

The Effectiveness Of Video Education Media Via Whatsapp Group On The Knowledge Of Mothers Of Toddler Ages 0-6 Months About Stunting

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Abstract

Stunting is a condition where a toddler has less length or height compared to his age. One of the causal factors is knowledge. This research aims to determine the effectiveness of educational video media via WhatsApp groups on the knowledge of mothers of toddlers aged 0 - 6 months about stunting. This type of research uses a quasi-experiment with a research design using one group pretest-posttest. Sample selection used a random sampling technique with a sample size of 40 people. Data collection was carried out using a questionnaire. Statistical tests non-parametric tests used the Wilcoxon test. The research results obtained before the respondents received stunting education, the sample had sufficient knowledge as many as nine people (22.5%) and 31 people (77.5%) had insufficient knowledge, whereas after the respondents received the stunting education video via WhatsApp group the sample had good knowledge as many as 40 people (100%). The results of the Wilcoxon test obtained a p value of 0.000, meaning that there was a significant increase in respondents' knowledge after the stunting educational video was conducted using WhatsApp. It is hoped that parents of toddlers will prefer to seek information by discussing with health workers via WhatsApp.

Keywords: Parents, stunting knowledge, video, whatsapp

INTRODUCTION

Stunting is a condition of growth failure in toddlers (babies under five years old) due to chronic malnutrition so that the child is too short for his age. Malnutrition occurs since the baby is in the womb and in the early period after the baby is born, however, stunting conditions appear after the baby is two years old. Stunting is the result of poor nutrition in the womb and early childhood (WHO, 2018).

Based on WHO limits, Indonesia is in the category of high stunting problems (Ministry of Health, 2020). The government targets the prevalence of stunting in toddlers in 2020 to be 24.1% (5,543,000 toddlers), while the ePPGBM SIGIZI report from 34 provinces shows that of the 11,499,041 toddlers whose nutritional status was measured based on height for age (TB/U) there were 11.6% (1,325,198 toddlers) experiencing stunting. Based on these

calculations, it is known that the percentage indicator of stunted toddlers exceeds the set target. This condition illustrates that the achievement of the stunting percentage that year was on track, but there were still challenges in implementing activities that contributed to achieving the target of preventing stunting during this pandemic, such as disruptions to nutritional services, especially in health service facilities and integrated health posts due to restrictions on community mobility to prevent transmission of the Covid-19 virus (Ministry of Health, 2021). The government is targeting a stunting rate of 14% in 2024 (Ministry of Health, 2021). According to WHO, the impacts of stunting can be divided into short-term impacts (increased incidence of morbidity and mortality, suboptimal cognitive, motor, and verbal development in children, and increased health costs) and long-term (shorter body posture than in general, increased risk of obesity and other diseases, decreased reproductive health, less than optimal learning capacity and performance during school, and less than optimal productivity and work capacity) (Ministry of Health, 2018). The results of a preliminary study of secondary data collection conducted by researchers at the Madiun City Health Office showed the incidence of stunting based on the August 2021 ePPGBM entry aged 0-59 months in Madiun City as of

January 22, 2022, that Payangan District had the highest stunting prevalence in Madiun City, namely 13.21% (278 out of 2,105 targets), so further research is needed as an effort to reduce the prevalence of stunting evenly and assist the Madiun City government in reducing the stunting trend. Research in Bangetayu Village, Genuk District, Semarang concluded from the results of direct interviews with mothers who have stunted children that mothers have the wrong knowledge and perceptions about stunting (Margawati, 2018). Stunting is considered a serious problem that needs to be followed up immediately. The results of research in the working area of the Ulak Muid Health Center, Melawi Regency, stated that mothers with poor knowledge had a 1.644 times greater risk of having stunted toddlers compared to mothers with good knowledge (Wulandari et al., 2018)

Based on research in Singakerta Ubud village, it was found that the correlation results before and after the "Rumah Belajar" activity also utilized the use of social media in the treatment group, showing a figure of 0.866 with a probability value (sig) of 0.000, thus stating that family risk behavior with the incidence of stunting in toddlers is significantly related. Based on the comparison of the probability value (sig) of $0.000 < 0.05$, there is a real and significant difference before and after the "Rumah Belajar" activity utilizing the use of social

media on family risk behavior with the incidence of stunting in toddlers in Singakerta village, Ubud (Cakra, 2020).

Research at the Rendang Health Center, Karangasem Regency found that there was a significant difference before and after education (bio-acupressure massage education model) on stunting, namely a significant difference in appetite with a P value <0.05 (P value = 0.000). Based on this, the bio-acupressure massage education model using pure coconut oil can increase appetite so that it can be an alternative program to overcome the problem of stunting in toddlers (Ribek et al., 2021). Prevention and handling of stunting can be followed up by providing education (Health education) (Soekidjo, 2012).

Health education can be provided via mobile phones and smartphones. Mobile phones and smartphones are electronic media that are widely used in Indonesia. The wide coverage of smartphone users in Indonesia in the 20-49 years age group opens up opportunities for the use of smartphones as a medium for health education. Health education via mobile phones and smartphones can be done via online short message services using various applications, one of which is WhatsApp. The advantages of using online short message services are low usage costs, easy to reach, high level of privacy, can form groups, and the content sent can be in the

form of videos and images (Yani, 2016). The 2021 Indonesian Digital Report states that WhatsApp users in Indonesia are 87.7% of the population (274.9 million people) and are ranked second after YouTube.

Based on the results of a preliminary survey, the majority of parents of stunted toddlers admitted to a lack of knowledge about stunting. This study aims to determine the effectiveness of video educational media through WhatsApp groups on the knowledge of mothers of toddlers aged 0-6 months about stunting at the Griya Sehat Bunda Clinic, Madiun City in 2024.

RESEARCH METHOD

The type of research used in this study is a quasi-experimental design, with a one-group pretest post-test design. The study was conducted at the Griya Sehat Bunda Clinic in Madiun City in April-May 2024. The population was 44 parents of stunted toddlers at the Griya Sehat Bunda Clinic in Madiun City and the sample selected was 40 respondents. The inclusion criteria in this study are as follows: parents who can understand Indonesian, have and can operate WhatsApp media are willing to be respondents and have signed an informed consent when collecting data. Exclusion criteria are parents who have physical limitations (fingers and fingers), parents

who have mental disorders (such as mental retardation). The sampling technique used is probability sampling (random sampling). The type of probability sampling (random sampling) used is simple random sampling by drawing population members (lottery technique). Data collection using a stunting knowledge questionnaire filled out directly by respondents online. The researcher conducted a data normality test using the Shapiro-Wilk test and the results showed that the data was not normally distributed with sig. pre test is $0.006 < 0.05$ and sig. post test is $0.000 < 0.05$ ($\alpha = 0.05$) so the bivariate analysis uses the Wilcoxon test.

RESEARCH RESULT AND DISCUSSION

RESULT

The frequency distribution of respondent characteristics based on age, gender, last education, and occupation at the Griya Sehat Bunda Clinic, Madiun City in 2024 can be seen in table 1.

Table 1. Frequency Distribution of Respondent Characteristics Based on Age, Gender, Last Education, and Occupation at the Griya Sehat Bunda Clinic, Madiun City in 2024

No	Responden Characteristics	Frequency (f)	%
1	Age		
	17-25 years	11	27,5
	26-35 years	25	62,5
	36-45 years	4	10
2	Gender		
	Female	40	100
	Male	0	0
3	Education		

No	Responden Characteristics	Frequency (f)	%
4	Elementary School	0	0
	Junior High School	2	5
	Senior High School	38	95
	College	0	0
	Occupation		
	Civil Servant	0	0
	Private	0	0
	Self-Employe	0	0
	Farmer	0	0
	Fisherman	0	0
	Housewife	40	100
Total		40	100

Source: Primary Data 2024

Based on table 1, the highest frequency based on age is the 26-35 years age group as many as 25 people (62.5%), female gender as many as 40 people (100%). based on the last education is high school as many as 38 people (95%), based on occupation is a housewife as many as 40 people (100%).

The frequency distribution of respondents' knowledge before and after being given stunting education and group discussions via WhatsApp at the Griya Sehat Bunda Clinic in Madiun City in 2024 can be seen in table 2.

Table 2. Frequency Distribution of Respondents' Knowledge Before and After Being Given Stunting Education and Group Discussion via WhatsApp at the Griya Sehat Bunda Clinic, Madiun City, 2024

Knowledge	Before Education		After Education	
	f	%	f	%
Good	0	0	40	100
Enough	9	22,5	0	0

Knowledge	Before		After	
	Education		Education	
Poor	31	77,5	0	0
Total	40	100	40	100

Source: Primary Data 2024

Based on table 2, it shows that before being given stunting education and group discussions via WhatsApp, the level of knowledge was sufficient for nine people (22.5%) and the level of knowledge was lacking for 31 people (77.5%). After being given stunting education and group discussions via WhatsApp, it showed that the level of knowledge increased to good for 40 people (100%).

The results of the Wilcoxon test showed that the p value (asymptotic, 2-tailed) was 0.000 (p value <0.05). It was concluded that H₀ of the study was rejected and H_a was accepted, meaning that there was a significant increase in knowledge before and after stunting education and group discussions with WhatsApp media so that stunting education with WhatsApp media was effective in the level of knowledge of parents of toddlers at the Griya Sehat Bunda Clinic in Madiun City in 2024.

Based on these results, it can be seen that there was an increase in the number of respondents' knowledge distribution about stunting. The highest score that respondents managed to get before education and group discussions was 73.33 and the lowest score was 26.67 and the average was 44.25. The

respondents' scores after education and group discussions via WhatsApp changed with the highest score being 100 and the lowest score being 80 and the average being 95.83.

DISCUSSION

Based on these results, the highest frequency of respondents is included in the adult category, namely 26-35 years old, meaning that at that age a person already has a more mature understanding and mindset. According to researchers, as a person gets older, the experience and information they get will also increase, so that it will affect their knowledge because the ability to search, receive, absorb, and apply information is different in their age category, but after being given education and group discussions via WhatsApp, it showed that all age categories were able to increase their knowledge. The results of this analysis are in line with research in Tamale Metropolis Ghana that maternal age has a significant relationship with the incidence of stunting and toddlers from mothers who are still teenagers have an eightfold risk of experiencing stunting compared to mothers who are old enough to conceive and give birth, in addition psychologically, young mothers are not yet mature in terms of mindset so that the nutritional parenting pattern of children in teenage mothers is not as good as older mothers (Wemakor, 2018).

These results are in contrast to research in Sukaraja Village, Panjang District, Bandar Lampung City, namely that no significant relationship was found between maternal age and the incidence of stunting. Young mothers do not necessarily have poor parenting patterns because in this technological era, young people are more adept at finding information than older people (Sumardilah, 2019).

Education greatly influences the level of knowledge, meaning that the higher a person's education, the higher the curiosity in finding the information needed regarding stunting knowledge according to researchers. These results are in line with research in the Sampang Health Center work area, namely that there is a significant relationship between the mother's education level and the incidence of stunting. Mothers with low levels of education have a 0.254 times greater risk of experiencing stunting than mothers with high levels of education (Pramithasari, 2022). Individuals who have a high level of education are more likely to know about healthy lifestyles and how to keep their bodies fit. The mother's education level affects the health of the family because of its significant role in forming habits in the family. The mother's role in forming children's habits includes menu planning, shopping, cooking, preparing food, and distributing food (Rahayu, 2014).

A person's type of work greatly influences family income which will have an impact on daily lifestyle patterns. The better a person's job, the greater the parents' income, so that a person can more easily obtain education and can more easily meet the needs of their toddlers according to researchers. Income is an indicator that can determine the economic status of a family. The results of a study in Nepal found that the limit of household wealth is a risk factor for stunting (Tiwari et al., 2014). People's purchasing power to buy nutritious food is greatly influenced by family income, because determining the type of food to be purchased is highly dependent on the level of family income. Family food purchasing power is in line with the level of family income (Adriani & Wirjatmadi 2012).

The distribution of respondents' knowledge before being given stunting education and group discussions with WhatsApp media showed that respondents had received information about stunting through community leaders, health workers, and information media such as print media and electronic media, respondents only received a glimpse without studying further because it was limited to one-way communication, meaning that if respondents felt they did not understand, then respondents did not directly get an accurate explanation and the information they got was only a glimpse so that

respondents did not fully understand the information about stunting, which had an impact on sufficient knowledge and insufficient knowledge about stunting in respondents.

The distribution of respondents' knowledge after being given stunting education and group discussions with WhatsApp media shows that the level of knowledge is good for 40 people (100%). Good information should be delivered through two-way communication with the aim of positively influencing health behavior by using various principles in the form of mass communication (groups). WhatsApp as a form of mass communication (groups) can produce two-way communication so that communicants (respondents) are given the opportunity to respond or provide responses to communicators (researchers). Information sent via WhatsApp can be saved and read again at a later time. A person's knowledge can be obtained in various ways such as traditional methods (trial and error methods, power methods).

CONCLUSION

Based on the respondents' knowledge before being given education and group discussions, most respondents had poor knowledge as many as 31 people (77.5%) and sufficient as many as nine people (22.5%), while the respondents' knowledge

after being given education and group discussions, all respondents had good knowledge as many as 40 people (100%). There was a significant increase in knowledge before and after education and group discussions with WhatsApp media. So, stunting education with WhatsApp media is effective in terms of the level of knowledge of parents who have stunted toddlers at the Griya Sehat Bunda Clinic in Madiun City in 2024.

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