

The use of curesive audiovisual media as the right complementary feeding counseling media

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Abstract

Nutritional problems having a serious impact on the quality of human resource is still faced by Indonesian people. Malnutrition is caused by various factors both inside and outside of health problems. According to the World Health Organization (WHO), malnutrition has a role of 54% in infant and toddler mortality. Lack of nutritional intake during growth has consequences ranging from stunted growth, and impaired brain growth, to death. Nutrition has a big role in reducing the rate of illness and death, especially in infants and toddlers. Improper nutritional intake is still the cause of the high malnutrition and malnutrition in Ciamis Regency. Improper complementary feeding is the main cause of early malnutrition in infants under two years old. Lack of nutrient intake is greatly influenced by knowledge and behavior on the type of complementary feeding given. Curesive Audiovisual Media is an audiovisual health counseling media in the form of motion audiovisual with MP4 format inserted into a flash drive and an authentic cover named containing health messages regarding infant nutrition 0–24 months during the MP-ASI phase starting from the basic rules of feeding children, the requirements for MP-ASI according to WHO, and modification of complementary feeding formula for infants aged 6–24 months according to the age of the child.

Keywords: *Complementary Feeding; Curesive; Underweight*

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INTRODUCTION

Indonesia still faces nutritional problems that have a serious impact on the quality of human resources. Malnutrition is caused by various factors both inside and outside of health problems, ranging from insufficient food intake, inadequate nutritional intake, infectious diseases, and sanitation, to economic factors (Kemenkes, 2017). According to the World Health Organization (WHO), malnutrition plays a role of 54% in infant and toddler mortality (Thamaria, 2017). Nutritional deficiencies are estimated to be associated with 2.7 million child deaths per year or about 45% of child deaths (Hanindita, 2020).

The prevalence of malnutrition globally is 14.9% and the region with the highest prevalence is Southeast Asia at 27.3%. Based on the report of the results of Basic Health Research (Riskesdas) in 2007, the status of malnutrition & malnutrition in Indonesia is still 18.4% with a prevalence of 5.4% malnutrition and 13.0% malnutrition. The situation did not improve until 2013 when the status of malnutrition and undernutrition was reported at 19.6% with the prevalence of malnutrition at 5.7% and undernutrition at 13.9% (Balitbangkes, 2018). Undernutrition and malnutrition are nutritional statuses based on the weight index by age (BB/U). Based on nutritional surveillance in the form of Nutrition Status Monitoring (PSG) in 2016, the prevalence of malnutrition and malnutrition in toddlers was 3.4% of malnourished toddlers and 14.4% of undernourished (Kemenkes, 2017). The results of monitoring nutritional status organized by the Ministry of Health in 2017, namely the percentage of malnutrition in toddlers 0–23 months is 3.5% and the percentage of malnutrition is 11.3% (Kemenkes, 2018). This is not much different from the 2018 Basic Health Research (Riskesdas) organized by the Ministry of Health stating that the status of malnutrition and undernutrition in Indonesia is at a percentage of 17.7% with a prevalence of malnutrition of 3.9% and undernutrition of 13.8%. Although Riskesdas 2018 reported that the number of malnutrition and undernutrition



status in Indonesia is at 17.7%, this figure still exceeds the target of the 2019 National Medium-Term Development Plan (RPJMN), which is 17%.

The incidence of malnutrition and undernutrition in West Java Province in 2019 was 2.9% malnutrition and undernutrition 10%.⁶ Ciamis is one of the districts in West Java Province that contributes to the incidence of malnutrition and malnutrition in West Java Province. According to data obtained from the Ciamis Regency Health Office in February 2020, out of a total of 76,865 infants 0-201224 months, as many as 196 babies were malnourished and as many as 1,780 infants 0-101224 months were malnourished. So there are 0.25% of infants 0-201224 months are malnourished and 2.32% of infants 0-24 months are malnourished. When calculated, the number of children with malnutrition and malnutrition in Ciamis is 2.57%. The West Java Provincial Health Office has set a tolerance limit for malnutrition of 5% and undernutrition of 10%. This puts Ciamis in the position of Acute-Chronic Nutrition Status in West Java and Baregbeg Community Health Centre is 3.79% underweight (Hanindita, 2020).

Lack of nutritional intake during growth has consequences ranging from stunted growth, and impaired brain growth, to death (Thamaria, 2017). Nutrition has a big role in reducing the rate of illness and death, especially in infants and toddlers. Improper nutritional intake, infectious diseases, socioeconomic status, maternal education, maternal knowledge about nutrition for toddlers, low birth weight, immunization completeness, exclusive breastfeeding, and parenting are still the causes of high malnutrition and malnutrition in Ciamis Regency. When the measurement of knowledge and pretest attitudes was carried out, the results in the control group using the flip sheet media were as many as 11.8% of mothers had less knowledge about complementary feeding, and 56.8% of mothers had a negative attitude towards complementary feeding. Meanwhile, in the intervention group using curesive audiovisual media, the average knowledge of the pretest was 12.4% of mothers had less knowledge of complementary feeding, and 59.1% of mothers had a negative attitude towards complementary feeding. Proper complementary feeding administration is the key to success in reducing the incidence of malnutrition and malnutrition in Ciamis Regency (Dinkes Ciamis, 2020).

Several previous studies have stated that malnutrition in children is due to improper complementary feeding habits. Ignorance of how to feed children and adverse habits are the main causes of malnutrition problems in babies under 2 years old (Pratiwi et al., 2013). Improper feeding practices are the main cause of malnutrition in the early stages of malnutrition. Lack of nutrient intake is greatly influenced by knowledge and behavior on the type of complementary feeding given (Windayanti et al., 2019).

The incidence of malnutrition and malnutrition in West Java Province in 2019 was 2.9% malnutrition and 10% malnutrition in West Java Province.⁶ Ciamis is one of the districts in West Java Province that contributes to the high incidence of malnutrition and malnutrition in West Java Province. According to data obtained from the Ciamis Regency Health Office in 2020, out of a total of 76,865 babies 0-201224 months, as many as 196 babies are malnourished and as many as 1,780 babies 0-101224 months are malnourished. So there are 0.25% of infants 0-201224 months malnourished and 2.32% of infants 0-201224 months are malnourished. If calculated, the number of children with malnutrition and malnutrition in Ciamis is 2.57%. The West Java Provincial Health Office has set a tolerance limit for malnutrition of 5% and malnutrition of 10%. This puts Ciamis in the position of Acute-Chronic Nutritional Status in West Java. The Baregbeg Community Health Center 3.79% underweight (Dinkes Ciamis, 2020).

Lack of nutrient intake during the growth period results in stunted growth, impaired brain growth, and death (Thamaria, 2017). Nutrition has a major role in reducing rates of disease and mortality, especially in infants and toddlers. Improper nutritional intake, infectious diseases, socioeconomic status, maternal education, maternal knowledge about nutrition for toddlers, low birth weight, immunization completeness, exclusive breastfeeding, and parenting are still the causes of high incidences of malnutrition and malnutrition in Ciamis Regency (Zulfianto, 2017). Several previous studies have stated that malnutrition in children is caused by improper complementary feeding eating habits. Ignorance of how to feed children and bad habits are the main causes of malnutrition problems in infants under 2 years of age (Pratiwi et al., 2013). Improper feeding practices are the main causes of malnutrition in toddlers. Lack of nutrient intake is greatly influenced by knowledge and behavior towards the type of complementary feeding given (Windayanti et al., 2019).



It is necessary to innovate counseling media so that there is an increase in knowledge and a change in mothers' attitudes. The provision of health education with audiovisual media has been proven to increase the knowledge and attitude of mothers in the management of diarrhea in Malang City. Audiovisual media is an interesting counseling medium and stimulates more senses. Audiovisual media as a health education media is effectively used to provide increased knowledge to mothers and change mothers' attitudes for the better. In the research conducted by Kapti et al (2013) There were significant differences in knowledge and attitudes after the intervention using audiovisual media. The average increase in knowledge was 19.46% and attitude was 10.47%.

The advantages of implementing health education through audiovisual media, namely the information conveyed in the form of sounds and images that can be received by two senses at once with sight and hearing. The use of audiovisual media becomes more attractive to participants so that it arouses the enthusiasm of participants to get information and is also easier to receive. The more senses are used to receive something, the more and clearer the knowledge is obtained (Munianti et al., 2019). It is necessary to conduct a comparative study on the effectiveness of flip sheet media with audiovisual media on increasing maternal knowledge and attitudes in providing complementary feeding at the Baregbeg Community Health Center, Ciamis Regency.

METHODS

The current community service activity was carried out using direct counseling to the target. Measurements in this community service activity were carried out twice, namely before and after counseling. This measurement was carried out to find out whether there was an increase in the knowledge of clown mothers about the right complementary feeding. Before conducting the proper socialization of complementary feeding, a pretest was first carried out on the mother. After the pretest, counseling was carried out first on the right complementary feeding using Cursive Audiovisual Media. After that, a question and answer session was held. The next stage was to practice directly how to use Cursive Audiovisual Media. The next stage of evaluation of the mother, namely by giving a questionnaire, was to find out if there was a change in the level of understanding and knowledge from the results of the socialization of community service. Furthermore, the devotees evaluated of mother.

RESULTS AND DISCUSSION

At this stage, a field survey was carried out with partners, including observation activities, preliminary data, and information in the field needed to explore clown nutrition problems that occurred in partners and identify habits that apply customs in handling baduta nutrition problems. The output of the implementation of activities at this stage is the establishment of an agreement to solve problems at the target location. Some of the problems found in this initial stage of activities include a lack of knowledge about proper complementary feeding, and the prevalence of undernutrition & malnutrition is still high.

The implementation stage of this activity is divided into several stages, namely the first is to explore information from cadres about how to deal with clown mothers with stunting and what mothers do from the initial survey, it turned out that many clown mothers do not know the right complementary feeding can prevent malnutrition and malnutrition. At the stage of implementing this activity, the next stage was for the clown to fill out the questionnaire that has been provided. From the results of the filling, the results of filling in the partners are produced in the following table:

Table 1. Overview of Questionnaire Results

| F | Knowledge (Category%) | | |
|----|-----------------------|--------|------|
| | Good | Enough | Less |
| 30 | 16% | 41% | 43% |

The table 1 shows that 20%, or about 5 participants have good knowledge, 41% or about 12 participants have sufficient knowledge, and 43%, or about 13 people have poor knowledge. Therefore, it is necessary to make efforts to increase the knowledge of clown mothers about the right complementary feeding. For the next stage, the training stage was carried out for clown mothers by delivering material and techniques for implementing counseling with audiovisual media.



Figure 1. Providing material on stunting

Table 2. Overview of the Results of Filling Out the Final Questionnaire

| F | Knowledge (Category%) | | |
|----|-----------------------|--------|------|
| | Good | Enough | Less |
| 30 | 60% | 40% | 0% |

Based on the table above, it is revealed that 60%, or about 18 participants have good knowledge, and 40%, or about 12 people have enough knowledge. This shows that this activity has a positive impact on partners with the level of knowledge of mothers in terms of providing the right complementary feeding for toddlers.

By the purpose of the implementation of community service, which is located in the Working Area of the Baregbeg Health Center, was directed to increase the knowledge of clown mothers about the right complementary feeding. From the results of the analysis of the situation faced by the partners, there are findings from the initial survey, namely about the knowledge of the clown mother about the right complementary feeding.



Figure 2. Acceptance from partners



To evaluate the level of understanding of the clown mother to the content of the material in this counseling, several questions were given related to the content of the material submitted, and it could be seen here that the level of understanding of the clown mother increased, as seen from the content of the questions and the activeness of the cadres in the question and answer activities.

During the community service activities on the Use of Curesive Audiovisual Media held in the Baregbeg Health Center Working Area Village, the partners always showed a positive attitude and were able to receive explanations well. This shows that this activity is accepted and beneficial for participants so that mutual benefits are formed. The success of this activity is certainly influenced by several things and the most important thing is the contribution of partners during the activity and the active role of partners during the implementation of the activity from the beginning to the end of the activity. The contribution of partners in this activity includes the following providing assistance in providing facilities and infrastructure for the implementation of activities, gathering participants in activities, and assisting with licensing with local authorities.

CONCLUSION

There was an increase in the knowledge of clown mothers about the right complementary feeding in the Baregbeg Health Center Working Area, Ciamis Regency after being given counseling using Curesive Audiovisual Media. The clown's mother seemed enthusiastic about the modification of the right complementary feeding recipe. It is hoped that this counseling media can be replicated to increase the knowledge of clown mothers so that they can implement knowledge about this appropriate complementary feeding in meeting the nutritional intake of babies under 2 years old.

Limitations and Future Direction

The limitation of this community service is that the number of respondents attending is not according to the invitation and the counseling media must always use electricity and infocus devices and speakers.

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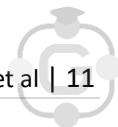
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Statement and Declarations

Suminar R., and other members contributed during the lecture to the community. All authors confirm the availability of data and materials. There is no conflict of interest among the authors. Each author contributed his expertise in the field of nutrition and child development to this community service. This community service complies with ethical standards and guidelines.

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