# EDUCATION-BASED INTERVENTION ONFEEDING PRACTICES OF MOTHERS WITH STUNTED CHILDREN AT AGE 6-24 MONTHS

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## Abstract

Objective: Stunting increases in Indonesia because the practice of complementary feeding has not met the UNICEF program standards. Nutrition education is one of recommendations to overcome mothers' feeding practice. This study aims to influence the educational-based interventions on maternal eating practices in Paga Village. Method: This study was quasi-experimental research designed with one pre-test and post-test group, and without control group. The sample of this study involved 45 respondents selected by a total sampling technique. The feeding practices were measured through a questionnaire. The intervention was given for three times. The data were analyzed by employing paired sample t-test. Result**:** There is an effect of education-based intervention interventions on the feeding practice of companion breast milk (P 0.00; T-5.223). Changes in better feeding practice occurs by fulfilling points of feeding practice program. Conclusion: This intervention can be an alternative for health workers to continue promote and for the mothers to apply feeding practice programs.

**Keywords: Education-Based Intervention, Feeding Practice**

## Introduction

Complementary food with breastfeeding refers to nutritious food and beverages given to infants or children aged 6-24 months to meet nutritional needs other than breast milk. Companion breast milk is food given to babies aged 6 months or more because breast milk no longer meets the baby's nutritional needs.

According to the World Health Organization (WHO), complementary food should be given after the child is 6 months old and this feeding continues until 24 months because during that period the production of breast milk (breast milk) decreases. Consequently, the nutrition supply from breast milk no longer meets the child's increasing nutritional needs. In particular, it is explained that knowledge and practice are the main obstacles for mothers with lack of understanding in complementary feeding[1]. Nutritional intake in children aged less than five months is very important to support the baby's growth according to the growth chart. Therefore, growth faltering that can cause stunting does not occur. In 2017, 43.2% of Indonesian children under five experienced an energy deficit; while 28.5% experienced a mild deficit. Meanwhile, the cases of protein adequacy indicate that 31.9% of children under five had a protein deficit, and 14.5% had a mild deficit. The 2018 basic health research report shows that the nutritional status of stunted children in Indonesia reached 17% in 2018. Meanwhile, the proportion of children under five with stunting in the provincial level shows that the highest case occurred in Nusa Tenggara Timur by reaching 29.5%. This condition urgently requires attention.

A study by Unicef Indonesia proposes various obstacles causing the high incidence of stunted children aged 3-5 years in Indonesia. Nutrition education is a part of health education activities, and is defined as a planned effort to change the behavior of individuals, families, groups, and communities in the health sector. It is expected that the provision of educational interventions on nutrition can increase mothers' knowledge and feeding practices of

complementary foods; as a result, the mothers can provide nutritious food and the children can meet their nutrition needs with the quality and quantity of complementary foods of breast milk program[2]. Nutrition education for mothers is one of the recommendations of Unicef Indonesia to alleviate stunting in Indonesia. Nutrition education can be conducted individually or in groups[3].

Based on this background, the researchers are interested in examining the effects of providing education-based interventions on the feeding practice of complementary foods of breast milk program by mothers to improve stunted children'ss nutrition in Paga village, Paga sub-district, Sikka district. Thus, this research is expected to be a reference and consideration to determine policies related to nutrition issues, especially for stunted children.

## Method

This study employed a quasi-experimental research design with a one pre-test and post-test group. The design of this study only conducted intervention in one group without comparison. The effectiveness of the treatment was assessed by comparing the pre-test and post-test scores. Respondents of this study were 45 mothers with stunted children. The samples were selected through a total sampling technique.

## Results

This research employed a quantitative research method with a quasi-experimental research design, one pre-test and post-test group, and without control group. The effectiveness of the treatment was assessed by comparing the pre-test and post-test scores. This study involved 45 respondents. The data analysis reveals the following results.

**Table 1**
**The Effects of Education-Based Interventions on Feeding Practice of Companion Breast Milk**.

| Feeding Practice | Mean ± SD | P value |
|---|---|---|
| Feeding practice (pre-test) | 37.73± 11.46 | 0.000 |
| Feeding practice (post-test) | 43.04± 12.07 | |
| t count: 5.223 | | |
| t table: 1.680 | | |

The results obtain t value -5.223> from t table -1.680 with sig 0.000 in which these numbers are less than the limit of 0.05 research error. These results indicate the provision of education-based interventions has a strong influence on mothers' feeding practice as the companion of breast milk. Meanwhile, the mean value of pre-test and post-test shows that positivity of the post-test is much higher than that of the pre-test. This shows that the provision of education-based interventions has a positive impact because it can change the mother's behavior with better companion breast milk feeding. Meanwhile, the mean values of pre-test and post-test show that positivity of the post-test is much higher than the pre-test. This shows that the provision of education-based interventions has a positive impact because it can change the mother's behavior with better companion breast milk feeding. This intervention can be an alternative to overcome the stunting in children under five in Sikka Regency, especially in Paga Village.

## Discussion

This study reveals that there is a difference in the proportion of knowledge after the intervention. This difference in proportion indicates that the intervention brings effects and increases the mothers' practices of offering complementary breast milk. This hypothesis is proved through the T test, and the test obtains a value of -5.223> from table -1.680 with a number of 0.000 which is smaller than the 0.05 limit of research error. These results indicate that the education-based interventions bring strong influence on the practice of mothers 'offering complementary

breast milk. Meanwhile, the mean value of the pre-test and post-test shows that the positive ranking of the post-test is much higher than that of the pre-test. This shows that education-based intervention is positive because it can change the mothers' behavior to provide better complementary breastfeeding. The results of this study are in line with those who state that there is a significant difference between the pre-intervention and the practice intervention of mother's offering food to stunted toddlers[4]. Meanwhile, states that education affects the mothers' feeding practice[5]. In contrast, a study explains that mother's knowledge has no effect on feeding practices. This result is derived from mother's knowledge as well as by social culture in offering eating practices[6]. Therefore, if mothers want to change feeding practice, they can do it by increasing their knowledge through education-based interventions and paying attention to other aspects, such as social culture.

## Conclusion

Education-based interventions have an effect on companion breast milk feeding practices. This intervention can be an alternative for health workers to continue promote and for the mothers to apply feeding practice programs.


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