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Workshop on Making Complementary Foods as an Effort to Prevent Stunting in Sukoraharjo Village, Kedamean District, Gresik Regency

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A B S T R A C T

Stunting is a condition in which a child's body fails to grow due to chronic malnutrition so that the child's life is too short. The prevalence of stunting in toddlers according to the World Health Organization (WHO) is the country with the third highest prevalence in the Southeast Asia/South-East Asia Regional (SEAR), the prevalence of stunting in Indonesia in children under five in 2017 was 36.4% and in 2018 it was 30.8%. One of the prevention of stunting can be provided by providing companion food from 6-24 months. By holding a workshop related to making complementary foods to prevent stunting, this workshop aims to provide insight to the residents of Sidoraharjo about the importance of knowledge in preparing complementary foods, and how to make them, as well as preparing the complementary food process. 87.8% and knowledge increase 16.2%

INTRODUCTION

Breast milk is the main source of nutrition for babies who cannot consume solid foods (Franciska 2011). Breastfeeding for infants is recommended until the baby is 2 years old. After reaching the age of 6 months, babies are given complementary foods (complementary foods)(Salsabila et al. 2021). However, breastfeeding is recommended to continue until the age of 2 years. There are many reasons why exclusive breastfeeding of babies for 6 months is so important(Setyaningsih and Agustini 2014). Milk produced naturally by the mother's body has the nutrients needed by your beloved baby. In addition, exclusive breastfeeding will also provide many benefits for mothers (Rachmawati 2014).

Stunting is a condition in which a child's body fails to grow due to chronic malnutrition so that the child's age is too short(Masruroh et al. 2022). The prevalence of stunting in toddlers according to the World Health Organization (WHO), the country with the third highest prevalence in the South-East Asia Region (SEAR), the prevalence of stunting in children under five in Indonesia in 2017 was 36.4% and in 2018 was 30.8% (World Health Organization (WHO) at the Ministry of Health of the Republic of Indonesia, 2018(Harahap, Budiman, and Widodo 2018).

The short-term impact of stunting is an increase in morbidity and mortality, cognitive, motor, and verbal development that is less than optimal in children. children, and increased health care costs. Meanwhile, the long-term impact is non-optimal posture as an adult (shorter than usual), increased risk of obesity and other diseases, decreased reproductive health, less-than-optimal learning ability and performance during school, and suboptimal productivity and work capacity (Srivastava 2019).

Complementary Foods for Breast Milk (MPASI) are transitional foods from breast milk to semi-solid foods that contain nutrients, given to children aged 6–24 months to meet their nutritional needs other than breast milk (Sahidun and Abdullah 2020). The purpose of complementary breastfeeding (MPASI) is as a complement to breast milk(Utami; 2019). The introduction and administration of complementary foods must be carried out gradually, both in form and amount, according to the baby/child's digestive ability. Short-term risks are reduced breast milk consumption, gastrointestinal blockage, diarrhea and infections. Meanwhile, the long-term risks are obesity and immune disorders (Lelo and Liutani 2023).

From the series of existing problems, this community service is by holding a workshop related to making complementary foods to prevent stunting, this workshop aims to provide insight to the residents of Sidoraharjo regarding the importance of knowledge in preparing complementary foods, how to make, and prepare the complementary food process.

METHOD

The place took place at the Sidoraharjo Village Hall, Damai District, Gresik Regency on Friday, July 22, 2022, at 08.30. Target audiences. PKK Cadre / Resident of Sidoraharjo Village, Damai District, Gresik Regency. Method of Service. Lecture Method, Q&A, Discussion and Demonstration of Making Complementary Foods. Success Indicators. Participant Satisfaction is more than 85%, Improvement of Pre and Post Test. Evaluation method. Posters and brochures will be made as evaluation materials for the level of awareness of residents on the importance of complementary foods.

RESULT AND DISCUSSION

The content of the presentation given by the speaker is related to several things that need to be known, namely the age of the first 6 months, give your baby exclusive breast milk (do not give food, or other drinks, even water)(Duncan, & D. 2017)When the baby is 6 months old, breastfeed as often as the baby wants, day and night, breast milk remains the most important food until the baby is 2 years old, After 6 months, children should get Vitamin A capsules twice a year. Consult with a healthcare professional (Lestari, Lubis, and Pertiwi 2014). And finally, give a packet of nutrients to ready-to-eat meals for one meal. Sowing nutrition is given to toddlers aged 6-12 months, every two days (Nurlaila 2020).

Breast milk is the best food for 6 months, and the right time to give complementary foods (Debi Parwito Sari & Asri Widow release 2020)is Give your baby 1-2 teaspoons of soft food, three times a day. Gradually increase the frequency, amount, concentration and variety of food, Enrich baby porridge with breast milk, softened nuts, fruits and vegetables, and start giving animal food as early and often as possible (Kurniawati and Hayati 2020), Baby needs oil/fat (no more than 1⁄2 teaspoon per day), Adding oil is not necessary if the child eats fried foods(Herlistia and Muniroh 2016).

In preparing several stages that need to be prepared and stored safely (Putri et al., 2018) as follows: Wash hands with soap before preparing food, Wash all bowls, glasses and tableware with soap. Stays covered until use (Nuradhiani, Koerniawati, and Amaliah 2022), Prepare food in a clean, closed place, Serve food immediately after cooking, Heat food that has been stored outside for more than an hour (Arsyati & Rahyu 2019), Babies slowly learn to eat on their own, adults should encourage children to eat enough and make sure food stays clean, Feed in a clean environment, Feed More as the baby grows, Start breastfeeding (a) at 6 months of age, Type of food; refined porridge, mashed foods How often: 2-3 times a day Amount: 2-3 teaspoons per meal (b) For ages 6-9 months Type of food: mashed food, how often: 2-3 times a day and 1- 2 snacks and How much: 2-3 teaspoons per cup (250ml per meal) (c) Age 9-11 months, Type of food: chopped or mashed foods and foods that children can hold, How often: 3-4 times per day and 1-2 snacks How much: at least 250 ml cups per meal (d) From 12-23 Months Age Type of food: family meals, food cut or crushed when needed, How often: 3-4 times a day and 1-2 breaks, How much: for 1 cup at each meal.

Figure 1. Meeting with Village Officials Related to the Determination of the Theme of Preventing Stunting in Sidoraharjo Village

Figure 2. Fliyer Stunting to Promote Stunting Prevention Workshop in Sidoraharjo Village

Figure 3. Stunting Poster for Stunting Prevention in Sidoraharjo Village

Table 1 Characteristics of Participants of the Complementary Supplement Making Workshop

Yes	Characteristic	Sum	Presented
	Age		
1	Age < 25	6	21.4
2	Ages 25-35	12	42.9
3	Age 36-45	5	17.9
4	Age > 45	3	10.7

	Work		
1	Housewives	24	92.0
2	Worker	2	8.0
	Number of Children		
1	Not having children	4	15.0
2	One	12	46.0
3	Two	7	27.0
4	More than two	3	12.0

Table 1 provides information that this activity was attended by cadres of Sidoraharjo residents who were dominated by mothers aged 25-35 years, with the profession of housewives who had children. There are two success rates in this workshop, namely the satisfaction rate of more than 85% while the level of improvement in understanding is 15% as seen in Tables 2 and 3.

Table 2. Satisfaction Level of Implementation of MPASI Workshop

No	Satisfaction Level	Satisfaction
1	Presentation of the material	81.2%
2	The material presented is clear	83.4%
3	Easy to understand material	89.2%
4	Props are used according to the needs	83.8%
5	Enough time	87.8%
6	Equipment Materials	89.2%
7	How to present	93.2%
8	Attractive complementary food brochure	92.1%
9	Complementary Foods Poster	90.1%
10	Awareness brochures and posters	87.6%
Average Satisfaction		87.8%

Table 2 provides information that delivery, clarity and understanding provide a fairly good satisfaction value. Meanwhile, demonstrations involving timely workshop participants related to the implementation were also considered good. Meanwhile, the interesting interactive follow-up plan involving participants and presenters is also well valued. Broadly speaking, the entire implementation of the workshop was considered good. To measure the success of this workshop activity, participants were given the

opportunity to fill out a pre test and post test. The pre-test is filled out before the workshop is carried out. Meanwhile, the post test is filled out after conducting a workshop. Here are the results of the pretest and post test scores.

Table 3. Pre and Post Test Results of MPASI Workshop Participants

No	Question	Grade Point Average	
		Pre-Test	Post Test
1	New knowledge about complementary foods	74.2%	82.2%
2	How to make complementary foods	77.5%	84.6%
3	Types of solid foods	76.3%	81.8%
4	Breastfeeding time and complementary foods for breastfeeding	65.0%	89.2%
5	Relationship between Participants and Speakers	66.2%	91.3%
6	Complementary Textures by Age	61.8%	82.1%
7	The Role of Parents in the Importance of Complementary Foods	66.7%	86.1%
8	Ingredients for making complementary foods	62.2%	83.5%
9	Nutritional value of complementary foods	69.4%	86.4%
10	Essential nutritional content of complementary foods	67.5%	82.1%
Average		68.7%	84.9%

Table 3. providing information that the increase in the satisfaction of workshop participants was 87.8% > 85% so that this workshop was declared successful.

Figure 4. Stunting Prevention Workshop Participants

Figure 4. It was a workshop participant consisting of women from Sidoraharjo village, Kedamean Gresik District.

Figure 5. Presentation delivered by the speaker

The speaker was the KKN Group 18 of Nahdlatul Ulama University Surabaya. The following speakers are (1) Aditya Rizky Alfaridzi, Department of Medical Education, Medical Faculty, Nahdlatul Ulama University Surabaya, 60237, East Java, Surabaya Indonesia, (2) Novianti Fatimahtus Zahro, Department of Nursing, Nursing and Midwifery Faculty, Nahdlatul Ulama University Surabaya, 60237, East Java, Surabaya Indonesia, (3) Dewi Sinta Nuriatul Imamah, Department of Midwifery, Nursing and Midwifery Faculty, Nahdlatul Ulama University Surabaya, 60237,

Figure 6. Demonstration of Making Nutritious Complementary Foods

Stunting prevention can be prevented by one of them is providing nutritious food rich in calories and fiber. The demonstration of making nutritious food was very enthusiastically attended by the workshop participants

CONCLUSION

The workshop on making complementary foods which was attended by 26 PKK mothers in Sidoraharjo Village as an effort to prevent stunting had a positive impact on the residents who participated in the activity, participant satisfaction was 87.8% and the pre and post test scores increased by 16.8%. This activity produced 3 Intellectual Property Rights in the form of posters, flyers and brochures.

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