



## EVALUATION OF THE SUPPLEMENTARY FEEDING PROGRAM FOR TODDLERS

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### ABSTRACT

**Background:** Malnutrition in children under five is still a matter of concern because it not only harms the child, but also harms the country. Malnourished toddlers if not treated properly can have an impact until adulthood.

**Objective:** This study aims to evaluate the Supplementary Feeding Program (PMT) for toddlers at Puskesmas Somba Opu, Gowa Regency.

**Methods:** The research method used was a cross sectional design with a quantitative approach. The population in this study were mothers who had toddlers and followed the PMT program at Puskesmas Somba Opu as many as 135 people. The sampling technique used proportionate stratified random sampling technique. The research was conducted at the Somba Opu Health Center in January-June 2023. Data analysis techniques used were univariate and bivariate using the Fisher test and contingency coefficient.

**Results:** the input aspect for the funding component is still lacking. The process aspect of the recording component is still lacking. The output aspect is said to be sufficient in maternal attitudes and the coverage of Supplementary Feeding performance. There was a relationship between process and maternal attitude ( $p=0.000$ ).

**Conclusion:** the funding and recording components are still lacking and there is a relationship between the process and the mother's attitude in the implementation of the Supplementary Feeding program at Puskesmas Somba Opu, Gowa Regency. It is recommended to provide funds for the implementation of the PMT program for toddlers in the working area of Puskesmas Somba Opu, Gowa Regency.

## INTRODUCTION

Improvements in human resources quality are the key objective of national development (HR) starting from the fulfillment of basic human needs. However,

the achievement of Human development, measured by Indonesia's Human Development Index is currently not showing good enough results. In An effort to make human development better Index (HDI), Indonesia has

agreed to the Millennium Development Goals MDGs are the millennium declaration 2015, where one of the points of the development goal is to reduce child mortality (Kustin and Puspitasari, 2017).

Indonesia still has many health problems, one of which is in the field of nutrition. And included in 17 countries that have complex nutrition problems (Zara & Mardiaty, 2021). Indonesia is currently faced with a triple burden problem due to unresolved undernutrition. Nutrition problems are caused by inappropriate food intake, parenting, health services and lack of access to food (Indah et al., 2022).

Malnutrition is a condition of someone who is malnourished or whose nutritional status is below the average standard. Malnutrition is still an unresolved problem today. The problem of malnutrition has become a global concern because in general the sufferers are toddlers and children who are the successors of the nation (Mauludi et al., 2021).

Malnutrition can affect developing countries and cause death in children (Utami & Mubasyiroh, 2019). Malnutrition in children also affects the cognitive ability and intelligence of children, and also causes low productivity of children. Several studies have shown that malnutrition has a negative impact on children under five, such as disrupting physical and mental growth, which results in hampered learning achievement. Other impacts include decreased endurance, loss of

healthy life span, and increased morbidity, disability, and mortality rate in children under five (Sudarman et al., 2019). Nutrition has a significant impact on health and is linked to cognitive and social development, especially in early childhood. Malnutrition in any form is a global public health problem (Yang et al., 2020).

Nutrition is an element or component of food that the human body can direct use, which may include proteins, carbohydrates, vitamins, fats, water and minerals. Similarly, the body needs to be provided with balanced nutrition, particularly for children and adolescents who are still at a stage of development. Food of the right quality and quantity is necessary in order to keep adolescents growing rapidly as well as developing (Syampurma, 2018).

According to Octasila & Dariyani (2021) Supplementary Feeding is an activity of providing food to children under five who have a nutritional value content in accordance with the target. Efforts made by the Ministry of Health by establishing a comprehensive policy to tackle the problem of undernourished status by providing additional food (PMT) in the form of biscuits (Masri et al., 2020). Supplementary feeding (PMT) is an important component that has the aim of improving nutrition-prone groups and toddlers who suffer from malnutrition. To enable children and young people to obtain the necessary nutrition, supplementary feeding stuffs shall be provided. In the area of nutrition, supplementary feeding

is an act which provides a secure and quality biscuit shaped food as required by the target age group with regard to nutrient value aspects (Wati, 2020).

This is in accordance with the research of Nelista & Fembi (2021) The Nanga Health Center has handled the problem of malnutrition by conducting counseling and providing complementary food biscuits, but the nutritional problems have not been resolved. Therefore, the strategy is to conduct a recovery Supplementary Feeding Program (PMT). Providing counseling and health education that increases mothers' knowledge about the supplementary feeding program (PMT) must be improved so that the program can be implemented properly (Henita, 2021).

The Supplementary feeding (PMT) should be organised in order to overcome nutrition deficiencies observed amongst undernourished infants aged between 1 and 3 years. Supplementary feeding is an intervention program for toddlers who suffer from malnutrition where the aim is to improve the nutritional status of children and to meet the nutritional needs of children so as to achieve good nutritional status and nutritional conditions according to the age of the child (Hosang et al., 2017). The type of supplementary food is specially made food that must be modified so that nutritional intake can be met according to needs, modified so that nutritional intake can be met according to protein and micronutrient needs, safe, clean,

not too spicy and salty and easy to consume by children (Kadir et al., 2020).

The process of implementing the PMT program at health center is inseparable from the problems that occur during the program implementation (Putri & Rahardjo, 2021). In the research of Setyawati et al, there are many problems during the distribution process, namely geographical conditions (long distances, difficult to reach locations, weather, damaged roads and uncertain ships) (Setyawati et al., 2023).

Research by Fajar et al (2022) said that toddlers who experience malnutrition are caused by nutritional deficiencies in food and can also be caused by infectious diseases that affect endurance and food intake in toddlers. Meanwhile, in Sugianti's research (2017) it is known that during the implementation of the program, the rejection of toddlers to PMT-P and the replacement of target toddlers with other toddlers are obstacles that occur in the field. This resulted in inaccurate targeting of the PMT-P program.

The research of Nurrahmah & Muliana (2021) showed that the implementation of PMT was not effective and the mothers of toddlers were lacking in managing the food menu with good nutrition, causing the nutritional status to be not as expected in the working area of the Padang Tiji health center.

In a study conducted by Rochman et al (2022) there was a difference in the nutritional status of toddlers before being given

Supplementary Food (PMT) and after 3 months of PMT.

The results of the Indonesian Nutrition Status Survey (SSGI) for the past two years show that 24 districts in South Sulawesi Province have underweight toddlers. In 2021, Gowa Regency ranked 16th with the number of underweight toddlers (BB/U) at 16.8%. However, in 2022 the number of underweight children under five increased and ranked fifth in South Sulawesi province with a prevalence of underweight children under five (BB/U), namely (27.2%). Compared to Takalar Regency which is in first place with an increase (2.4%) from 2021 to 2022 while Pangkajene and Islands Regency in second place experienced an increase (4.3%) (Ministry of Health, 2022).

Based on data from the provincial profile of the South Sulawesi Provincial Health Office in 2021, the prevalence of underweight in children aged 0-59 months in South Sulawesi is as follows South Sulawesi amounted to 6.54%, while the number of underweight children aged 0-59

## **METHODS**

This research employed a quantitative method with a cross-sectional design and was carried out between January and June 2023. The population in this study were mothers who had toddlers and followed the PMT program at

Somba Opu Health Center. Based on data at Puskesmas Somba Opu mothers in 2022 mothers who have underweight toddlers amounted to 207 mothers of toddlers.

Data collection is divided into two, namely primary data obtained through the administration of questionnaires, to mothers of toddlers who are research samples, and secondary data obtained from document collection such as observation of the number of health workers, budget and facilities used in the implementation of the PMT Program at Puskesmas Somba Opu. Data analysis techniques used were univariate and bivariate with SPSS using Fisher exact test and Gamma correlation test. After data analysis, the information will be presented in the form of frequency distribution tables equipped with interpretations or explanatory narratives of each table.

## **RESULTS**

Data collection regarding the relationship between leadership and the performance of health workers at Puskesmas Somba Opu Gowa Regency took place on March 9 - May 9, 2023. Respondents in this study were mothers of toddlers who had malnourished children in the posyandu working area of Puskesmas Somba Opu, totaling 135 people.

**Table 1. Distribution of Respondents at Puskesmas Somba Opu, Gowa Regency**

Characteristics of respondents	Responden		
	Frequency (n)	Percentage (%)	
Age (Year)	11-20	8	5.9
	21-30	67	49.6
	31-40	40	29.6
	41-50	13	9.6
	51-60	6	4.4
	61-70	1	0.7
Total	35	100%	

*Source: Primary Data 2020*

Table 1 show that the characteristics of respondents according to age are mostly in the age category 21-30 years as many as 67 people (49.6%). While the least age is 61-70 years as many as 1 person (0.7%).

## 1. Inputs

### a) Personnel

In the interviews that have been conducted, it is known that 5 nutritionists or nutritionists for 8 posyandu villages in the Somba Opu Health Center working area, in this case for nutritionists implementing the Toddler PMT program, the number and quality are sufficient in carrying out their responsibilities in accordance with the standards.

### b) Budget

According to the results of interviews obtained from the person in Charge of Nutrition, it was known that at the Somba Opu Health Center related budget for the

## 2. Process

**Table 2 Distribution of Respondents Assessment Based on PMT Process**

Process	n	%
Enough	129	95.6
Less	6	4.4
<b>Total</b>	<b>135</b>	<b>100</b>

*Source: Primary Data, 2023*

Supplementary Feeding program do not exist because the Supplementary Food packages are directly held from the Health Office in the form of biscuits where the number of biscuits received in 2022 amounted to 45 cartons containing 84 packs per carton. However, the number of biscuits received is known to be insufficient according to the target number of under-fives who are malnourished.

### c) Facilities

Interviews with the nutritionist in charge of each village showed that the facilities used in implementing the Toddler Additional Feeding program were in line with Permenkes No.14 of 2019 concerning Technical Guidelines for Implementing Nutrition Surveillance, namely the availability of recording forms, body measuring tools, PMT implementation instructions and KMS books.

Tabel 2 showed that of 135 respondents, 129 respondents (95.6%) had sufficient preparation, implementation, monitoring and 3. Output

recording processes, while 6 respondents (4.4%) had deficient processes.

a) Maternal Attitude

**Table 3 Distribution of Respondents Assessment Based on Mother's Attitude**

<b>Output</b>	<b>n</b>	<b>%</b>
Enough	129	95.6
Less	6	4.4
<b>Total</b>	<b>135</b>	<b>100</b>

*Source: Primary Data, 2023*

Table 3 shows that of the 135 respondents, 129 respondents (95.6%) had maternal attitudes consisting of program coverage and maternal attitudes in the sufficient category, while 6 respondents (4.4%) had poor maternal attitudes.

Results of interviews conducted by Nutritionists (TPG) Nutrition performance indicators 2020-2024 the percentage of toddlers receiving additional food for 2022 is 85% while the performance achievement for toddlers receiving additional food in the posyandu of the Somba Opu Health Center working area reached 100%.

b) Program Coverage

**4. Relationship between Process and Mother's Attitude in Implementing the PMT Program**

**Table 4 Relationship between Process and Mother's Attitude on Implementation of Toddler Feeding at Puskesmas Somba Opu, Gowa Regency**

*Source: Primary Data, 2023*

<b>Process</b>	<b>Mother's Attitude</b>						<b>P</b>	<b>C</b>
	<b>Enough</b>		<b>Less</b>		<b>Total</b>			
	<b>n</b>	<b>%</b>	<b>n</b>	<b>%</b>	<b>N</b>	<b>%</b>		
Enough	127	98.4	2	1.6	129	100	0,000	0,984
Less	2	33.3	4	66.7	6	100		
<b>Total</b>	<b>129</b>	<b>95.6</b>	<b>6</b>	<b>4.4</b>	<b>135</b>	<b>100</b>		

According to Table 4, 129 respondents rated the process as adequate, 127 respondents (98.4%) said that the mother's attitude was sufficient and 2 respondents (1.6%) said that the mother's attitude was lacking. Whereas out of 6 respondents who considered that the process was lacking, there were 2 respondents (33.3%) with sufficient maternal attitude and

there were 4 respondents (66.7%) said that the mother's attitude was lacking.

The results of statistical tests using the fisher exact test *p-value* of 0.000 <0.05, then H0 is rejected, meaning that there is a relationship between a process and the attitude of mothers at the Somba Opu Health Center, Gowa Regency. The correlation test results using the *Gamma test* obtained a value of C =

0.984. Because the *C-value* is in the range of 0.76 - 0.99 and is positive, it means that the relationship between the Process of Supplementary Feeding in Toddlers with maternal attitudes is very strong and unidirectional.

## **DISCUSSION**

### **1. Overview of Inputs to the Toddler Supplementary Feeding Program**

#### **a) Health Program Staff**

The implementation of the Toddler Supplementary Feeding program requires input or input, namely the implementing personnel. Implementing personnel must be in accordance with the needs required both in quantity and quality (Jayadi et al., 2021).

The number of personnel implementing the Toddler Supplementary Feeding program is sufficient in accordance with the stipulated Minister of Health Regulation. The required number of health workers is in accordance with Minister of Health Regulation No.43/2019 on Community Health Centers related to health center staffing standards, namely nutritionists 1, midwives 4 and health promotion personnel and behavioral science 1, where this is for the implementing staff of the Toddler Feeding Program at Puskesmas Somba Opu said to be sufficient because it meets the established standards.

The results of this study are in accordance with research conducted by

Hidayah (2016) which states that Health Human Resources have a very important influence in improving all aspects of the health service system for the community. The quality of human resources determines the success of a program.

#### **b) Budget**

Budget or funds have an important role in the PMT program which is used for the distribution implementation of the Toddler Supplementary Feeding Program (PMT). The budget used for the implementation of the Toddler PMT program is in the form of biscuits. However, from the interviews conducted, it is known that the budget in the form of biscuits provided from the center is still less than the target number of malnourished toddlers.

This condition is not in accordance with the Recovery Supplementary Feeding Guidelines. published by the Indonesian Ministry of Health, which states that the budget for Supplementary Feeding is through the Health Operational Assistance (BOK) fund.

#### **c) Facilities**

Facilities are very important in supporting the implementation of the Supplementary Feeding Program (PMT) for underweight children.. The availability of facilities to support nutrition improvement programs, especially in the MT feeding program for toddlers (Jayadi et al., 2021).

The facilities used by the implementing staff in the implementation of the Toddler PMT program consist of recording documents, body measuring tools, technical instructions for implementing the Toddler PMT and the Toddler KMS book. This can support nutrition improvement programs, especially in the Toddler Supplementary Feeding program. The facilities used in the implementation of the Toddler Supplementary Feeding Program at the Somba Opu Health Center are in accordance with the Regulation of the Minister of Health of the Republic of Indonesia Number 14 of 2019 concerning Technical Guidelines for Implementing Nutrition Surveillance.

The results of this study are in accordance with the findings of Jayadi & Rakhman (2021) which state that the facilities available in the implementation of the Toddler Supplementary Feeding Program are in accordance with the Regulation of the Minister of Health of the Republic of Indonesia Number 14 of 2019 concerning Technical Guidelines for Implementing Nutrition Surveillance are in the form of recording cards and reporting forms. Both books are owned by nutrition officers at the health center. In addition, nutrition officers also have nutritional status measurements in the form of anthropometry consisting of height gauges, baby scales with good quality. To measure weight, mothers of toddlers need to bring

their Health Card (KMS) to every weighing.

## **2. Overview of the Toddler Supplementary Feeding Program Process**

### **a) Planning**

Preparation is a step that also needs to be taken before implementing the PMT program. Preparations for the PMT program include data collection on target children, socialization, and coordination meetings between implementers of supplementary feeding programs.

PMT program preparation is known to be in the sufficient category, it is known that the implementation schedule that has been determined is appropriate and announced every month. In addition, counseling is conducted to mothers of toddlers related to PMT before giving biscuits. It is known that in preparation there is no determination of food according to the needs of toddlers and no group of mothers of toddlers is formed according to the target.

The findings of this study are in line with Karlina's research (2020) that the preparation of the recovery supplementary feeding program was not carried out through dietary assessment and calculation of children's daily needs. As well as not forming a group of mothers of toddlers who are targeted and socialization / counseling activities that are still lacking.

### **b) Actuating**



The technical implementation of Supplementary Feeding is that every under-five child who is malnourished and aged 6-59 months is given food with sufficient nutritional content for 90 consecutive days. Food provided can be in the form of using available manufactured food such as biscuits.

The technical form of implementation of Supplementary Feeding is that every under-five child who is malnourished and aged 6-59 months is given food with sufficient nutritional content for 90 consecutive days. The food provided can be in the form of using available manufactured food such as biscuits.

The supplementary feeding program implementation is included in the sufficient category because Supplementary Food (MT) in the form of biscuits is given directly to the target after counseling and measuring the weight and TB of toddlers. Meanwhile, it is known that there are respondents who rate the implementation of the program as insufficient. This is because there are still toddlers who do not get additional food for 90 days due to some parents of toddlers who are unable to attend the implementation of the Toddler Supplementary Feeding program.

This result is the same as Jayadi & Rakhman's research (2021) in the implementation of PMT activities at the Jakenan Health Center in providing additional food in May, June and July.

Toddlers who are malnourished are brought to the puskesmas and given PMT. Then given special guidance from a nutritionist.

#### c) Monitoring

Monitoring is an important component of PMT program implementation. Pemantauan bertujuan untuk menentukan tinggi dan berat badan anak-anak yang kekurangan gizi untuk menentukan status gizi mereka dan memastikan bahwa that food packages are consumed by toddlers.

Monitoring in the supplementary feeding program is in the sufficient category, this is known because every time monitoring is carried out, measurements are taken by Program Implementers, namely Nutritionists or nutritionists and the increase in the weight of under-fives who are malnourished after being given PMT. While there are respondents assessing the monitoring of the program is lacking, it is known that there are still some children who do not like Supplementary Food (MT).

This result is in accordance with the research of Aryani & Wahyono (2020) stating that the Toddler Supplementary Feeding program at Puskesmas Welahan 1 is seen from the monitoring carried out by Nutrition Executives (TPG) and village midwives and cadres both at the puskesmas and at the posyandu such as weighing and measuring BW and TB every PMT

collection every month during implementation.

d) Recording

Recording is carried out starting from the parents of toddlers, while village midwives and puskesmas nutrition officers record the growth and development of toddlers during the implementation of the program then the results of the recording are reported from the village midwife to the puskesmas, from the puskesmas to the health office every month.

Recording is started from the toddler's parents, while village midwives and puskesmas nutrition officers record the growth and development of toddlers during implementation in the program and the results of recording are reported from the village midwife to the puskesmas, from the puskesmas to health services every month. Recording in supplementary feeding programs is included in the category of less this is known because the results of interviews conducted with respondents found that many mothers of children under five do not make a record daily of food consumption power given every day this is because mothers only remember what food they want to give to their children but are not recorded. However, every month officers always record the nutritional status of toddlers to determine the growth and condition of toddlers after being given Additional Food (MT).

This study is different from a study conducted by Doren et al (2019) in the Recovery Supplementary Feeding Guidebook issued by the Indonesian Ministry of Health which states that the record activity is starting from the mother toddler who conducts simple daily records regarding food acceptability.

### **3. Overview of Output on the Toddler Supplementary Feeding Program**

a) Mother's Attitude

Attitude is a person's readiness or willingness to act whether it is not yet an action. In addition, a person's attitude in behavior is also influenced by his knowledge, where The higher a person's level of knowledge about something, the better the attitude they have towards it.

It is known that the attitude of mothers in the moderate category is due to the results of interviews conducted by mothers of toddlers to make visits to the posyandu still need to be done even though the toddler already looks healthy in addition to checking the growth and development of children, mothers of toddlers also want to get Additional Food (MT). in addition, there are still respondents who state that monitoring the growth and development of toddlers can be done at home without having to bring their children to the posyandu and posyandu only needs to be held once a month.

The study of Aswadi et al (2018) which states that mother's attitude towards the

utilization of posyandu for toddlers is generally very good, where the mother assesses that posyandu is very helpful because it is actually easier to reach and does not take too long and they are even more enthusiastic about posyandu if there is provision of additional food (PMT), vitamin A and medicines.

b) Program Coverage

The implementation of Nutrition improvement in children under five years of age is based on Regulation of the Minister of Health of the Republic of Indonesia Number 23 of 2014 concerning Nutrition Improvement Efforts. The goal of improving under-five nutrition is for everyone to have access to nutrition information and nutrition education, have access to nutritious foods, one of which is complementary foods, and every person has access to nutrition and health services.

The coverage of the toddler PMT program at the puskesmas reached 100%, meaning that it met the standards set in the Technical Guidelines for the Gowa District Toddler Feeding Program of the Gowa District Health Office.

This study is in accordance with the research of Doren et al (2019) which shows that the implementation of improved nutrition for toddlers, namely the Supplementary Feeding Program (PMT-P) at the Oepoi Health Center, is influenced by inputs and processes. In the coverage of malnourished toddlers who get additional

food (100%) or all malnourished toddlers get additional food packages.

#### **4. Relationship between Process and Mother's Attitude in Implementing the Toddler Supplementary Feeding Program at Puskesmas Somba Opu, Gowa Regency.**

Processes are various management activities in specific nutrition interventions that can directly affect the incidence of stunting including planning, organizing, actuating, and controlling. Where the process component has a relationship with the mother's attitude towards the implementation of stunting prevention programs in toddlers (Wahyuningtias & Zainafree, 2022).

The results found that there were respondents who said that the mother's attitude was in the moderate category. This shows that the mother's attitude towards implementation of the supplementary feeding program is good, where the mother of toddlers feels that it is important to bring the child to the posyandu which is not only done to monitor the child's growth and development but also to get PMT biscuits. While 2 respondents (1.6%) said that the mother's attitude was less. This is because although the process of implementation has been carried out well, it does not affect respondents to routinely bring their children to the posyandu.

Meanwhile, of the 6 respondents who considered that the process was lacking,

there were 2 respondents (33.3%) with sufficient maternal attitudes, because the respondents felt that even though the child's weight did not increase when given biscuits they would still go to the posyandu to monitor their child's growth and development and get additional food in the form of biscuits. In addition, there were 4 respondents (66.7%) said the mother's attitude was lacking. This is because some respondents do not routinely bring their children to the posyandu because the location of the house with the posyandu is far away and have a job so they feel to know the growth and development of toddlers can be done by themselves without the need to go to the posyandu.

The statistical test results using the fisher exact test obtained a value of  $p = 0.000$ . Because the  $p$ -value  $< 0.05$ ,  $H_0$  was rejected, meaning that there was a correlation between the process and the mother's attitude at the Somba Opu Health Center, Gowa Regency.

This result is in accordance with research conducted by Purnamawati & Novita (2022), which states that informants expressed satisfaction with the services of implementing personnel at the posyandu so that it has a direct relationship with the effectiveness of activities. The implementation of posyandu consisting of cadres and health workers has a role in the visit of mothers under five to the posyandu

which is a causal relationship with the attitude of mothers to visit the posyandu.

## **CONCLUSION**

According to the results of the research obtained from the input aspect which consists of (Health Program Staff, budget and facilities) for the funding component is still lacking this is seen because there are still targets of underweight toddlers not getting biscuits. The process variable consists of (planning, actuating, monitoring and recording) in the recording component is still lacking because there are still mothers of toddlers who do not make daily records of the food consumption power received by their children. Output variables are said to be sufficient in maternal attitudes and performance coverage of Supplementary Feeding. In addition, it was found that there was a process-attitude relationship between mothers ( $p=0.000$ ).

The result of this research is hoped to be able to contribute and support theories, especially in public health science regarding program implementation to improve the results of PMT program implementation.

## **SUGGESTION**

It is recommended that the Gowa Regency Health Office provide malnutrition funding in accordance with the number of targets to overcome malnutrition. It is recommended that the Puskesmas of Somba Opu provide funds so

that supplementary food can be distributed to all targets to homes as well as counseling mothers of toddlers. And it is expected that mothers of toddlers conduct simple daily records to determine the development of

children and actively participate in the implementation of the program.

#### **THANK-YOU NOTE**

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