THE CORRELATION FACTORS OF CHILDREN UNDER-FIVE'S MOTHER PARTICIPATION TO WEIGHT WEIGHING TO MATERNAL AND CHILD HEALTH CENTER IN BANTEN 2017

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ABSTRACT

Background: The percentage of bases weighing (D/S) of the posyandu in Cilaja Village in 2017 is still low in 33.6%. **Objective:** To know the relationship of knowledge, Kaders support, and support of community leaders to the participation of mothers to weigh toddlers to the posyandu in Cilaja Village. **Research Method:** Descriptive researched using cross sectional researched design. The sample is taken by means of calculation amounting to 70 people, mothers who has toddlers aged 6-32 months. Chi Square tests to find out the relationship between knowledge variables, Kaders support, and support of community leaders on the participation of mothers. **Results:** The statistical test showed 44.3% knowledge level of the good mother, 72.9% of respondents never got support from Kaders, and 70% of respondents ever got support from community leaders. A Very significant relationship between knowledge and participation of mother (p = 0,001), very meaningful relation between support Kaders with mother participation (p = 0,000), and a very meaningful relation between support of public figure with the participation of mother (p = 0,000). **Conclusion and Suggestion:** To increase the scope of weighing to the posyandu need to intensify counselling and motivation of officer to mother toddler.

Keywords: participation, the the posyandu, toddler mother

Introduction

Nutrition status in toddlers needs to get serious attention from parents because malnutrition in this period will cause irreversible damage. Short body size is one indicator of prolonged malnutrition for toddlers. This malnutrition will affect the physical and mental development of children (Atikah Proverawati, 2010).

Based on Riskesdas 2013 data, it shows below the trend of monitoring frequency of growth of children aged 6-59 months in the last six months in 2007-2013 that the weighing frequency ≥4 times slightly decreased from 2013 (44.6%) to 2007 (45.4 %). The percentage of children aged 6-59 months that have not been weighed in the last six months tends to increase from 25.5% (in 2007), 23.8% (in 2010) to 34.3% (in 2013).

Based on the research that has been done by Pamungkas (2009), shows a significant relationship between the level of knowledge of the mother about weight weighing to Maternal and Child Health Center (The the posyandu) with the participation of the mother to the posyandu. The lack of participation in mothers to the the posyandu due to the lack of enthusiasm for mothers to follow a series of activities that are classically the posyandu due to excessive levels of activity. This is in accordance with what is proposed by Poedji Hastuti (2007), one of the factors that encourage the decrease of monitoring of infant growth in the posyandu is due to maternal unity on the benefits of balancing their children in the posyandu.

Weighing activities at the posyandu is intended to monitor the nutritional status of children under five and see the level of community participation. From the health profile of Indonesia 2009, we obtained coverage of toddlers weighing in the posyandu (D / S) of 63.9%, while the target

of D / S coverage was 80%. In Banten province, the coverage is lower at 58.3%. Based on data from Annual Report of Nutrition Program of Puskesmas Majasari Pandeglang found that among the five villages of the work area that the coverage of weighing (D/S) the posyandu in Cilaja Village in 2017 is still low 33,6%.

The coverage of weighing children under five in the posyandu is a reflection of the participation of the community which in this case can not be separated from the role of Kaders as mobilizers and the community with technical guidance from Puskesmas and other related sectors. This is evidenced in a study conducted by Dini Yuliantina in Pandeglang Banten showed that there was a significant correlation between the role of health officer to community participation (D / S) (p = 0,0000 <0,05). There is a significant correlation between the role of community leaders for community participation (D / S) (p = 0.009 <0.05). The active role of health workers and community leaders is needed to increase community participation in the posyandu activities.

Based on the description above, the researcher is interested to conduct research on Factors related to the participation of mother to weigh the toddler to the posyandu is located in Cilaja Village, Majasari, Pandeglang, Banten 2017.

Research Method

The research was conducted on 10 the Posyandus in Cilaja Village, Majasari, Pandeglang, Banten. This research was conducted from early May to August 2017 from the initial survey location to Puskesmas Majasari and the posyandu in Cilaja Village to the research implementation process.

This type of research is analytic observational conducted by using cross sectional studied design. The samples were taken by the binomunal proportion sampling which fulfilled the sample criteria. The population of this study amounted to 425 mothers who had children under three years. A large sample of 70 respondents included the number of respondents dropped out.

All the respondents taken have met the inclusion and exclusion criteria so that it can be included in the study. The inclusion criteria of this study were the respondents recorded in the data in the posyandu Cilaja Village, have children under three years, not in a state of illness and willing to follow the research by signing informed consent form.

The dependent variable is mother participation to weigh toddlers to the posyandu in Cilaja Village. Independent variables are mother's knowledge, Kaders support, and support of community leaders. The data collected in this research consist of primary data and secondary data. Primary data consisted of respondent characteristics including age, education, occupation, and family income. Secondary data obtained from the Ministry of Health, Health Profile of Banten Province, and Annual Report Puskesmas Majasari.

Primary data obtained from the results of structured interviews, interviews and filling questionnaires guided and performed by data collection officers.

Data analysis using SPSS software program. Univariate analysis is conducted to describe the data of subject characteristic and each research variable that is mother knowledge, Kaders support, community figure support, and mother participation to weigh toddlers to the posyandu. Bivariate analysis with Chi Square tested to know the relationship of knowledge, Kaders support, and support of community leaders with the participation of mother to weigh toddler to the posyandu.

Results and Discussion

Result of research from 10 posyandu with amount of sample counted 70 respondent. Univariate variables consist of

repondent characteristics of mother's age, mother's job, mother's education level, and family income. Independent variables are mother's knowledge, cadre support, and support of community leaders, and the dependent variable is mother's participation. Bivariate analysis with Chi Square test is the relationship of mother's knowledge with participation, relationship of cadre support with participation, and support of character with participation. From the research results can be seen in the following table:

Table 1 Respondent Characteristics

Characteristics	n	%
Age Group		
Age 19-29 year	63	90,0
Age 30-45 year	7	10,0
Job Status		
Housewife	62	88,6
Entrepreneur	3	4,3
Pns	5	7,1
Level of Education		
Primary school	29	41,1
Junior high school	21	30,0
Senior high school	13	18,6
College	7	10,0
Family Income		
Low (<UMK)	43	61,4
High (≥UMK)	27	38,6

In Table 1 the age groups shows that the age of respondents in urban village Cilaja Village is in the young age group 19-29 years with the number of 63 people (90.0%)s. These results indicate that respondents who are active in the posyandu activities are mothers who belong to the young age group, this is because the use of health is more exploited by people who are very young, it is proven in research conducted by the author more mothers who are age the new young have their first child.

The results of this study are in line with that conducted by Makmur et.al (2008) on the use or utilization of health services more utilized by people who are very young than old age. Similarly, research conducted Sugiharti (2007) that the posyandu utilization more in young age

grouped that is equal to 67.1% compared with old age group that is 54.4%.

Based on the characteristics of the work showed that the respondents of the research mostly did not work as housewife as much 62 people (88.6%)s. This can be influenced from the low education of respondents so that respondents prefer to be housewives only. This is in line with research conducted by Indra (2009) which shows that most respondents are as housewives with a percentage of 61%. Work be able to be one of the obstacles in mother activity in the posyandu activity because work is one of income source so that it will be more focused than the posyandu activity (Widagdo L, 2009).

Based on the results of research, the level of education of respondents shows that there are variations in education level. Education of mothers in general is still low with most elementary education that is as much as 29 people (41.4%) with the highest education of 7 colleges (10.0%). This result is not in line with research conducted by Indra (2009) which shows that the highest level of education is at universities of 47%. According to Notoadmodjo (2007), education level is a predisposing factor for a person to behave so that educational background is a very fundamental factor to motivate health behavior and become a reference to learn a person.

Family income shows that most respondents have family income below minimum wage of Pandeglang as many as 43 people (61.4%), while respondents who have family income ≥UMK as many as 37 people (38.6%). This is because most respondents only rely on income from their husbands. Based on the results of in-depth interviews with respondents, the average husband respondents work as construction workers, motorcycle taxi drivers, and gardeners. So the income of most respondents was still below the

Table 2 Distribution of Respondent Univariate

Variable	n	%
Knowladge		
Good (>80)	31	44,3
Enough (60-80)	28	40,0
Less (<60)	11	15,7
Kaders Support		
Ever	51	72,9
Never	19	27,1
Support Figure		
Ever	49	70,0
Never	21	30,0
Participation		
Less (<4 times)	36	51,4
Good (≥ 4 times)	34	48,6

In Table 2 shows most respondents have good knowledge as many as 31 people (44.3%). In harmony with Syamsul (2011), that the greatest percentage of good maternal knowledge (57.5%) compared with knowledge of poor mothers (42.5%). This is also in line with the ultimate research (2008), that the greatest percentage is in the knowledge of good respondents 53.1% compared with the knowledge of respondents who are not good 46.9% about the behavior of visiting the posyandu. Likewise with Noor (2009), that the largest percentage is in the knowledge of good respondents 58% compared with knowledge of 42% poor respondents about the mother's motivation to bring toddlers to the posyandu.

Based on the results of the study showed that Kaders who have given encouragement or encouragement to the mother to weigh her child to the posyandu is greater that is 72.9% compared to Kaders distribution that never gives coaching that is 27.1%, this means that respondent who actively participates in the posyandu activity ever get support or invitation from a Kaders or have participated in group discussions and counseling. This is in line with the study conducted by Suhariati (2013), that the role of the posyandu's Kader is very good as many as 40 respondents (58.0%) and 29 respondents (42.0%) said the role of

Kaders is good in improving motivation of visiting the mother of toddlers.

However, there is a research that is not in line with the research conducted by Hesti (2010), that the role of the Kaders is much less than the role of good Kader that is 31 respondents (57.4%), and the role of good Kader is 23 respondents (42.6%) , this is due to the performance of less optimal Kaders such as not making visits to the homes of mothers who did not visit the posyandu and rarely held extension activities.

Distribution of support figures shows that support from community leaders who have given encouragement to the mother to weigh her child to the posyandu is bigger that is 49 people (70%) compared with the distribution of character who never give encouragement. This result is in line with that done by Achmad (2017), that the distribution of frequency of support of public figures to the mother of toddlers in weighing her child to the posyandu well 162 (81.8%) and bad is 36 (18.2%). This is because the respected and respected public figures never give invitations to mothers so that mothers who have ever received invitations or encouragement from community leaders have greater participation rate.

Table 3 Knowledge Relations with Respondents' Participation

Maternal Knowladge	Participation				P-Value
	Less		Good		
	n	%	n	%	
Less	10	27,8	1	3,0	
Enough	17	47,2	11	32,3	0,001
Good	9	25,0	22	64,7	

Based on Table 3 indicates that the respondents who have good knowledge level with good participation are the most dominant, that is 22 people (64,7%) and the respondent have less knowledge and the participation is less than 10 people (27,8%). The result of the statistical test

shows that the value of p-value 0.001 means there is a correlation between the knowledge of respondents with the participation of respondents to weigh the toddler to the posyandu.

This result is consistent with Mila's research (2013) states that there is a correlation between mother's knowledge with the participation of mother bringing toddler to the posyandu (p-value 0,001), but not in line with research conducted by Rahayu (2016) that there is no significant relationship between knowledge of mother's behavior in conducting visit to the posyandu (p = 0,43).

According to the Green theory which states that there is a relationship between knowledge with one's behavior and reinforced by Rogers's statement (in Notoatmodjo) which states that knowledge is a very important domain for behavior formation, and knowledge-based behaviors will be lasting rather than behavior that is not based on knowledge.

To improve the knowledge of mothers about the benefits of weighing in the posyandu, it is necessary for the participation of health officers and Kaders more intensively in providing counseling, as well as holding group discussions.

Table 4 Relationship of Kader Support with Respondents' Participation

Kaders Support	Participation				P-Value
	Less		Good		
	n	%	n	%	
Never	18	50,0	1	3,0	0.000
Ever	18	50,0	33	97,0	

Table 4 shows the respondents who received support or invitation or guidance from the Kaders and had the most dominant participation of 33 people (97.0%) and respondents who never received support from the Kaders and the participation was less than 18 people (50, 0%). The statistical test results between Kaders support and maternal participation have a relationship with p-value 0,000 meaning that there is a significant correlation between support of Kaders with the participation of respondents in Cilaja Village. Support of Kaders in the posyandu area of Cilaja Village that has been done to increase the respondent's participation is by visiting mother toddler to invite mothers to weigh their children to the posyandu, holding the group discussion about the importance of weighing children to the posyandu, and counseling.

These results are in line with the research by Hesti (2010), that there is a relationship between the role of Kaders and the utilization of the posyandu for mothers with children under five in Gantungan Village, Makamhaji Sukoharjo (p-value 0.0001). However, it is not in line with the research conducted by Tri (2012) that there is no relationship between the support of the posyandu Kaders with the visit of the mother toddler to the posyandu (p = 0,535). This is able to be due to the performance of less optimal Kaders such as not making visits to the homes of mothers who did not visit the posyandu and rarely held extension activities.

The role of the posyandu Kaders who always tell the schedule of the next visit will have an impact on the toddler so she regularly takes her child to the posyandu. The Kaders visited the homes of mothers who did not visit on the opening day of the posyandu. It was proven that most respondents who said they had received support from the Kaders had high participation to visit the posyandu.

Therefore, it is expected that the Kaders must apply for their role during the posyandu activities such as service at the posyandu that can satisfy the visitor of the guidance, when the Kaders registration is done kindly to the posyandu participants, before the opening day of the posyandu Kaders inform the schedule of visit to the posyandu on the mothers, and the role of Kaders to provide support to the toddler mother to routinely come to the posyandu so that mother participation is increasing.

Table 5 Relationship of Community Leadership Support with Respondents' Participation

Leadership Support	Participation				P-Value
	Less		Good		
	n	%	n	%	
Never	19	52,8	2	5,9	0,000
Ever	17	47,2	32	94,1	

Table 5 shows the respondents who received support from community leaders and had the best participation of 32 people (94.1%) and respondents who never received support from public figures and participation of fewer than 19 people (52.8%). Support of community leaders that have been done is in the form of an invitation or encouragement to the mothers to weigh their children to the posyandu or to participate community leaders in the posyandu activities. Community leaders who provide support and encouragement to mothers are the head of RT. The statistical test result between the support of the figures with the participation of the respondents has a relationship with p-value 0.000 means there is a relationship between the support of the figures with the participation of respondents in Cilaja Village.

This is in line with research conducted by Dini (2013) that there is a significant correlation between the role of community leaders for community participation (D / S) (p = 0.009 <0.05). But there is research that is not aligned that research conducted by Jayanti (2010) that there is no relation between public figure with visit mother of a toddler to the posyandu (p = 0,264).

According to Notoatmodjo (2005) that to behave healthfully, people sometimes need not only positive knowledge and attitude but also need example behavior of community leaders, traditional leaders and health workers. So, if the activities organized by the community see that the respected community figures participate in these activities then they will be interested

also to participate in it. Thus, in the posyandu, Cilaja Village community leaders need to be advocated by health workers to encourage and motivate toddler mother to weigh her child to the posyandu every month.

Conclusion and Suggestion

There is a significant correlation between mother's knowledge (p-value 0,001), Kaders support (p-value 0,000), and support of community figure (p-value 0,000) with a participation of mother to weigh toddler to the posyandu.

Health workers (nutritionists and midwives) and Kaders are more intensive in providing information and holding group discussions to mothers with toddlers. As well as for community leaders can participate in the posyandu activities for increased community participation to follow the posyandu activities.

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