PENGARUH PROGRAM PENDAMPINGAN IBU HAMIL KURANG ENERGI KRONIS TERHADAP KEJADIAN BERAT BADAN LAHIR RENDAH

Sestu Retno Dwi Andayani[1], Ona Oktalina[2], Anis Satus Syarifah[3], Mudhawaroh[4], Rodiyah[5]
[1,3,4,5] Sekolah Tinggi Ilmu Kesehatan Pemkab Jombang
[2] Dinas Kesehatan Kabupaten Jombang

Article Info

Article History:
Received 16/02/2026.
Revised -
Accepted 10/03/2026.

Keywords:
Chronic Energy Defisiency
Low Birth Weight
Prenatal asistance

ABSTRAK

Berat Badan Lahir Rendah (BBLR) berkontribusi terhadap tingginya angka morbiditas dan mortalitas neonatal di Indonesia. Determinan utama BBLR adalah Kurang Energi Kronis (KEK) pada ibu hamil, kehamilan KEK berisiko 4 kali melahirkan bayi BBLR. Program pendampingan ibu hamil KEK merupakan intervensi komprehensif selama masa kehamilan. Penelitian ini bertujuan untuk mengetahui penggaruh pendampingan Ibu Hamil KEK dengan kejadian BBLR. Jenis penelitian ini adalah pra-eksperimen one-group pre-post tes desaign. Populasi adalah ibu Hamil KEK di 10 Puskesmas wilayah kerja Kabupaten Jombang bulan Mei 2025 sejumlah 100 ibu hamil. Sampel menggunakan tehnik Consecutive sampling, besar sampel 87 ibu. Pendampingan selama enam (6) bulan, mulai masa kehamilan sampai dengan nifas. Selama pendampingan ibu Hamil mendapatkan pemeriksaan, penyuluhan gizi, pemberian Multiple Micronutrient Supplement (MMS), Komunikasi Antar Pribadi (KAP) serta adanya dukungan dari Tim Penggerak PKK. Uji statistik menggunakan uji wilcoxon Signed Rank menunjukkan adanya perbedaan yang signifikan. Hasil penelitian menunjukkan 42 ibu status gizi Normal melahirkan bayi Berat normal 83,3% dan BBLR 17,7%. Ibu KEK 45, melahirkan bayi Berat normal 75,5% dan BBLR 24,4%. Perlu pendampingan ibu hamil KEK dalam Upaya menurunkan angka kejadian BBLR, menginggat bahwa Bayi yang lahir dengan BBLR dapat meningkatkan risiko kematian neonatal dan gangguan tumbuh kembang.

ABSTRACT

Low birth weight (LBW) contributes to high neonatal morbidity and mortality rates in Indonesia. The main determinant of LBW is chronic energy deficiency (CED) in pregnant women, where increases the risk by four times. The CED pregnant women assistance program is a comprehensive intervention during pregnancy. This study aims to determine the effectiveness of this program on LBW cases. This study is a pre-experimental one-group pre-post test design. The population is 100 CED's pregnant women at 10 primary health centers in Jombang in May 2025. The sample size is 87 women, uses consecutive sampling. The intervention was provided for six months, starting from pregnancy to postpartum. During the period, pregnant women received examinations, nutrition counseling, Multiple Micronutrient Supplement (MMS), interpersonal communication (KAP), and PKK Teams support. Statistical testing using Wilcoxon showed a significant difference. The 42 mothers with normal nutritional status delivered 83.3% normal weight babies, while 17.7% delivered LBW babies. Another hand, among the 45 CED's

mothers, 75.5% delivered normal weight babies, while 24.4% delivered LBW babies. Support for CED pregnant women is needed to reduce the incidence of LBW, considering that LBW babies can increase the risk of neonatal mortality and growth and development disorders.

Corresponding Author: sestu.retno@yahoo.com