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The Relationship between Maternal Knowledge of Complementary Foods with the Nutritional Status of Toddlers

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Abstract. The results of data obtained from the Tangeban Inpatient Health Center of Masama District in the last three years, namely in 2015 showed that out of 269 toddlers, the prevalence of toddlers who weighed below normal was 32 people (11.9%), height below normal was 53 people (19.8%). In 2016, out of 489 under-fives, the prevalence of under-fives who weighed below normal was 73 people (14.9%), height below normal was 73 people (14.9%). Whereas in 2017 there were 493 toddlers, the prevalence of toddlers whose weight was below normal was 73 people (14.8%), height below normal was also 75 people (15.3%). From the target to be achieved by health workers Tangeban Inpatient Health Center Masama District is <1.0%. Or even 0%. The research design used is Analytical Observational Research, where the researcher only makes observations or observations of the research subject and looks for data related to the research without intervening in the variables to be studied. The type of research design used is Cross sectional design, namely by conducting data collection, measurement or observation of data on independent and dependent variables only once at one time at the same time. the number of samples used was 60 mothers of toddlers. The results of the study There is a relationship between maternal knowledge variables and children's nutritional status at Tangeban Health Center. This is evidenced from 41 respondents whose nutritional status is good, there are 33 respondents who have good knowledge and there are 8 respondents who have poor knowledge. While out of 19 people whose nutritional status is not good, there are 4 respondents who have good knowledge and there are 15 respondents whose nutritional knowledge is still classified as low or not good.

Keywords: Relationship, Maternal Knowledge, Complementary Feeding, Nutritional Status of Toddlers

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1. Introduction

The onset of nutritional problems is multifactorial, therefore the approach and countermeasures must be from several factors. These include lack of education, parental knowledge, motivation, and participation. The lack of education in parents, especially in mothers, will affect knowledge so that children can experience nutritional problems, the motivation referred to here is the amount of encouragement of parents to know the magnitude of the role of nutrition for the health of their children. Participation here is the participation of parents to play an important role in fulfilling breastfeeding needs and maintaining the health of their children so that they get balanced nutrition (Sulistyoningsih Christon, 2015).

Meeting the nutritional needs of infants is different from meeting the nutrition of children and adults. The form and type of food given must be adjusted to the age and also the function of the digestive tract. Infants aged 0-6 months are sufficiently given breast milk without being accompanied by drinks or other foods. The age and also the digestive tract of babies at the age of 0-6 months are not ready to receive additional food, in addition to avoiding nutritional problems in babies when accompanied by additional food. Breast milk alone with regular administration can meet the needs of babies aged 0-6 months and still continue to be given until the baby is 24 months old. Infants begin to receive complementary foods after 6 months of age with the form and type of food given gradually, according to age (Sulistyoningsih 2015).

2. Research Method

The research design used is Analytical Observational Research, where the researcher only observes or observes the research subject and looks for data related to the research without intervening in the variables to be studied. The type of research design used is Cross sectional design, namely by collecting data, measuring or observing data on independent and dependent variables only once at one time at the same time.

The research tool used in this study was a questionnaire. The questionnaire is a measuring tool in the form of a questionnaire or questionnaire with several questions. This measuring instrument is used when the number of respondents is large and not illiterate. In this study, researchers used a closed questionnaire. A closed or structured questionnaire or questionnaire where the questionnaire is made in such a way that the respondent only has to choose or answer the existing answers (Hidayat, 2012).

3. Results And Discussions

a. Results

Bivariate analysis was conducted to see the effect of independent variables, namely Maternal Knowledge (X1), and MP ASI (X2) on the dependent variable, namely Nutrition Status (Y). Based on the results of chi-square analysis conducted using

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SPSS, the following analysis results were obtained:

1. Relationship between Maternal Knowledge about Nutrition and Nutritional Status.
   Based on the analysis conducted, the relationship between maternal knowledge about nutrition and the nutritional status of children was obtained as follows:
   Table 1. Relationship Between Maternal Knowledge About Nutrition With Children's Nutritional Status

Knowledge	Nutrition Status		Total
	Good	Not good	
Good	33	4	37
Not good	8	15	23
Total	41	19	60

   Source: Copied from the results of Chi-Square Analysis

   Based on table 1 above, it can be seen that of the 41 respondents whose nutritional status is good, there are 33 respondents who have good knowledge and there are 8 respondents who have poor knowledge. While out of 19 people whose nutritional status is not good, there are 4 respondents who have good knowledge and there are 15 respondents whose knowledge of nutrition is still relatively low or not good.
2. Relationship between MP Breastfeeding and Children's Nutritional Status
   Based on the analysis, the relationship between breastfeeding and children's nutritional status is as follows:
   Table 2: Relationship between breastfeeding and children's nutritional status

Breastfeeding	Nutrition Status		Total
	Good	Not good	
Good	34	7	41
Not good	7	12	19
Total	41	19	60

   Source: Copied from the results of Chi-Square Analysis

   Based on the table 2 above, it can be seen that out of 41 respondents whose nutritional status is good, there are 34 respondents whose breast milk MP is good and there are 7 respondents who provide breast milk MP is not good. Whereas from 19 people whose nutritional status was not good, there were 7 respondents who provided breast milk well and there were 12 respondents who provided breast milk less well.

b. Discussion
   Bivariate analysis was conducted to see the relationship between independent variables, namely Knowledge (X1) and MP ASI (X2) with the dependent variable, namely Nutritional Status (Y). Based on the results of chi-square analysis conducted using SPSS, the following analysis results were obtained:
   1. Relationship between Knowledge about Nutrition (X1) and Nutritional Status (Y)
      Based on the results of the analysis that has been done and has been described in table 5.6, it can be seen that the relationship between maternal knowledge about nutrition

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and nutritional status is very close or between knowledge and nutrition and nutritional status in the Tangeban Health Center working area. This is evidenced from the data in table 1. of the 41 respondents whose nutritional status is good, there are 33 respondents who have good knowledge and there are 8 respondents who have poor knowledge. Meanwhile, of the 19 people whose nutritional status was not good, there were 4 respondents who had good knowledge and there were 15 respondents whose knowledge of nutrition was still relatively low or not good.

Thus it can be said that one of the factors associated with the nutritional status of children is the level of maternal knowledge about nutritional content. This means that the better the mother's knowledge about nutrition, the better the child's nutritional status and vice versa.

2. Relationship between breast milk MP (X2) and children's nutritional status (Y)

   Based on the results of data analysis that has been described in the previous table 2, it can be said that MP ASI has a relationship with the Nutritional Status of Children. This is evidenced by the 41 respondents whose nutritional status is good, there are 34 respondents whose MP ASI is good and there are 7 respondents who provide poor MP ASI. Meanwhile, out of 19 people whose nutritional status was not good, there were 7 respondents who provided breast milk well and there were 12 respondents who provided breast milk poorly.

   This description shows that one of the factors that affect the nutritional status of children is the provision of MP ASI. Therefore, if MP ASI is not given properly, the child's nutritional status will remain poor.

4. Conclusion

Based on the results of research and data analysis discussed in the previous chapter, the following conclusions can be drawn in this study:

a) There is a relationship between the variable Maternal Knowledge (X1) with the Nutritional Status of Children at Tangeban Health Center (Y). This is evidenced from 41 respondents whose nutritional status is good, there are 33 respondents who have good knowledge and there are 8 respondents who have poor knowledge. While out of 19 people whose nutritional status is not good, there are 4 respondents who have good knowledge and there are 15 respondents whose knowledge of nutrition is still relatively low or not good.

b) There is a relationship between the variable provision of MP ASI (X2) with the Nutritional Status of Children at the Tangeban Health Center (Y), this is evidenced by the 41 respondents whose nutritional status is good, there are 34 respondents whose MP ASI is good and there are 7 respondents who provide MP ASI is not good. Meanwhile, out of 19 people whose nutritional status is not good, there are 7 respondents who provide good breastfeeding and there are 12 respondents who provide poor breastfeeding.

c) Based on the chi-square analysis, it was also found that both independent variables,

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namely knowledge (X1) and breastfeeding (X2) have a close relationship with children's nutritional status (Y). This is evidenced by the probability values of the two independent variables (X1 and X2) are all smaller than the alpha value (0.05).

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