The Importance of Nutrition, Immunization, and Stimulation of the First 1000 Days of Life for Health, Multiple Intelligences, and Reducing Malnutrition Rates in Toddlers in Barugbug Village, Jatisari, Karawang

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ABSTRACT

Nutrition and health problems are problems that are still an iceberg phenomenon in Indonesia. It can be seen in big cities like Jakarta which still have quite a lot of health problems. Nutritional problems in Indonesia continue to increase from year to year. These nutritional and health problems will affect the health of infants and toddlers. This community service program is expected to increase public knowledge and insight regarding the importance of nutrition, immunization, and stimulation in the first 1000 days of life, reduce malnutrition rates in toddlers, and fulfill health facilities and infrastructure in Barugbug Village. The community service program that will be carried out will be directed at the importance of nutrition, immunization, and stimulation in the first 1000 days of life for health, multiple intelligence and reducing malnutrition rates in toddlers in RT 01 RW 05 Barugbug Village, Jatisari District, Karawang, West Java. This activity was carried out for 5 months. The series of activities carried out in this program include counseling, mobile posyandu, KPSP (Pre-Development Screening Questionnaire), nutrition consultation, direct practice of child stimulation, advocacy, and TOT (Training Of Trainers). The results of the implementation of this program are an increase in public knowledge which can be measured by the results of the pretest and posttest, the reduction in the number of under-nutrition in children under five which can be measured by conducting mobile posyandu and monitoring nutritional status, increasing the intelligence of multiple children by conducting the KPSP (Pre-screening Development Questionnaire) and Practicing directly stimulates children, improves health status through nutrition consultations, makes use of health facilities and infrastructure through advocacy addressed to the Karawang Regent, and conducts TOT (Training Of Trainers) for puskesmas staff, village midwives, and village cadres for the sustainability of our program.

1. Introduction

Nutrition and health problems are problems that are still an iceberg phenomenon in Indonesia. Nationally, the prevalence of underweight in 2018 was 19.6%, consisting of 5.7% of malnutrition and 13.9% of undernourished. When compared with the national prevalence rates in 2007 (18.4%) and 2010 (17.9%) it seems to have increased. Changes, especially in the prevalence of malnutrition, were from 5.4% in 2007, 4.9% in 2010 and 5.7% in 2013. Meanwhile, the prevalence of malnutrition increased by 0.9 percent from 2007 and 2013. Among the 33 provinces in Indonesia, 18 provinces have a
prevalence of malnutrition above the national prevalence rate, which ranges from 21.2% to 33.1% (RISKESDAS 2018). Public health problems are considered serious if the prevalence of undernutrition is between 20.0-29.0%, and the prevalence is considered very high if 30 percent (WHO 2010). In 2018, nationally the prevalence of malnutrition in children under five was 19.6%, which means that the problem of underweight in Indonesia is still a public health problem approaching a high prevalence. (RISKESDAS 2018). Health and nutrition problems in infants and toddlers in RT 01 RW 05 Barugbug Village, Jatisari District, Karawang are still an important problem to be studied, which is suspected that some of the population still have a relatively low level of health knowledge and lack of adequate health facilities and infrastructure in the area. In addition, the characteristics of the Barugbug Village community are still less open to information on nutritional problems which are also the main cause of the difficulty of efforts to overcome malnutrition in the area, plus from an economic perspective, the majority of people in RT 01 RW 05 Barugbug Village, Jatisari District, Karawang, West Java work as farm laborers.

2. Methods

The implementation of the program includes: (1) counseling 3 times which takes place in the prayer room, PAUD, and the residence of the head of RW 05 Barugbug Village, (2) mobile posyandu 2 times which is carried out by visiting the houses of residents who have babies and toddlers one by one, (3) KPSP (Pre-Screening Development Questionnaire) 2 times which took place at the Barugbug Village PAUD, (4) 1 time nutrition consultation which took place at Barugbug Village PAUD, (5) 1 time advocacy which was carried out by sending a letter to the Regent Karawang, (6) TOT (Training Of Trainer) 1 time which took place at PAUD and the residence of the Barugbug Village Midwife.

3. Results and Discussion

Evaluation is an assessment process. Evaluation can be interpreted as a process of measuring the effectiveness of the strategies used in an effort to achieve educational goals. The data obtained from the measurement results will be used as a situation analysis for the next program. The results that have been achieved from the extension activities are increasing public knowledge from those who initially did not know. This increase in knowledge can be seen from the results of the pretest and posttest. We provide 4 counseling materials, namely the importance of nutrition, the importance of immunization, the importance of stimulation, and the importance of breastfeeding and complementary feeding. From the four materials, it was found that the average increase in knowledge ability that occurred as a result of the implementation of this extension was 39.9%. This means that it is in a fairly good criterion interval. We carried out this mobile posyandu activity 2 times. In the first mobile posyandu, 9 out of 40 infants and toddlers had poor nutritional status. After we briefed the parents of the babies and toddlers, at the second mobile posyandu, only 4 out of 40 babies and toddlers still had poor nutritional status.

We did this KPSP activity 2 times. The interpretation of the results of the first KPSP that we have done is that from 40 infants and toddlers, data is obtained that as many as 17 infants and toddlers with dubious development. While the remaining 23 infants and toddlers with appropriate development. In the second KPSP activity, it was found that there were only 8 infants and toddlers with dubious development. While the remaining 32 infants and toddlers with appropriate development. From our nutrition consultation, we found that 80% of infants and toddlers in Barugbug Village had fever, cough, and influenza. So in this case, we recommend that parents provide adequate food according to their children’s needs and increase their vitamin
consumption. We do this advocacy by writing a letter addressed to the Regent of the Karawang Region. The purpose of this advocacy is to provide adequate facilities and infrastructure in Barugbug Village. So far, we have made efforts to provide adequate health facilities and infrastructure in Barugbug Village. The TOT (Training Of Trainers) that we have done is aimed at village midwives for the sustainability of the malnutrition reduction program, while for the sustainability of the child stimulation program we provide TOT to village cadres as PAUD coaches in Barugbug Village. We did this TOT (Training Of Trainer) once, which took place at the village midwife’s residence and in PAUD.

4. Conclusion

This community service has been able to provide knowledge to the people of Barugbug Village. This can be proven by the results of the pretest and posttest at the time of counseling. There was an increase in the knowledge of the people of Barugbug Village from those who initially did not know. This can be proven by the results of the pretest and posttest at the time of counseling. There has been a change in the behavior of the people of Barugbug Village from being initially difficult to receive information about health to being more open to receiving information about health. This can be proven from the level of attendance of the Barugbug Village community during the counseling event. With this program, at least there has been an increase in health status, such as a reduction in the number of under-fives in Barugbug Village.

5. References