



THE RELATIONSHIP OF KNOWLEDGE AND MOTHER MOTIVATION LEVEL WITH NUTRITION STATUS IN PRESCHOOL AGE CHILDREN 3-6 YEARS AT PUSKESMAS KEMIRI TANGERANG DISTRICT

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Research Report

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ABSTRACT

Introduction: Nutrition and health problems characterized by the use of unbalanced food are significant problems for most of the population, including children. In the world and in Indonesia, they are experiencing environmental challenges due to the 3 burdens of malnutrition which may worsen due to the Covid-19 pandemic. Children can face various kinds of malnutrition due to poor eating patterns, parenting applications that are not optimal. One of the significant aspects that affect the nutritional status of children is the aspect of mother's knowledge about nutrition in children. **Methods:** This research is quantitative in nature using correlational descriptive techniques with a cross sectional approach. The population in this study was 3.401 people and the number of samples taken using the Slovin formula was 80 people using purposive sampling technique. This study uses univariate and bivariate analysis with Chi Square test. **Results:** based on univariate analysis of 80 people the majority with a high level of knowledge as many as 61 people (76.3%), sufficient motivation as many as 62 people (77.5%) and nutritional status normal children as many as 37 children (46.3%). The results of the bivariate analysis with the chi square test were obtained for the level of knowledge with nutritional status p-value 0.026, and the results of the bivariate analysis of mother's motivation with nutritional status p-value 0.006. **Conclusion:** there is a relationship between the level of knowledge and motivation of mothers about balanced nutrition with the nutritional status of preschool children aged 3-6 years.

ARTICLE INFO

Received August 27, 2021

Accepted October 26, 2021

Online October 31, 2021

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julianifitri151@gmail.com**Keywords:**

Knowledge, Motivation, Nutritional Status

INTRODUCTION

Early age is also known as the golden age of the child. Referring to the RI Law No. 20 of 2003 concerning the national learning system, which means that early age is a child who is in the age range of 0-6 years. Nutritional needs from an early age are very important, balanced nutritional consumption will make children develop healthy and smart, if not fulfilled nutritional needs will result in child development such as slowing motor development, less intelligent, children's immune energy will be more susceptible to disease. (Amirullah et al., 2020).

According to a report by the World Health Organization (WHO), cases of malnutrition can be shown by the large number of malnutrition events which show the health of Indonesian citizens is the lowest in ASEAN, and is ranked 142 out of 170 countries. The data contained in the 2016 WHO, namely, the prevalence of malnutrition and undernutrition in children under five is 17.8%. It was recorded that in 2017, 22.2% or close to 150.8

million babies in the world faced stunting. More than half of the world's stunted babies come from Asia (55%) whereas more than a third (39%) live in Africa. Of the 83.6 million stunted infants in Asia, the highest proportion came from South Asia (58.7%) and the lowest proportion in Central Asia (0.9%). In 2018, around 77.2 million children under five suffer from stunting, 32.5 million children under five suffer from wasting, especially in Southeast Asia 8, (Hanifah et al., 2019).

Data from the World Health Organization (WHO) recorded that the incidence of malnutrition and malnutrition in early childhood in the world in 2016 increased to 8.3% and 27.5% respectively and in 2017 rose again to 8.8% every year. and 28%. This condition is quite worrying because in addition to affecting the growth and development of children, malnutrition is listed as one of the main triggers of early childhood death. WHO data in 2017 recorded 60% of infant and early childhood deaths related to cases of malnutrition.

According to UNICEF data in 2017, there are 92 million (13.5%) under-fives in the world who are underweight, 151 million (22%) (22%) under-fives are stunted and 51 million (7.5%) under-fives are from the African continent and Asia (Saputri & Tumangger, 2019).

In Indonesia, nutrition and health problems characterized by the use of unbalanced food are a significant problem for a large part of the population, including children. Early childhood is one of the groups who are vulnerable to nutritional problems, among the causes of which are low economic levels and unbalanced food intake, and low knowledge. According to the data, the prevalence of wasting in children under five is from 13.6% to 13.3% and decreased by 12.1%. Meanwhile, the prevalence of stunting in children under five was 36.8%, 35.6%, and 37.2%. The prevalence of underweight is 18.4%, 17.9%, and 19.6%, respectively (Faradilla & Ronitawati, 2021).

Indonesia is experiencing environmental challenges due to the 3 burdens of malnutrition which may worsen due to the Covid-19 pandemic. In general, there are 3 types of triggers for children to experience malnutrition directly, namely: insufficient instant breastfeeding and lack of intake and poor diet for children, and parenting by grandparents or other people who are less than optimal. Insufficient nutritional health for mothers, as well as increasing rates of widespread disease are usually caused by unsanitary living areas and lack of clean water sanitation, and inadequate access to health services. Apart from that, these factors are also exacerbated by widespread poverty, high unemployment rates, and low levels of learning (UNICEF, 2020).

The government has determined stunting as one of the priority programs. Based on the Minister of Health Regulation No. 39 of 2016 concerning guidelines for implementing a healthy Indonesia program with a family approach, the efforts that have been made to reduce the prevalence of stunting include the following: First, mothers who are pregnant and give birth, intervene in the first 1,000 days of life and seek guarantees. quality of ante natal care (ANC) in an integrated manner and improve delivery in health facilities. implementation of a feeding program with large amounts of calories, protein, and micronutrients (TKPM). Detect disease early (wide and not widespread). Second, the baby: monitoring the baby's development, organizing early stimulation of children's growth, distributing maximum health services. Third, school-age children: Implementing School Health Efforts (UKS). Organizing school children nutrition program (PROGAS)(Ministry of Health RI, 2018).

Based on data from the Ministry of Health's Basic Health Research (RISKESDAS), it was recorded that in 2018 the prevalence of malnutrition in early childhood was recorded at 13.8%, meaning that 212 nutritional problems and malnutrition in Indonesia is still a public health problem and is approaching a high prevalence. The prevalence of stunting in children under five is 30.8% (national), for the prevalence of stunting for children under five for the Tangerang Regency area is 23.2%, while based on the nutrition E-PPGBM data report (Community-Based Nutrition Recording and Reporting Application) in February 2020 the prevalence rate stunting in the district. Tangerang is 11.6% (Risksedas, 2019).

According to the 2016 Basic Health Research (Risksedas) data, the prevalence of early childhood nutritional status based on body weight for age (W/U) in Indonesia, namely poor nutrition reaches 5.7%, undernutrition reaches 13.9%, good nutrition reaches 75,9% and more nutrition as much as 4.5%. From data at the Kemiri Public Health Center, Tangerang Regency in February 2021, especially in Kemiri Village, the prevalence of malnutrition was 15 children, undernutrition was 26 children, risk of malnutrition was 130 children, and obesity was 4 children.

Every parent should know the issues that are important to the nutritional status of preschool-aged children. Good maternal nutrition will create well-nourished children as well. Well-nourished children become a legacy as well as an investment in human resources in the future. Preschool-aged children are listed as nutritionally vulnerable groups, which are groups of people who easily suffer from nutritional disorders. Meanwhile, children are currently experiencing a relatively fast growth process. There are 4 most common nutritional problems in early childhood in Indonesia, namely: PEM (Protein Energy Deficiency), VAC (Vit A deficiency), Iodine deficiency (Edemic Goiter), and iron deficiency (Iron Nutrient Anemia). This lack of nutrition results in sensitivity to infectious diseases which can lead to an increase in early childhood mortality. Early childhood usually experience malnutrition problems, this needs to be highlighted considering that early childhood is an association whose health needs must be considered because they are in a period of growth. The absence of nutritional needs in early childhood will not only have a disruptive effect on actual development but will also cause mental improvement problems. Children who are malnourished after growing up will not be tall and their muscle tissue is immature. Meanwhile, good health status will help the interaction of development and progress of children to achieve ideal development The absence of nutritional needs in early childhood will not only have a disruptive effect on actual development but will also cause

mental improvement problems. Children who are malnourished after growing up will not be tall and their muscle tissue is immature. Meanwhile, good health status will help the interaction of development and progress of children to achieve ideal development. The absence of nutritional needs in early childhood will not only have a disruptive effect on actual development but will also cause mental improvement problems. Children who are malnourished after growing up will not be tall and their muscle tissue is immature. Meanwhile, good health status will help the interaction of development and progress of children to achieve ideal development (Adha & Aprilla, 2020).

Some of the direct causes of health problems are through food and disease, while the deviant causes are insufficient family food needs, poor child care parenting, low birth weight, maternal nutrition during pregnancy. In this way, the level of healthy information for parents is expected to increase nutritional information and reduce dietary problems in the family (Tadale et al., 2021).

One of the significant aspects that affect the nutritional status of children is the aspect of mother's knowledge about nutrition in children. Nutritional knowledge is all forms of data on the source and use of food substances needed for the body and its implementation in everyday life. Poverty and lack of nutritious food supplies are significant aspects of the problem of malnutrition (Amerta, 2018).

Lack of knowledge of mothers affects the nutritional status of children and makes it difficult to choose nutritious food for their children. Mother's knowledge about nutrition is what she knows about healthy food, healthy food for certain age groups and how she chooses, processes and prepares food correctly. Mother's level of knowledge about nutrition also plays a role in the magnitude of nutritional problems in Indonesia (Fauzia et al., 2018).

MATERIALS AND METHODS

The research design used by the researcher in this research is the correlation method with the Cross Sectional approach. This research was conducted at the Kemiri Public Health Center, Tangerang Regency. The study was conducted in May - July 2021. The population in this study The

population in this study were mothers who had preschool children aged (3-6 years) at Kemiri Health Center, Tangerang Regency with a total population of 100 respondents.

Samples were taken using the Slovin formula, and obtained a total of 80 people. The sampling method uses the Purposive Sampling technique. The type of instrument used in this study is a questionnaire related to the relationship between the level of knowledge and motivation of mothers about balanced nutrition with the nutritional status of preschool children aged 3-6 years. The research instrument used in this study was to test the validity and reliability of 30 mothers in kp.Sempur RT.001/006.

Data processing is carried out. Generally, data processing goes through the following steps: Editing (Data Editing) The results of interviews or questionnaires obtained or collected through questionnaires need to be edited first, if in fact there are still incomplete data or information, and it is impossible to try re-interviewing, until the questionnaire is issued. Create a code sheet (Coding Sheet) or code card (Coding Sheet) Code sheets or cards are instruments in the form of columns to record data manually. The sheet or code card contains the respondent's number, and the question numbers. Entering Data (Data Entry) It is to fill in the columns or boxes of the code sheet or code card according to the answers to each question. Tabulation That is to make data tables, in accordance with the research objectives or desired by the researcher.

Data analysis in this study was carried out including univariate and bivariate analysis. With the help of SPSS (Statistical Product and Service Solution) version 22.0 program. Univariate analysis is by displaying frequency distribution tables to see the description of the frequency distribution of respondents according to the variables studied, both dependent and independent variables. Bivariate analysis is used in research with the aim of looking at two variables that are thought to be related or correlated. The statistical test used in the bivariate analysis is the chi square test, the reason is that this test is carried out on categorical/qualitative variables. This test aims to examine differences in the proportions of two or more sample groups (Hartono, 2017).

RESULTS

Table 1 Distribution of Sex Frequency of preschool-aged children in posyandu in the Kemiri Public Health Center, Tangerang

No	Gender	Total (n)	Percentage (%)
1	Female	35	43.8%
2	Male	45	56.2%
	Total	80	100%

Based on the analysis of table 1 that the frequency distribution based on the sex of preschool children 3-6 years in psosyandu kemiri, tangerang district, the respondents are generally female as many as 35 people (43.8%) of 80 respondents, and male sex as many as 45 respondents. with a percentage result of (56.3%). It can be concluded that the respondents are dominated by male sex because the majority of preschool children aged 3-6 years at posyandu at Kemiri Health Center are male.

Table 2 Frequency distribution of mother's level of knowledge about balanced nutrition with nutritional status in preschool age children at posyandu in Kemiri Health Center, Tangerang Regency

Knowledge	Frequency	Percentage (%)
Tall	61	76.3%
Currently	17	21.2%
Low	2	2.5%
Total	80	100%

Based on the analysis in table 1.2 that in general the mother's level of knowledge is in the high category as many as 61 respondents (76.3%).

Table 3 Frequency distribution of mother's motivation about balanced nutrition with nutritional status in of Kemiri Public Health Center, Tangerang Regency

Motivation Mother	Frequency	Percentage (%)
Well	12	15.0%
Enough	62	77.5%
Not enough	6	7.5%
Total	80	100%

Based on table 3, it can be seen that most of the mothers' motivations fall into the sufficient category as many as 62 people (77.5%).

Table 4 Distribution of the frequency of nutritional status in preschool age children in posyandu in the Kemiri Health Center area, Tangerang Regency

Status Nutrition	Frequency	Percentage (%)
Fat	36	45.0%
Normal	37	46.2%
Thin	7	8.8%
Total	80	100%

Based on table 4, it can be seen that some of the preschool age children in posyandu in the Kemiri Health Center area that most of the nutritional status is normal as many as 37 children (46.3%), obese nutritional status as many as 36 children (45.0%), and underweight nutritional status as many as 7 children (8.8%).

Table 5 Distribution of nutrition frequency based on knowledge level in preschool age children in posyandu in the Kemiri Health Center area Tangerang

Level Mapper-Huan	Nutritional status								P-Value
	Fat		Normal		Thin		Total		
	n	%	n	%	N	%	N	%	
Tall	24	30%	31	38.8%	3	3.8%	58	72.5%	0.026
Currently	9	11.2%	6	7.5%	4	5.0%	19	23.8%	
Low	3	3.8%	0	0.0%	0	0.0%	3	3.7%	
Total	33	45%	40	46.3%	7	8.8%	80	100%	

Based on table 5 below, 80 respondents were stated to have a high level of maternal knowledge about balanced nutrition with obese nutritional status as many as 24 respondents (30.0%), high maternal knowledge level with Normal nutritional status as many as 31 respondents (38.8%), knowledge level High mother with thin nutritional status as many as 3 respondents (3.8%), and knowledge level of Medium mother with obese nutritional status as many as 9 respondents (11.24%), knowledge level of Medium mother with Normal nutritional status as many as 6 respondents (7.5%), the knowledge level of moderate mothers with underweight nutritional status was 4 respondents (5.0%), and low knowledge levels of mothers with obese nutritional status were 3 respondents (3.7%), Low knowledge levels of mothers with Normal nutritional status did not exist, and the level of knowledge of the mother is Low with no nutritional status. Based on the bivariate analysis using the Chi-Square test, statistical results

Table 6 Distribution of the frequency of nutritional status in preschool age children in posyandu in the Kemiri Health Center area, Tangerang Regency

Motivation mother	Nutritional status								P-Value
	Fat		Normal		Thin		Total		
	n	%	n	%	N	%	N	%	
Well	7	8.8%	5	6.3%	0	0.0%	12	15.0%	0.006
Enough	24	30.0%	32	40.0%	4	5.0%	60	75.0%	
not enough	5	6.3%	0	0.0%	3	3.8%	8	10.0%	
Total	33	41.3%	40	50.0%	7	8.8%	80	100%	

Based on table 6 below with 80 respondents stated to have maternal motivation about balanced nutrition Good with obese nutritional status as many as 7 respondents (8.8%), Good mother motivation with Normal nutritional status as many as 5 respondents (6.3%), Good mother motivation with There are no thin nutritional status, and Mother's motivation is Enough with Fat nutritional status as many as 24 respondents (30%), Mother's motivation is Enough with Normal nutritional status as many as 32 respondents (40%), Mother's motivation is Enough with thin nutritional status as many as 5 respondents (6.3%), and Mother's motivation is less with obese nutritional status as many as 3 respondents (3.8%), motivation of poor mothers with normal nutritional status is absent, and motivation of mothers is less with thin nutritional status as many as 3 respondents (3.8%). Based on bivariate analysis using the Chi-Square test, statistical results were obtained and P Value was 0.006 and the value was <0.05 , H_a was accepted, which means there is a relationship between mother's motivation about balanced nutrition and the nutritional status of preschool-aged children.

DISCUSSION

The results of the frequency distribution conducted by the researchers show that based on the analysis in table 5.5 that in general the level of knowledge of mothers is in the high category as many as 61 respondents (76.3%). The percentage of respondents who have a high level of knowledge is greater than those who have low motivation. Knowledge is the result of knowing and occurs after people do to a certain object. This shows that mother's knowledge is very influential in improving the nutritional status of children, knowledge is influenced by several factors, one of which is education.

The 80 respondents stated to have a high level of maternal knowledge about balanced nutrition with obese nutritional status as many as 21 respondents (36.2%), high maternal knowledge level with Normal nutritional status as many as 34 respondents (58.6%), maternal knowledge level High with skinny nutritional status as many as 3 respondents (5.2%), and mother's level of knowledge Medium with obese nutritional status

As many as 9 respondents (47.4%), the level of knowledge of moderate mothers with normal nutritional status was 6 respondents (31.6%), the level of knowledge of moderate mothers with underweight nutritional status was 4 respondents (21.1%), and the level of knowledge of mothers Low with fat nutritional status as many as 3 respondents (100.0%), low level of knowledge of mothers with normal nutritional status does not exist, and level of knowledge of mothers with low nutritional status does not exist. This study illustrates that there is a relationship between the mother's knowledge level and the child's nutritional status where P Value <0.05 ($P = 0.026$) which means that there

is a significant relationship between the mother's level of knowledge and the child's nutritional status with a moderate level of closeness.

The results of this study are in line with the results of the study (Program et al., 2017) in the working area of the joint health center, it was found that the level of knowledge included in the good category was greater than the level of knowledge of the mother was not good. that almost all of the mother's knowledge was in the good category as many as 37 people (84.1%), The results of the spearman rank correlation test obtained p-value = 0.00 where p-value = $0.00 < (0.05)$, so it can be concluded that, "there is a significant (strong) relationship between knowledge and mother's motivation in improving the nutritional status of under-fives with poor nutritional status in the working area of the Bareng Health Center". The results of this study are in line with research conducted by (Amerta, 2018) at the Deniawati clinic, Stabat District, Langkat Regency as many as 34 people. It was found that most of the nutritional status of children aged 1-3 years was good, as many as 30 respondents (88.2%) and more than 3 respondents (8.8%). Good knowledge has children who have more nutritional status as many as 3 respondents (8.8%), respondents with sufficient knowledge have children with good nutritional status as many as 18 respondents (52.9%) and respondents with less knowledge have children who have good nutritional status namely as many as 12 respondents (35.3%). The results of statistical analysis using the chi-square test obtained a p value of 0.000 (<0.05) so that it can be seen that there is a significant relationship between mother's knowledge and nutritional status of toddlers. This is reinforced according to (Khayati, 2020) The research was carried out in

the Gogik village area, West Ungaran sub-district, Kab. Semarang as many as 80 respondents. The results showed that most of the research subjects had a level of knowledge about toddler nutrition in the good category, namely 39 (48.8%). Most of the nutritional status of children under five is in the normal category, namely 58 (72.5%). There is a relationship between mother's knowledge about nutrition and the nutritional status of children under five with a p value of 0.000. The mother's level of knowledge about toddler nutrition greatly affects the nutritional status of the toddler because the mother is the one with the greatest attachment to the child. The togetherness of mothers with their children is greater than that of other family members so that they better understand all the needs that children need. Mother's knowledge is the main key to meeting the nutritional needs of toddlers. (Nurmaliza, 2019) in the Rumbai Pesisir sub-district, Pekanbaru City with a sample of 70 respondents who stated that there was a relationship between knowledge and nutritional status of children under five, indicating that the majority of mothers had good knowledge of 44 people (62.9%), and the majority of toddlers had good nutrition as many as 44 people (62.9%).

The results of the frequency distribution conducted by the researchers show that the percentage of respondents who have sufficient motivation is greater than that of respondents who have less motivation. Based on table 5.6, it can be seen that most of the mothers' motivations fall into the sufficient category as many as 62 people (77.5%). according to (Fadhilah Nur Muhammad, 2010) Motivation is an energy from within, based on an even understanding or self-existence and the purpose of life as a human being that is more meaningful than before. Mother's knowledge as a process of the relationship between motivation that can make motivation better. Good motivation serves as a support system in improving children's nutrition for the better. Lack of motivation will result in poor nutritional status of children. For researchers, motivation for a mother is very meaningful for the health of her child, because with this motivation the mother will be more likely to generate feelings and responses to achieve the goals to be achieved. So that with the motivation or encouragement from other groups so that mothers and children can better fulfill their nutrition and show activity.

Based on the table above, 80 respondents were stated to have Mother's motivation about balanced nutrition Good with obese nutritional status as many as 5 respondents (41.7%), Good mother motivation with Normal nutritional status as many as 7 respondents (58.6%), Mother's motivation Good with

nutritional status There are no thin nutrition, and Mother's motivation is Sufficient with Fat nutritional status as many as 23 respondents (38.3%), Mother's motivation is Enough with Normal nutritional status as many as 33 respondents (55.0%), Mother's motivation is Enough with underweight nutritional status as many as 4 respondents (6.7%), and Mother's Motivation is Less with Fat nutritional status as many as 5 respondents (62.5%), Lack of motivation of mothers with Normal nutritional status does not exist, and Mother's motivation is Less with Thin nutritional status as many as 3 respondents (37, 5%). This study describes the relationship between mother's motivation about balanced nutrition with nutritional status in children where P Value <0.05 ($P = 0.006$) which means that there is a significant relationship between mother's motivation about balanced nutrition and nutritional status in children with a moderate level of close relationship. .

This research is in line with research (Program et al., 2017) in the working area of Puskesmas Bareng with 44 respondents who stated that most of the respondents' motivation was in the good category as many as 32 people (72.7%). Spearman rank correlation test results obtained p-value = 0.00 where p-value = $0.00 < (0.05)$, so it can be concluded that, "there is a significant (strong) relationship between mother's motivation in improving nutritional status in toddlers with poor nutritional status. The results of data analysis can be seen that the correlation coefficient of mother's motivation with nutritional status shows good motivation with nutritional status in children, indicating that mother's motivation has a strong correlation with nutritional status. And this research is in line with research conducted by (Lilik, 2017) at the Sumigaluh I Health Center that shows the level of motivation of respondents regarding giving a balanced menu to toddlers is mostly in the strong category as many as 16 respondents. Shows the level of motivation of respondents at the pretest regarding the provision of a balanced menu to toddlers at most in strong categories as many as 16 respondents with a presentation of 64.0% while at least 9 respondents with a presentation of 36.0%. After being given nutrition counseling on mother's motivation in giving balanced menu for toddlers in the strong category as many as 22 respondents with a presentation of 88.00% while at least in the moderate category as many as 3 respondents with a presentation of 12.0%. There is an effect of balanced nutrition counseling on the mother's level of motivation in giving a balanced menu to toddlers, this is shown from the results of statistical tests with the Wilcoxon signed ranks test, obtained a p value of 0.000 where the p value <0.05 . It is hoped that mothers

can apply the provision of a balanced menu. This study is in line with research (Yessi Ardiani, 2017) at the Rasimah Ahmad Bukittinggi Health Center which stated that more than 36 people (58.1%) of respondents had good motivation, and less than half of 26 people (41.9%) of respondents had no motivation. good. The results of statistical tests obtained p value = 0.000 ($p < .$), so it can be concluded that there is a relationship between the motivation of mothers and children under five with posyandu visits. And this research is in line with research (Safrizal & Zakiyuddin, 2018) at the posyandu in the working area of the Johan Pahlawan Health Center, which states that out of 43 respondents who have good knowledge and have positive motivation, 25 (58.1), and 18 (41.9) respondents have negative motivation. Of the 55 respondents with poor knowledge, 17 (30.9) were positively motivated and 38 (69.1) were negatively motivated. There is a relationship between knowledge and motivation which shows the value of P . Value = 0.013.

The results of the frequency distribution conducted by the researchers showed that the percentage of respondents who had fat nutrition was greater than the underweight nutritional status. Based on table 5.7, it can be seen that most of the preschool age children in posyandu in the Kemiri Health Center area that most of the nutritional status is normal as many as 37 children (46.3%), obese nutritional status as many as 36 children (45.0%), and underweight nutritional status as many as 7 children (8.8%). The results of this study were taken from the results of weight and height weighing carried out at the posyandu which were distributed through direct questionnaires to mothers who have preschool children aged 3-6 years. And processed by calculating the Child's Body Mass Index (BMI). according to (Nurmaliza, 2019) Factors that can affect the nutritional status of toddlers are food intake in children and infectious diseases which are the direct cause, while the indirect causes are food supply at home, knowledge, parenting patterns, health and environmental health services and poverty. Knowledge in this study is the understanding of mothers under five about the nutritional needs of children under five including the understanding of nutrients, kinds, benefits and signs of malnutrition.

CONCLUSION

Based on the results of the discussion of the research on the relationship between the level of knowledge and motivation of mothers about balanced nutrition with nutritional status in pre-school children aged 3-6 years at the Kemiri Health Center, Tangerang Regency, the following conclusions were found: Based on the frequency distribution analysis of the mother's

level of knowledge in that in general the highest level of knowledge is with a high level of knowledge as many as 61 mothers (76.3%) of 80 mothers.

Based on the analysis of the frequency distribution of mothers' motivation in that in general the most motivation is with sufficient motivation as many as 62 mothers (77.5%) of 80 mothers. Based on the analysis of the frequency distribution of nutritional status in children aged 3-6 years in that in general the highest nutritional status is with normal nutritional status as many as 37 children (46.3%) of 80 children.

Based on the bivariate analysis in on the "relationship between mother's level of knowledge and nutritional status of children" from the Chi-Square test results obtained asymptotic significance value (2-sided) or "p value" 0.026 where if the significance value or "p-value" < 0.05 then H_a is accepted and H_o is rejected, which means "there is a relationship between mother's level of knowledge and child's nutritional status".

Based on the bivariate analysis in on "Motivation of mothers with nutritional status in children" from the Chi-Square test results obtained asymptotic significance value (2-sided) or "p value" 0.006 where if the significance value or "p- value" < 0.05 then H_a is accepted and H_o is rejected, which means "there is a relationship between mother's motivation and child's nutritional status".

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