

ISSN 2581-2386
Vol 1 Agustus 2017

**THE 1ST INTERNATIONAL CONFERENCE IKATAN PERAWAT
MATERNITAS EAST JAVA 2017 (ICH_IPEMI)**

**“INTERDISCIPLINARY INNOVATION AND INTERVENTION
IN HEALTH TO ACHIEVE THE SUSTAINABLE
DEVELOPMENT GOAL (SDG)”**



26-27 AGUSTUS 2017

The ICH_IPEMI Committee 2017

EDITORIAL

Advisors: Prof. Dra. Setyowati, S.Kp., M.App.Sc., Ph.D., DBO., RN

Organizing Committee :

1. Ns. Dhiana Setyorini, M.Kep.Sp.Mat.
2. Dr. Hilmi Yumni, M.Kep., Sp.Mat
3. Ns. Endah Suprihatin, M.kep., Sp.Mat'
4. Ns. Awatiful Azza, M.kep., Sp.Kep.Mat

Editor in Chief:

Dr. Ratna Hidayati., SKp., M.Kep., Sp.Mat.

Editor Member:

1. Dr. Asti M.A., M.Kep., Sp.Mat
2. Dr. Noer Saudah, S.Kep., Ns., M.kes.
3. Diyan Indriyani, M.Kep., Sp.Mat.

TABLE OF CONTENTS

Editorial	i
Committee's WELCOME	ii
Table of Contents	iii
Older First Time Mothers May Have Increase Chances of Living Longer	v
Rose Ak Anak Nanju	
The Impact Of Violence Against Women On Reproductive Health And Child Mortality	vi
Prof. Dra.Setyowati., Skp.,Mn., Phd.	
The role of female in ensuring the success SDG's	vii
Uly Desmarnitas, SKp., MKes., Sp.Mat	
Indonesian's Approach and Localizing of SDG's	viii
Sugeng Eko Irianto, Ph.D	
1 Older First Time Mothers May Have Increase Chances Of Living Longer	1
Rose Nanju, Senior Lecturer, University Malaysia Sarawak	
2 Anemia In Pregnant Women Based On Transcultural Nursing	2-8
Retnayu Pradanie, Esti Yunitasari, Siti Fatonah	
3 Entrepreneurship Training As A Career To Develop Health Worker Efforts To Be Entrepreneurship	9-18
Siti Maryati, Budi Punjastuti, Iswanti Purwaningsih	
4 Vulva hygiene Using Piper Betel Leaves To Accelerate Abnormal Vaginal Discharge Healing In Adolescent In Spmaa Fondation Lamongan	19-27
Diah Eko Martini	
5 Family-based Maternal Sensitivity Models (MSM) Application in Young Mothers in Rural Area toward Parent's Role Perceptions and How to Know Health-Sick Condition in Infants	28-37
Diyan Indriyani*, Susi Wahyuning Asih**	
6 Implementation of Project Based Learning method (PjBL) to improve students' ability and community participation in HIV prevention	38-42
Mira Triharini, Purwaningsih, Nuzul Qur'aniati	
7 Effect Of Green Bay Extract On Hemoglobin Content On Pregnant Woman	43-50
Noer Saudah, Siti Indatul, Julipa Nuriyana	
8 Effect Compress Ginger Is Warm To Change Intensity Of Joint Pain In The Elderly In Panti Werdha Mojopahit Mojokerto	51-62
Abdillah Wahab, Noer Saudah, Amar Akbar, Muhammad Eko Setyo	
9 The Determinant Factor of Fine Motorist of Preschool Students of YBPK Kinder Garten, Pare, Kediri	63-65
Dhita Kris Prasetyanti	
10 The Trigger Type In The Implementation Of Cervical Cancer Early Detection Through Inspection Method Of Acetic Acid Visual (Iva) In Kediri	66-69
Eko Winarti, Budi Santoso, Suhatno, Rachmad Hargono	
11 The Influence of Nutritional Status in Toddler Development who Visited the Posyandu Melati and Menur of Kelurahan Lirboyoy Mojoroto Kediri	70-76
Erna Susilowati, Elfi Quyumi Rahmawati	
12 The Effects of Brain Gym towards Creativity among Preschool Children	77-83

	in Kindergarten, Mojoroto Sub-District, Kediri City Ifana Anugraheni, Fatma S. Ruffaida, Sri Haryuni	
13	The Influence Of The Deep Back Massage On The Intensity Of Labor Pain To Maternal In The First Active Phase At The Aura Syifa Hospital, Kediri 2017 Siti Aminah, Dessy Lutfisari	84-89
14	The Influence Of Combination Murottal Holy Qur'an And Deep Breath Relaxation To Face Anxiety A Labor Fauzia Laili, Endang Wartini	90-92
15	Entrepreneurship Training As A Career To Develop Health Worker Efforts To Be Entrepreneurship Siti Maryati, Budi Punjastuti, Iswanti Purwaningsih	93-102
16	Correlation Of Nutritional Status With Blood Sugar At Diabetes Mellitus Ambar Asnaningsih, Noer Saudah, Siti Indatul, Novia Budiarti	103-107
17	The Effects Of Social Group Dynamics Toward The Nutrient Status Of Children In 1-3 Years Old In Kediri City Susiani Endarwati, Siti Komariyah	108-114
18	Effect Of Health Promotion Based On The Theory Pender To Mother's Behavior On The Prevention Of Anemia In Children Linda Ishariani	115-123
19	The Effect of Hypertension and Preeclampsia or Eklampsia Before Pregnancy On Degrees Preeclampsia/Eclampsia In Surabaya Intim Cahyono, Dhiana Setyorini, Ratna Hidayati	124-132
20	Social Support And Exclusive Breastfeeding In Work Area Of Health Center Of Sreseh Sampang Madura Esti Yunitasari, Nur Amilia	133-143
21	Care Patterns In Under Five Children Nutrition By Mother Of Positive Deviance Tri Ratnaningsih, Chatarina Umbul W, Hari Basuki, Anis Catur	144-158
22	The Influence Model Of Communication, Information And Education In The Family (Cief) On Ability To Inside Early Detection And Handling Of Emergency In Pregnancy (Preeclampsia) In Darungan Village, Pare, Kediri Regency Ratna Hidayati, Bambang S., Dwi Setyorini, Dhiana Setyorini	159-184
23	The Influence of Papaya Juice to Blood Pressure Changes of Menopause with Hypertension Dessy Lutfiasari	185-187
24	Antenatal Depression And Correlated Factor Among Indonesian Women With High Risk Pregnancy Yosi Maria Wijaya	188-196
	CONFERENCE SCHEDULE	197

THE EFFECTS OF SOCIAL GROUP DYNAMICS TOWARD THE NUTRIENT STATUS OF CHILDREN IN 1-3 YEARS OLD IN KEDIRI CITY

Susiani Endarwati, Siti Komariyah
Akademi Kebidanan Dharma Husada Kediri
susianiendarwati1@gmail.com, stijkr_kdr@yahoo.com

Abstract

The kids are very precious asset for parents. Every parents hope that their children can grow and develop well, and get good education to maximize their potencies, talent also skill. To reach that hopes, the parents have responsibilities and roles in learning process, and also their growth and development by giving stimulation in order they can grow and develop in line with their ages. One of children's growth period that can be seen is their nutrient status. The aim of this study is to know the effects of social group dynamics toward nutrient status among kids in 1 to 3 years old in Kediri City.

The research method is *pre-experimental* by using research design *pra-post test*. The population in this research are all of the mothers who have children in 1 to 3 years old in Campurejo Village, Mojoroto District of Kediri City. By using *Simple Random Sampling*, it was got 52 respondents. There are 2 variables, namely independent and dependent variables. Independent variable is social group dynamics, and dependent variable is the nutrient status of the children in age 1 to 3 years old. The instruments of this research is the book of "Kartu Menuju Sehat (KMS)". The data were analyzed by using *Wilcoxon Match Pairs Test*, and then data analysis used SPSS v.20 Program.

The result of this research showed that before given social group dynamics, there were 23 respondents (44.23%) have good nutrient status. While after given social group dynamics, there were 27 respondents (51.9%) have good nutrient status. Based on the result of statistical test by using *Wilcoxon Match Pairs Test*, it was got *Z* value -2.183 with $\alpha \leq 0.05$. *H1* is accepted. It means there is influence between social group dynamics and nutrient status in 1 to 3 years old children.

The mother's knowledge about balance nutrient which is needed by the children can give positive effects toward their nutrient status, so the growth of the children can increase in line with their ages. For the health officers, it is suggested to improve the mothers' knowledge by holding special class for the mothers who have children under-five years old. The materials are education about nutrition in general, and it can be done by many ways such as role play, simulation or direct practice to serve food and its creativities

Keywords: social group dynamics, nutrient status, children in 1 to 3 years old

INTRODUCTION

National development in the recent years tends to develop economics and the quality of human resources. The usage of human and nature resources require optimal nutrient status grade and good health. World Health Organization (WHO) states that

nutrient status is the main pillar of health and prosperity during the whole life cycle. The low nutrient status which is still exist in Indonesia will influence directly toward the growth and development of children. It can decrease children's cognitive ability, so that the development of the children delays (Soekirman, 2000 : 6).

Nutrient is one of important factors to determine the quality of human resources. The lack of nutrient will cause serious effects such as the failure of physical growth and the delay of development and intelligence. The other effects are decreasing productivities, and low immunity against diseases that will increase illness and mortality risk (Ariani, 2017:214).

The nutrient problem can be obesity and lack of nutrient (protein calories). The lack of nutrient can be caused direct and indirect factors. The indirect factors include unavailable of food in households, inappropriate caring pattern, low education, low knowledge and skill of the parents while the directs factors are unbalance of food intake and infectious disease. The effects of low nutrient toward mental and brain development depend on severity, duration and period of brain growth itself. If the lack of nutrient happens in toddler period, especially in the golden period, the brain cannot develop in normal way. Unfortunately, this condition is difficult to be recovered. Thus, it is worried that the children who have lack of nutrient in toddler period will have permanent development disorder in the next years.

A survey of two poor neighborhoods in Kingston, Jamaica is reported that nutritional indicators, weight for age and weight for height, as well as developmental levels declined with the children's age. Multiple regression analysis showed that stunting (h/age) and weight for age had significant effects on DQ, whereas wasting (wt/ht) did not. (Selvam, 2015).

This study investigates associations between food insufficiency and cognitive, academic, and psychosocial outcomes for US children and teenagers ages 6 to 11 and 12 to 16 years. The results demonstrate that negative academic and psychosocial outcomes are associated with family-level food insufficiency and provide support for public health efforts to increase the food security of American families (Alaima et al, 2001).

The effects of nutritional supplementation, with or without psychosocial stimulation, of growth-retarded (stunted) children aged 9-24 months were assessed in a study in Kingston, Jamaica. These findings suggest that poor mental development in stunted children is at least partly attributable to undernutrition. (Armond, 2004).

Malnutrition in the modern world does not only comprise the consequences of protein energy shortage. There is also recognition of a growing concern for obesity in children and teenagers and insights into the health consequences of vitamin and trace element deficiencies, including iron, vitamin D and vitamin A, although every vitamin and mineral is critical to good health (RJ Green, 2015).

RESEARCH METHOD

The research method is *pre-experimental* by using research design *pra-post test*. The research population are all of the mothers who have children in age 1 to 3 years old in Campurejo Village, Mojoroto District, Kediri City. The sampling technique used is

Simple Random Sampling, and it was got 52 respondents. The research variables consist of 2 variables, namely independent variable and dependent variable. The independent variable is social group dynamics, and the dependent variable is nutrient status of the children in age 1 to 3 years old.

The research is *Kartu Menuju Sehat (KMS)* book. The data are analyzed by using *Wilcoxon Match Pairs Test*, and the data analysis used is *SPSS v.20 Program*.

THE RESULT AND DISCUSSION

Result

Table III.1 The Frequency of Distribution Nutrient Status of the Children in 1-3 Years Old before Implementing of Social Group Dynamics

	Nutrient Status								Total
	F	%	F	%	F	%	F	%	
Bad	0	0	2	3.85	0	0	0	0	2
Thin	0	0	13	25	8	15.38	0	0	21
Good	1	1.92	1	1.92	19	36.5	2	31.85	23
Overweight	0	0	0	0	0	0	6	11.54	6
Total									52

Based on Table III.1, from 52 respondents there are 23 respondents (44.23%) have good nutrient status, and 2 respondents (3.85%) have bad nutrient status.

Table III.2 The Frequency of Distribution Nutrient Status of the Children in 1-3 Years Old after Implementing of Social Group Dynamics

	Nutrient Status								Total
	F	%	F	%	F	%	F	%	
Bad	0	0	0	0	1	1.92	0	0	1
Thin	2	3.85	13	25	1	1.92	0	0	16
Good	0	0	8	15.38	19	36.5	0	0	27
Overweight	0	0	0	0	2	3.85	6	11.54	8
Total									52

Based on Table III.2, from 52 respondents there are 27 respondents (51.92%) have good nutrient status, and 1 respondent (1.92%) has bad nutrient status.

Table III.3 The Cross Tabulation of Social Group Dynamics Analysis toward Nutrient Status of the Children in 1 to 3 Years Old

Thin

Nutrient Status_Pre * Nutrient Status_Post Cross tabulation

		Nutrient Status_Post				Total
		Bad	Thin	Good	Overweight	
Nutrient Status_Pre	Bad	Count 0	2	0	0	2
	% within Nutrient Status_Pre	.0%	100.0%	.0%	.0%	100.0%
Thin	Count	0	13	8	0	21
	% within Nutrient Status_Pre	.0%	61.9%	38.1%	0%	100.0%
Good	Count	1	1	19	2	23
	% within Nutrient Status_Pre	4.3%	4.3%	82.6%	8.7%	100.0%
Overweight	Count	0	0	0	6	6
	% within Nutrient Status_Pre	.0%	.0%	.0%	100.0%	100.0%
Total	Count	1	16	27	8	52
	% within Nutrient Status_Pre	1.9%	30.8%	51.9%	15.4%	100.0%

Based on Table III.3, from 52 respondents it can be seen that before implementing social group dynamics, there are 23 respondents (44.23%) who have good nutrient status. After implementing social group dynamics, there are 27 respondents (51.92%) who have good nutrient status.

Tabel III.4 Statistical Test of Social Group Dynamics Effects toward the Children's Nutrient Status in Age 1-3 Years Old

Ranks

	N	Mean Rank	Sum of Ranks
Nutrient Status_Post Negative Ranks	2 ^a	10.50	21.00
Nutrient Status_Pre Positive Ranks	12 ^b	7.00	84.00
Ties	38 ^c		
Total	52		

a. Nutrient Status_Post < Nutrient Status_Pre

b. Nutrient Status_Post > Nutrient Status_Pre

c. Nutrient Status_Post = Nutrient Status_Pre

Test Statistics^b

	Nutrient Status_Post - Nutrient Status_Pre
Z	-2.183 ^a
Asymp. Sig. (2-tailed)	.029

a. Based on negative ranks.

b. Wilcoxon Signed Ranks Test

Based on Table III.4, the result of statistical test by using *Wilcoxon Match Pairs Test* is Z value -2,183 with $\alpha \leq 0,05$. H1 is accepted. It means that there is influence of implementing social group dynamics toward nutrient status of the children in age 1-3 years old.

DISCUSSION

1. Nutrient Status of the children in Age 1-3 Years Old before Implementing Social Group Dynamics

Based on Table III.1, from 52 respondents there are 23 respondents (44.23%) who have good nutrient status, 21 respondents (40.38%) who have lack of nutrient, 6 respondents (11.53%) who have overweight, and 2 respondents (3.85%) who have bad nutrient status.

The good nutrient status is needed to in the children's growth and development process from age aspect. If the lack of nutrient in under-five years old children happens continuously, it can decrease the quality of human resources (Shirin S, 2016).

The result of research shows that most of the respondents have good nutrient status. The mothers' knowledge about nutrient necessities has very important role because the fulfillment of adequate nutrient can create the better next generation. However, the awareness of giving adequate nutrient hasn't been understood well.

Based on Table III.1, it is known that there are 2 respondents (3.85%) who have bad nutrient status. Some factors can be causes of nutrient intake disorders. The direct cause is usually inadequate nutrient intake compare with the children's need especially under-five years old kids. The over fondness toward certain kinds of food will cause the body cannot fulfill the complete nourishment (Hasdianah, Siyoto, 2014:104).

Most of the children in age 1-3 years old have interest of certain food, so their consumption pattern is also only that kind of food. This condition insists the mothers to give that favourite food frequently to the children. As the result, the children will have lack of certain nutrient needed because of less various food consumed.

The Nutrient Status of the Children in Age 1-3 Years Old after Implementing Social Group Dynamics

Based on Table III.2, from 52 respondents there are 27 respondents (51.92%) who have good nutrient status, 16 respondents (30.76%) who have lack of nutrient, 8 respondents (15.38%) who have overweight and 1 respondent (1.92%) who has bad nutrient status.

Information is the main source to get knowledge, because someone's knowledge will increase if he or she gets information. The more information got, the higher knowledge obtained (Wawan&Dewi, 2010).

Giving information or education to the mothers will influence the mothers' knowledge about serving good food intake either the kind of food given or the variety of food so that it influences toward nutrient status of their children. One of nutrient status changings which can be seen is the increasing of weight shown in weighing at Posyandu (Integrated Service Post) for under-five years old children.

According to Liza (2012), a child in under-five years old needs nutrients to help the development of brain optimally, and also to keep the healthy and strong body. Under-five years old age is critical age which a child will grow fast physically and mentally.

Nutrient is a very important part of growth and development, because it has close relation with health and intelligence. Therefore, the mothers must pay attention the nutrient intake of their children, especially the nutrient content of the food given.

2. The Effects of Social Group Dynamics toward Nutrient Status of the children in Age 1-3 Years Old

Based on Table III.3, from 52 respondents before implementing social group dynamics, there are 23 respondents (44.23%) who have good nutrient status, and after implementing social group dynamics there 27 respondents (51.92%) who have good nutrient status.

The result of statistical test by using *Wilcoxon Match Pairs Test* got Z value - 2.183 with $\alpha \leq 0.05$. H_1 is accepted. It means there is influence of social group dynamics toward nutrient status of the children in age 1 to 3 years old.

According to Mubarak (2011), the source of information can help to fasten someone in getting new knowledge. It explains that after someone gets the source of information so it will be analyzed further by thinking, processing, asking, classifying and reflecting.

Social group dynamics intervention by giving information to the mothers influences their knowledge and thought pattern about the importance of adequate nutrient for their children. Later, the mothers have more pay attention in giving food to their children so that it can change the nutrient status indicated by the increasing of weight in the next Posyandu visit.

Based on Table III.3, it is known that there are 21 respondents (40.38%) who have lack of nutrient status before implementing social group dynamics, and there are 16 respondents (30.76%) who have lack of nutrient after implementing social group dynamics.

The result of research shows that there is significant difference where the number of the children who have lack of nutrient decrease after implementing social group dynamics, namely 5 respondents (9.62%). It shows there is changing of thought pattern and knowledge from the mothers about nutrient intake for their children, so that it change the mothers' behavior. At last the mothers give food to their children in line with the portion needed.

REFERENCES

- Ariani, Putri. 2017. Ilmu Gizi. Yogyakarta : Nuha Medika
- Francisco J. Rosales, J. Steven Reznick & Steven H. Zeisel. Understanding the role of nutrition in the brain and behavioral development of toddlers and preschool children: identifying and addressing methodological barriers. *Nutritional Neuroscience An International Journal on Nutrition, Diet and Nervous System* Vol. 12. Iss. 5, 2009 Volume 12. 2009
- Hanun. (2008). Tumbuh Kembang, Status Gizi, dan Imunisasi Dasar Pada Balita. Yogyakarta : Nuha Medika.

- Hasdianah, Siyoto, Sandu H. Nurwijayanti. 2014. *Gizi, Pemanfaatan Gizi, Diet, dan Obesitas*. Yogyakarta : Nuha Medika.
- Jack, James. (2005). *Advanced Nutrition and Human Metabolism*. Wodsworth:Australia
- Katherine Alaimo, Christine M. Olson, Edward A. Food Insufficiency and American School-Aged Children's Cognitive, Academic, and Psychosocial Development. Frongillo, Jr. AAP News& Journals Pediatrics. July 2001, Volume 108 / Issue 1
- Mariana, C. (2007). *The Negative Effects of Poverty and Food Insecurity on Child Development*. Philadelphia: Drexel University School of Public Health Philadelphia.
- Mariani Gabriela K. 2015. Hubungan status gizi dengan perkembangan motorik halus pada anak usia prasekolah di TK GMIM Solafide Kelurahan Uner Kecamatan Kawangkoan Induk. *E journal keperawatan (e-kp)* Vol 3 No 1 Februari 2015.
- Mubarak, Wahit Iqbal. 2011. *Promosi Kesehatan Untuk Kebidanan*. Jakarta : Salemba Medika
- RJ. Green, Nutrition in Toddler. CME Guest Editorial. Department of Paediatrics and Child Health Faculty of Health Sciences University of Pretoria South Africa robin.green@up.ac.za. *S Afr Med J* 2015;105(7) : 603. DOI : 10.7196/SAMJnew.791.
- Sobirin, Gilang. 2013. Hubungan Antara Status Gizi Dengan Perkembangan Toddler Di Kelurahan Telukan Kecamatan Grogol Kabupaten Sukoharjo.
- Soetjiningsih. 2012. *Tumbuh Kembang Anak*. Jakarta : EGC
- Wawan, A dan Dewi. 2010. *Teori & Pengukuran Pengetahuan, Sikap, dan Perilaku Manusia*. Yogyakarta: Nuha Medika.



PERSATUAN PERAWAT NASIONAL INDONESIA IKATAN PERAWAT MATERNITAS JAWA TIMUR

CERTIFICATE
Given to

SUSIANI ENDARWATI . SST . M. Kes .

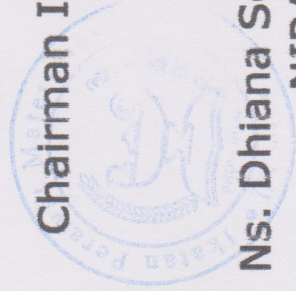
AS
ORAL PRESENTATION
International Seminar & Conference "INTERDISCIPLINARY INNOVATIONS AND
INTERVENTIONS IN HEALTH TO ACHIEVE THE SUSTAINABLE DEVELOPMENT GOALS
(SDGs)"

Grand Darmo, 26-27 August 2017

Based on SKP
PPNI no 0463/DPP .PPNI/SK/K.SN/2017 Speaker 3 SKP/ Moderator, Committe 3 SKP
PERSAGI no 1378/DPD-Jatim/AIV/2017 Speaker 3 SKP/ Moderator, Committe 2 SKP
IAKMI no 063/IAKMI Pusat/SKP-II/2017 Speaker 6 SKP/ Moderator 3 SKP, Committe 4 SKP
IBI no 4461/S/SKP-IBI/MI/2017 Speaker 2 SKP/ Moderator 2 SKP, Committe 2 SKP

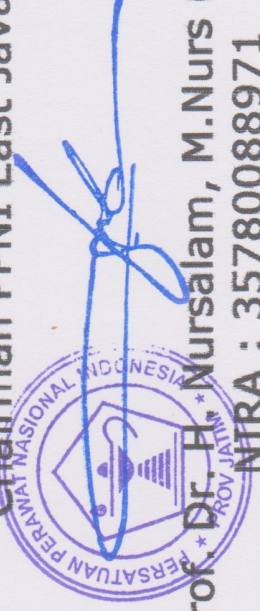


Chairman IPEMI Prop. Jawa Timur



Ns. Dhiana Setyorini, M.Kep., Sp.Mat.
NIRA : 35780210946

Chairman PPNI East Java



Prof. Dr. H. Nursalam, M.Nurs (Hons)
NIRA : 35780088971