



Implementation of The Use Maternal and Child Health (MCH) Handbook in BKB PAUD Teratai Putih, Kuningan, South Jakarta

Nadaa Julia Kurnain*, Zirmansyah, Nurfadilah

Al Azhar Indonesia University, Indonesia

DOI: <https://doi.org/10.15294/edukasi.v16i1.36656>

Info Articles

History Article

Submitted 2022-01-30

Revised 2022-02-20

Accepted 2022-04-16

Keywords:

BKB PAUD, Children's Health, BKB PAUD

Abstract

Health is one of the things that must be met in fulfillment of child development. The aim of the study is to find out the implementation of the use of the Maternal and Child Health (MCH) Handbook in BKB PAUD Teratai Putih, Kuningan, South Jakarta. This research used a phenomenological qualitative method. The subjects of the research were 1 principal, 3 teachers and 3 mothers in BKB PAUD Teratai Putih. The results of this study showed that (1) The three teachers and mothers (parents of students) in BKB PAUD Teratai Putih very well know the MCH Handbook, they can apply the MCH Handbook according to the instructions. (2) The MCH Handbook is implemented in the activities of visits to posyandu, visits of health workers to schools, habituation of clean and healthy behavior, school promotion and child development reports, reporting of child development achievement levels and parenting using the MCH Handbook as an information tool, monitoring growth and development of children, recording health services and communication tools, (3) Supporting factors in implementing the use of the MCH Handbook are cadres who are also teachers to make communication easier so that they can work together with parents in caring for and developing children's growth and development and one of the inhibiting factors is when there are parents who do not bring the MCH Handbook during the posyandu activities because they are missing or damaged.

*Alamat Korespondensi:

E-mail: nadaajulia.kurnain@gmail.com

p-ISSN 0852-0240

e-ISSN 2746-4016

INTRODUCTION

0 - 6 years old is often referred to as the golden age, because at this time the development of children's intelligence develops to reach 50% to 80% of human intelligence capabilities and at this time the child starts to be sensitive / sensitive to receive various stimuli. Growth and development in early childhood is the starting point that will determine the future of the child, so that attention is needed in fulfilling the rights of child growth and development.

Health is one of the things that must be considered in fulfilling children's development and development rights. One of them is nutrition with balanced nutrition. This is very much needed in the continuity of the child's growth and development process, because nutrition has benefits in helping the process of child growth and development, as well as preventing various diseases due to malnutrition (Limbong, Kawilarang, Neghe, & Macpal, 2020). In addition, monitoring of children's growth and development also needs to be done in order to identify deviations in child development early, so that healing and recovery can be corrected as early as possible. So far, efforts to monitor children's growth and development have been successfully carried out in the health sector, especially in posyandu by using the Maternal and Child Health (MCH) Handbook.

The MCH Handbook (Maternal and Child Health) is one of the tools used to monitor children's growth and development. Based on the Decree of the Minister of Health of the Republic of Indonesia 284 / MENKES / SK / III / 2004 concerning the MCH Handbook, it states that the MCH Handbook is a tool for early detection of disorders or problems of maternal and child health, a means of communication and counseling with important information for mothers and families. as well as the community regarding maternal and child health services including referrals (Ministry of Health, 2015). The MCH Handbook contains notes and information on how to care for and maintain the health of mothers and children (newborns to children aged 6 years). The information is in the form of signs of a healthy child, how to monitor the child's growth and development, indications of inappropriate child development, how to care for babies born up to 6 years which includes daily care; child hygiene, dental care, care for sick children, fulfillment of nutritional needs in the form of recommended ways of giving food (form of food to feeding time), information about child development which includes standards for the level of achievement of child development and stimulation that can be provided, Information on child protection materials in the form of how to protect children from physical violence and sexual crimes.

The use of the MCH Handbook is one strategy in maintaining the health of mothers and children, including as a medium of information for mothers in monitoring the growth and development of their children at home. The MCH Handbook has benefits for a mother, namely as a guide in maintaining children's nutritional intake, knowing information on children's development according to age and as a tool for recording in measuring weight and height and for recording inappropriate children's development (Eliya, 2020). This shows that the MCH Handbook is useful as a home-based record that is used to record children's health history and this history can be communicated with the health sector. The use of the MCH Handbook in the health sector is useful as a means of information and communication tools in providing maternal and child health services. For cadres as a means of health education and to mobilize people to come and use health facilities. For Puskesmas Officers, the MCH Handbook can be used as a standard of service, counseling and health counseling, so that services to mothers and children can be provided comprehensively and continuously (Lia, 2017).

The use of the MCH Handbook as a monitoring tool for children's health and nutrition needs to be widely used to various sectors that play a role in optimizing children's growth and development, not only in the health sector but in the education sector. As Kirana Pritasari stated, the MCH book is not only beneficial for the health sector, but can also be applied in other sectors,

including as a medium for monitoring the growth and development of children in early childhood education (Rokom, 2018). Early Childhood Education are expected to become a place for best practice in implementing the MCH Handbook. The MCH Handbook can be used as a guide for stimulation in teaching and learning activities, a guide to nutrition fulfillment in healthy eating activities and can be used as a communication tool in parenting activities or parenting services with parents to optimize children's growth and development.

BKB PAUD Teratai Putih has implemented the MCH Handbook, one of the applications carried out is the Kartu Menuju Sehat (KMS) section with the aim of monitoring child nutrition and if the child is experiencing malnutrition, the BKB PAUD Teratai Putih the child's parents. Based on the description above, it is deemed necessary to further discuss how the implementation of the use of the MCH Handbook at BKB PAUD Teratai Putih, Kuningan, South Jakarta.

METHODS

The research approach used in this study is a qualitative. According to Bogdan and Taylor (in Moleong, 2012) defines a qualitative methodology as a research procedure that produces descriptive data in the form of written or spoken words from people and observable behavior. This study also uses a phenomenological approach. Phenomenology is to suspend all judgments about the real "natural attitude" of a person (Creswell, 2013). The phenomenological approach emphasizes the phenomena to be explored, expressed in terms of concepts and ideas, involving a philosophical discussion of the basic ideas that put forward the theory. Through the phenomenological approach used in this study, the researcher intends to explore the implementation of the use of the MCH Handbook. Data collection techniques in this qualitative research are by making observations, in-depth interviews, and documentation studies. The location of this research is BKB PAUD Teratai Putih, Pedurenan Masjid III street, RT.003 / 04 Karet Kuningan, Setiabudi, South Jakarta. The subjects of this study were the principal, three classroom teachers and three mothers (parents of students). This research was conducted in October 2020 - January 2021. This interview was intended to dig deep information about something that was not obtained through observation and documentation methods, namely regarding the implementation of the use of the MCH Handbook. The data analysis used in this research is the Miles and Huberman model. According to Miles and Huberman in Sugiyono (2011), qualitative data analysis activities are carried out interactively and continuously until completion. Activities in data analysis are data collection, data reduction, data presentation, and drawing conclusions.

RESULTS AND DISCUSSION

RESULT

Teacher Knowledge

The three BKB PAUD teachers Teratai Putih very well know the contents of the MCH Handbook by explaining that the MCH Handbook is a book to record children's growth and development in order to determine children's nutritional adequacy, and teachers apply the MCH Handbook to health programs in schools. The three teachers have over 50 years of age and apart from being teachers, the three teachers have been cadres for 12 years ago.

Mother (Parent) Knowledge

The three mothers (parents) of BKB PAUD Teratai Putih already know, understand and apply the contents of the MCH Handbook in the information section regarding children's daily care

(dental care) at home and visits to posyandu. The three mothers (parents of students) have the last education of primary school and secondary school.

Implementation of the Use (Maternal and Child Health) MCH Handbook at the Teratai Putih BKB PAUD

The MCH Handbook is implemented in the following activities:

- a. Visits to posyandu, as a means of monitoring children's growth and development through weight charts by recording them on Kartu Menuju Sehat (KMS), recording tools for giving vitamin a, extension tools or communication to parents. The visit is carried out once a month.



Figure 1. Monitoring children's growth

- b. Visits of health workers to schools, as a means of recording a child's dental growth and development (hearing power test and vision test). Dental examinations are carried out once a year and eye and ear examinations are carried out twice a year.



Figure 2. Dental examinations

- c. Habituation of the clean and healthy behavior, as a medium for information on how to brush teeth and wash hands. Toothbrush activities are carried out once in two weeks and washing hands is carried out at the time of activities before eating.
- d. School promotion and child development reporting, as a checklist on the indicators of child development in order to develop children's development. School promotion and child development reporting is carried out once a week by providing a connecting book.
- e. Reporting the level of achievement of child development, as a record book of health history of child growth and development. This reporting is done twice a year.
- f. Parenting, as a means of communication in providing education to parents regarding clean and healthy living habits, caring for children at home and developing children's development at home. Parenting is done once a month.

Supporting factors and inhibiting factors in the implementation of the use of the MCH Handbook at the Teratai Putih BKB PAUD

One of the supporting factors in the implementation of the use of the MCH Handbook at the Teratai Putih BKB PAUD is cadres who are also teachers making communication easier so they

can work together with parents in caring for and developing children's growth and development. The inhibiting factor in implementing the use of the MCH Handbook at the Teratai Putih BKB PAUD in the application of the MCH Handbook is the existence of parents who did not bring the MCH Handbook during posyandu activities on the grounds that it was missing or damaged.

DISCUSSION

Teacher Knowledge

The knowledge of the subject of Teacher 1, Teacher 2 and Teacher 3 of the MCH Handbook is that they really know the contents of the MCH Handbook so that they can apply the book to health programs in schools. This is in line with Notoadmojo (2012) that the level of knowledge consists of knowing, understanding, application, analysis, synthesis and evaluation. So that the knowledge that the teacher has in the form of applications has exceeded the knowledge level of knowing. The age background of the subject teacher 1, teacher 2 and teacher 3 who are 50 years of age and over and work as cadres is the cause of knowing about the MCH Handbook. This is in line with Notoatmojo (2007) in Purwaningsih (2013) that the factors that influence knowledge include experience and age.

Mother (Parent) Knowledge

According to the three mothers, the MCH Handbook was an important book for children's health, so they brought the book to the posyandu activity. This shows that the three mother subjects already know, understand, and apply the book. In line with Notoadmojo (2012) that the level of knowledge consists of knowing, understanding, application, analysis, synthesis and evaluation. The latest education taken by mother 1 SMK, Mother 2 SD and Mother 3 SMP is not an influencing factor, because the three mothers of research subjects know, understand and apply the MCH Handbook during a visit to the posyandu or when viewing information on teaching toothbrush children at home. This is not in line with the influencing factors according to Notoadmojo (2012) which explains that someone who has a higher education will have more knowledge than someone with a lower level of education.

Implementation of the Use (Maternal and Child Health) MCH Handbook at the Teratai Putih BKB PAUD

The three teachers, in recording their weight at the posyandu, use the Menuju Sehat Card in the MCH Handbook to find out the nutritional status of the child. This is in line with Ika (2017) that Posyandu monitors the growth and development of children through weight charts and records them on KMS (Kartu Menuju Sehat) as well as a tool for nutrition education to mothers with under five years of age. Furthermore, in the extension activity, the three teachers will ask or provide input regarding the results of weighing and the child's condition to parents and check the child development indicators in the MCH Handbook and if parents do not fill it in, cadres will instruct parents to fill it in by observing the child's development at home. . This is in line with Hasanbasri (2017) that the MCH Handbook is useful as a mother and child health record, a health monitoring tool and a means of communication between health workers and patients.

During the dental examination, hearing power tests and vision tests will be recorded in the MCH Handbook and if there are teeth that are hollow and damaged or there are hearing and vision problems, they will be referred to the puskesmas by recording the child's developmental problems. In line with the Ministry of Health (2015) the recording of hearing power tests is on page 68 "Results of Early Development and Development Early Intervention Detection Stimulation Services".

According to the three teachers, the hand washing and toothbrush activities began with the teacher looking at information on how to wash hands and brush teeth properly in the MCH Handbook. This is in line with the Ministry of Health (2015) that on page 28 of the MCH Handbook there is information on "Washing Hands Use Soap "which contains pictures of hand washing procedures and on page 45 of the MCH Handbook there is information on" Dental Care "which contains recommendations for giving toothpaste to how to brush your teeth.

In reporting child development activities, the teacher will ask parents to stimulate children's development at home and parents are instructed to check the indicators in the MCH Handbook and will be checked and discussed with the teacher during a visit to the posyandu. This is in line with the Ministry of Health and JICA (Japan International Cooperation Agency) (2009). The MCH Handbook has special benefits for recording and monitoring maternal and child health, communication and counseling tools.

Reporting on the level of achievement of child development includes reports on children's health and the teacher looks at health data through the MCH Handbook. This is in line with WHO (2018) that the MCH Handbook contains important information about MCH (Maternal and Child Health) which is useful as a primary health education medium and is a home-based record or home-based record used to record MCH history.

The use of the MCH handbook in parenting is as a medium in providing information. This is in line with the Indonesian Ministry of Health and JICA (2015) that the MCH Handbook is a communication and counseling tool with important information for mothers and families and the community regarding maternal and child health services including references and packages (standards) of MCH services, nutrition, immunization and growth development children.

Supporting factors and inhibiting factors in the implementation of the use of the MCH Handbook at the Teratai Putih BKB PAUD

The supporting factors that were found were when the posyandu program activities made it easier for cadres who were teachers to work together with parents in counseling activities to develop maximum child growth. This is in line with Lita's opinion (2019) that with the collaboration between cadres, health workers and parents, the stable growth and development of children follows the stages according to their age.

CONCLUSION

A Based on the results and discussion of the implementation of the use of the MCH Handbook at the Teratai Putih BKB PAUD, the researchers concluded that:

1. The three teachers and mothers (parents of students) BKB PAUD Teratai Putih very well know the MCH Handbook so that they can apply the MCH Handbook according to the instructions.
2. The MCH Handbook is implemented in the activities of visits to posyandu, visits by health workers to schools, habituation of clean and healthy living habits, school promotion and child development reports, reporting on child development achievement levels and parenting using the MCH Handbook as an information tool, monitoring children's growth and development. , health care records and communication tools.
3. Supporting factors in implementing the use of the MCH Handbook are cadres who are also teachers to make communication easier so that they can work together with parents in caring for and developing children's growth and development. One of the inhibiting factors is when there are parents who do not bring the MCH Handbook during the activity. posyandu by reason of missing or damaged. Conclusion should be withdrawn on the

basis of research findings, formulated concerns and research purposes. Conclusion is presented in one paragraph without numerical form of expression. Explain your research contributions to science.

REFERENCES

- Creswell, John. (2013). *Research Design Pendekatan Kualitatif, Kuantitatif dan Mixed*. Yogyakarta: Pustaka Pelajar.
- Depkes, RI. (2009). *Buku Kesehatan Ibu Dan Anak (KIA)*. Jakarta: Depkes dan JICA
- Depkes, RI. (2015). *Petunjuk teknis Penggunaan Buku Kesehatan Ibu Dan Anak (KIA)*. Jakarta: Depkes dan JICA.
- Hasanbasri M. dan Ernoviana. (2007). *Implementasi buku kesehatan ibu dan anak di Kabupaten Mimika Papua*. [e-journal] working Paper Series No 16 April 2007. Yogyakarta: Program Magister Kebijakan dan Manajemen Pelayanan Kesehatan Universitas Gadjah Mada.
- Kemendikbud. (2017). *Modul 5 Diklat Dasar Dalam Jaringan (Daring) Bagi Pendidik PAUD: Kesehatan dan Gizi Anak Usia Dini*. Bandung: Kemendikbud.
- Kemenkes, RI. (2015). *Buku Kesehatan Ibu Dan Anak (KIA)*. Jakarta: Kementerian Kesehatan dan JICA (Japan International Cooperation Agency).
- Kemenkes. (2013). *Buku Panduan Kader Posyandu Menuju Keluarga Sadar Gizi: Cetakan ke dua*. Jakarta: Kementerian Kesehatan RI.
- Kemenkes. (2016). *Pedoman Pelaksanaan Stimulasi, Deteksi dan Intervensi Dini Tumbuh Kembang Anak*. Jakarta: Kementerian Kesehatan RI
- Klaudia, Rafika. (2018). *Pelaksanaan Program Parenting di PAUD Uswatun Khasanah Kec. Pondok Kelapa Kab. Bengkulu Tengah*. Skripsi. Bengkulu: IAIN Bengkulu
- Limbong, J., Kawilarang, F., Neghe, S., & Macpal, E. (2012). *Makalah Kebutuhan Gizi dan Cairan Anak*. <http://documents.tips/documents/makalah-kebutuhan-gizi-pada-anak.html>.
- Mardhiati, Retno. (2019). *Guru PAUD: Pendidikan Perilaku Hidup Bersih dan Sehat (PHBS) Anak Usia Dini*. *Ikraith-Abdimas*, 2(3): 133-141.
- Moleong, Lexy J. (2012). *Metodologi Penelitian Kualitatif*. Bandung: PT Remaja Rosdakarya.
- Noviyanti, Ni Putu. (2015). *Pengetahuan, Sikap dan Pemanfaatan Buku KIA oleh Ibu Hamil di Wilayah Kerja Puskesmas I Denpasar Selatan*. Skripsi. Denpasar: Universitas Udayana.
- Proverawati, Atikah dan Rahmawati, Eni. (2016). *Perilaku Hidup Bersih dan Sehat*. Yogyakarta: Nuha Medika.
- Purwaningsih, Reni. (2014). *Hubungan Karakteristik Ibu Hamil dalam Memanfaatkan Buku KIA terhadap Tingkat Pengetahuan dan Sikap Ibu Hamil tentang Tanda-tanda Bahaya Kehamilan di Wilayah Kerja Puskesmas Karanganyar*. Skripsi. Purwokerto: Universitas Muhammadiyah Purwokerto.
- Ramadhanty, Lita. (2019). *Analisis Pertumbuhan dan Perkembangan Anak (Usia 4-5 Tahun) di Posyandu Teratai Kelurahan Bumi Raya Kecamatan Bumi Waras*. Skripsi. Lampung: UIN Raden Intan Lampung.
- Santoso, S dan Ranti L.A. (2004). *Kesehatan Dan Gizi*. Rineka Cipta. Jakarta.
- Sugiyono. (2010). *Metode Penelitian Pendidikan Pendekatan Kuantitatif, kualitatif dan R&D*. Bandung: Alfabeta
- Widyawati. (2018). *Ayo Tingkatkan Pemanfaatan Buku KIA untuk Pantau Kesehatan Ibu dan Anak*. <https://sehatnegeriku.kemkes.go.id/baca/umum/20180919/0627969/ayo-tingkatkan-pemanfaatan-buku-kia-pantau-kesehatan-ibu-dananak/>.
- Wijhati, Ellyda Rizki. (2019). *Pemanfaatan Buku Kesehatan Ibu dan Anak pada Ibu Hamil di Puskesmas*. *Jurnal Kebidanan dan Keperawatan 'Aisyiyah*, 15 (1): 46-53.
- World Health Organization (WHO). *Maternal mortality*. (2018).