

Edukasi Bauran Pada Masa Pandemi Covid-19 Tentang Pemberian Makan Bayi Dan Anak Kepada Ibu Sejak Masa Antenatal Terhadap Status Gizi Bayi

INTISARI

Latar belakang: Hasil *review* terbaru mengenai edukasi PMBA selama pandemic covid-19, *WhatsApp* (*online*) menjadi platform utama yang digunakan untuk menyampaikan edukasi. Namun, penelitian lain menunjukkan bahwa edukasi tatap muka tetap dipertahankan (*offline*). Masih terbatas penelitian tentang pengaruh edukasi PMBA yang menggabungkan *online* (melalui *WhatsApp*) dan *offline* selama masa pandemi.

Tujuan: Mengetahui pengaruh edukasi bauran program pada masa pandemi covid-19 tentang pemberian makan bayi dan anak terhadap status gizi bayi

Metode: Penelitian ini menggunakan longitudinal quasi eksperimen. Sebanyak 113 ibu hamil pada trimester ketiga kehamilan dan tinggal di Kabupaten Bantul direkrut dan dimasukkan ke dalam kelompok eksperimen ($n = 57$) atau kelompok kontrol ($n = 56$). Ibu hamil pada kelompok eksperimen menerima video call *WhatsApp* sebanyak tiga kali dari kader, tiga kali konsultasi dengan ahli gizi, dan kunjungan rumah setiap bulan sekali selama 7 bulan. Subjek pada kelompok kontrol mendapat program edukasi PMBA standar dari pemerintah. Variabel pengetahuan, sikap, *self-efficacy* dan praktik PMBA diukur menggunakan kuesioner yang valid dan reliabel. Panjang badan bayi diukur menggunakan infantometer dan Berat badan bayi menggunakan timbangan berat badan digital. Analisis data yang digunakan adalah *Generalized Estimating Equation (GEE)* dan regresi logistik.

Hasil: Mayoritas responden berusia dewasa awal (26-35 tahun), berpendidikan tamat SMA sederajat, ibu rumah tangga, tingkat pendapatan keluarga \geq UMR Kabupaten Bantul Tahun 2022. Perubahan pengetahuan antara kelompok intervensi dan kontrol memiliki beda yang positif yaitu 1,46, begitu juga dengan *self-efficacy* menyusui (3,16), pengetahuan MP-ASI (3,23) dan *Self-efficacy* MP-ASI (2,31). Sedangkan untuk sikap menyusui memiliki antara kelompok intervensi dan kontrol memiliki beda yang negative yaitu -1,29. Responden yang mendapat edukasi bauran berpeluang $\pm 15,5$ kali lebih besar untuk melakukan Inisiasi Menyusui Dini dan berpeluang ± 3 kali memberikan ASI eksklusif dibandingkan dengan kelompok kontrol. Beda perubahan PB/U antara kelompok intervensi dan kontrol terdapat perubahan signifikan sebesar 0,127, sedangkan untuk BB/U tidak terdapat perubahan yang signifikan yaitu sebesar 0,03.

Kesimpulan: Edukasi bauran berpengaruh pada proses perubahan perilaku ibu, praktik PMBA khususnya IMD dan ASI Eksklusif. Edukasi bauran berpengaruh terhadap panjang badan bayi tetapi tidak berpengaruh terhadap berat badan bayi. Edukasi bauran ini dapat digunakan sebagai alternatif pemberian edukasi PMBA kepada ibu sejak masa antenatal, serta menjangkau ibu yang tidak mendapatkan edukasi tentang PMBA sebagai langkah persiapan ibu untuk melakukan praktik PMBA yang benar untuk mencegah terjadinya stunting pada bayi.

Kata kunci: edukasi bauran, PMBA, status gizi bayi, pandemic covid-19

A Blended Education in The Pandemic Covid-19 For Mother from Antenatal on Infant and Young Child Feeding Toward the Nutritional Status of Infants

ABSTRACT

Background: Recent reviews of infant and young child feeding (IYCF) interventions during the outbreak of Coronavirus Disease 2019 (COVID-19), WhatsApp (online) has become the primary platform utilized to deliver IYCF education. However, other studies show that face-to-face educational intervention about IYCF are maintained (offline). To our knowledge, no study has investigated the effect of IYCF education that combines online (via WhatsApp) and offline interventions during the pandemic.

Objective: to determine the effect of blended education during the Covid-19 pandemic regarding infant and child feeding on the nutritional status of infants

Method: This longitudinal quasi-experiment examines the effect of IYCF education through WhatsApp and face-to-face meetings. A total of 113 pregnant women in their third trimester of pregnancy and who are living in the Bantul district are recruited and placed into either the experimental (n = 57) or control group (n = 56). Pregnant women in the experimental group receive a WhatsApp video call three times from cadres, three consultations with a nutritionist, and home visits once each month for 7 months. The subjects in the control group receive the standard IYCF education program. Knowledge, attitudes, self-efficacy and IYCF practices were measured using questionnaires. The infant length measurement using an infantometer and the infant weight using a digital weight scale. The data analysis used is Generalized Estimating Equation (GEE) and multiple logistic regressions.

Result: The majority of respondents were early adulthood (26-35 years old), had a high school diploma or equivalent, housewives, with an average monthly income more than district minimum monthly wage of Bantul Regency in 2022. Changes in knowledge between the intervention and control groups had a positive difference, namely 1.46, as did breastfeeding self-efficacy (3.16), complementary feeding knowledge (3.23) and complementary feeding self-efficacy (2.31). Meanwhile, the breastfeeding attitude between the intervention and control groups had a negative difference, namely -1.29. Respondents who received blended education were ± 15.5 times more likely to initiate early breastfeeding and ± 3 times more likely to provide exclusive breastfeeding compared to the control group. The difference in changes in the Length for age coefficient between the intervention groups was 0.127, which indicated there was a significant effect, while for BB/U there was no significant change of 0.03.

Conclusion: Blended education can have an effect on the process of changing maternal behaviour, IYCF practices, especially IMD and exclusive breastfeeding. Blended education affects the infant length for age but does not affect the infant's weight for age. This blended education can be used as an alternative to providing IYCF education to mothers from the antenatal period, as well as reaching mothers who do not receive education about IYCF as a preparatory step for mothers to carry out good IYCF practices to prevent stunting in infants.

Keywords: blended education, IYCF, infant nutritional status, pandemic covid-19