aceh have a "red report card" in the problem of *stunting*. (Ministry of Health RI ,2020). The prevalence of *stunting* in West Aceh from 2015 to 2018 from 36.3% to 37.0%, this shows that efforts to reduce *stunting* prevalence carried out by the local government have not been successful. (Elida, 2019)

According to the Big Indonesian Dictionary, Catin or prospective brides are women of childbearing age who have healthy conditions. The premarital period can be associated with the preconception period, the preconception period is the period before pregnancy. With a period of three months to a year before conception. The nutritional status of women of childbearing age (WUS) or premarital women for three to six months during the preconception period will determine the condition of the baby being born. The key to the birth of a normal and healthy baby is the fulfillment of perfect nutrition during the preconception period. Adequate balance and nutrition for prospective mothers will affect the overall health condition during conception and pregnancy and can break the chain of malnutrition problems during pregnancy (Susilowati, et al. 2016)

Nutrition for premarital/preconception age is a special effort to pay attention to the nutritional status of the prospective bride and groom in order to achieve a healthy family and quality offspring. This is increasingly clear with evidence that the nutritional status and health of prospective mothers during the preconception period, during pregnancy, and breastfeeding is a very critical period, or called the 1000 HPK period, (Dhany Ardiansyah, 2019).

As a form of seriousness in preventing and handling *stunting*, the Government established two nutritional interventions, namely specific nutrition interventions. This intervention is aimed at pregnant women, breastfeeding mothers and children aged 0 to 23 months. This intervention is a direct intervention that addresses the determinants of fetal nutrition and nutrition in children, from



nutritional fulfillment during pregnancy to additional food given when the child is up to 6 months old. (*international food policy research science review* [IFPRI], 2016). And the next intervention is a sensitive intervention that is shown through various development activities outside the health sector, with the success of specific nutrition intervention programs, especially the provision of nutrition during the *golden ege*, (Meri Anggryni et al, 2021).

The results of research conducted by Asmarudin Pakhri (2019) showed that there was a change in the average energy intake before and after nutrition education. The results of the T test showed a significant effect where the value of p = 0.000 ( $\alpha < 0.05$ ).

The purpose of this study was to examine the effectiveness of nutrition education interventions for prospective brides and grooms in Kaway XVI District. The stages of the implementation method in this research activity consist of a preliminary survey in the Kaway XVI district, pre-test activities, nutrition education interventions, and post-tests to measure the effectiveness of the intervention.

# 2. IMPLEMENTATION METHOD

This research was conducted in Kaway XVI sub-district. This study used a *Quasi-Experimental* design with a *one grub pretest-posttest design* using a questionnaire. The sampling technique in this study was using a *consecutive sampling technique* with the number of samples in this study amounting to 10 prospective brides and grooms in Kaway XVI sub-district.

The data obtained will be analyzed data consisting of Univariate and Bivariate analysis. Univariate analysis was used to analyze one variable independently and bivariate analysis was used to determine the relationship between two variables, namely the respondent's knowledge of preconception nutrition before and after being given adduction using the *Wilcoxon test*.

# **3. RESULTS AND DISCUSSION**

## **3.1 Results**

CHARACTERISTIC	$\mathbf{F}$	%
Gender		
Male	2	20
Woman	8	80
Age (years)		
17-20 years old	3	30
21-30 years old	7	70

Respondents in this study amounted to 10 respondents. There are 2 male respondents (20%) and 8 female respondents (80%). As for age, there are 3 respondents in the age category between 17-20 years (30%) and 7 respondents are in the age group of 21-30 years (70%).

 Table 2 Frequency Distribution of Respondents' Knowledge Before and After Giving the Intervention

Respondent Knowledge	Before Intervention		After Intervention	
	F	%	F	%
Not good	10	100	4	40

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Good	-	-	6	60
Total	10	100	10	100

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From the table above, it can be seen that all respondents had poor knowledge before the intervention (100%) and after being given the intervention there were 6 respondents who had good knowledge (60%).

		on Knowledge of Responde	
Variable	N	Mean	P <sub>VALUE</sub>
Before Intervention	10	0	
After Intervention	10	5,50	0.005

Based on table 3 of the test results above, it can be seen that the average value of the respondents' knowledge before the intervention was given was 0, indicating that the respondents' knowledge about nutrition was not good. And after the intervention was given, the average value of the respondents was 5.50 which explained that the knowledge of the respondents increased after the education of nutrition knowledge was given. Based on the results of the Wilcoxon test, the  $p_{value} = 0.005$  and this is smaller than the  $p_{value} = 0.05$ . So that it can be described that nutrition education is effective in increasing the knowledge of the bride and groom.

# **3.2 Discussion**

## 1. The Effect of Intervention on Nutrition Knowledge of Respondents

Based on table 3, it can be seen that the average value obtained by respondents regarding nutritional knowledge before being given the intervention was 0 indicating that the respondent's knowledge of nutrition was not good, and after being given the intervention the average value of the respondent's nutritional knowledge increased to 5.50 which indicates that the respondent can accept and understand the nutritional material presented by the researcher. Knowledge is important to shape personality, education does not always come only from formal education (Inanna, 2018). The pattern of life and all the habits that exist in every human being is the basis of the pattern of knowledge, if it is good in behavior and personality, then the knowledge he has is good.

Based on the Wilcoxon test, the  $p_{value} = 0.005$  and this value is smaller than = 0.05 ( $p_{value} = 0.005 < 0.05$ ) so it can be said that nutrition education is effective in increasing the nutritional knowledge of the bride and groom regarding nutritional intake that must be met during the growth period of children, more precisely. during the 1000 HPK period in Kawai XVI, West Aceh.

The results of this study are in line with research conducted by Widhayati (2017) which showed that after nutrition education there was an influence on the level of energy adequacy between groups or individuals (p = 0.036). And the results of this study are in line with research conducted by Rachmawati and Nurafifah (2017) which showed the effect of nutrition counseling on the respondents' nutritional knowledge, as evidenced by the significant value (p =

0.000). Likewise, the nutrition education conducted by Sefaya, et al (2017) for high school students in Semarang with the extension media succeeded in increasing students' nutritional knowledge.

The results of this study are also in line with research from Agus, HA (2020) which states that there is an increase in knowledge of prospective brides after being given education with a value (p = 0.000). Likewise with research from Wardila and Risa Jeni (2020) which stated that there was a significant influence on the knowledge of the bride and groom before and after being given nutrition education (p = 0.001). The same is true of research conducted by Annisa Fitriyadi et al (2019), which stated that there was an influence on knowledge before and after nutrition education was given (p = 0.002).

The results of this study are also in line with research conducted by Betty Yosephi Simanjuntak & Anang, W. (2021) which states that there is a difference in the knowledge of respondents after being given education with (p = 0.000). In line with research by Khairunisa Ramadhani & Hesti Khofifah (2021) there was an increase in knowledge of respondents before and after being given counseling with a value (p = 0.000). This is also in line with Nurdin's research (2018) which shows that there is an increase in respondents' knowledge after being given counseling (p = 0.000).

# **4. CONCLUSION**

The results of this study conclude that there is a very significant impact on the knowledge about nutrition possessed by the respondents after being given education and based on the tests that have been carried out. This is certainly very helpful for solving this one health problem, namely stunting. And it can be seen that the provision of nutritional knowledge education to prospective brides or people in the preconception period has very optimal results. So with this it is hoped that the knowledge that has been obtained can be applied to prospective children later. So that the target number to be achieved by WHO, namely (20%) can be met.

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